HAND DELIVERED

09 FS-1

Rhode Island Ethics Commission

2009 YEARLY FINANCIAL STATEMENT

RECEIVED
RHODE ISLAND
ETHICS COMMISSION
10 AUG 10 AM 10: 27

ALL QUESTIONS REFER TO THE CALENDAR YEAR JANUARY 1, 2009 THROUGH DECEMBER 31, 2009 UNLESS OTHERWISE SPECIFIED.

PLEASE ANSWER ALL QUESTIONS AND WHERE YOUR ANSWER IS "NONE" OR "NOT APPLICABLE" SO STATE. ANSWERS SHOULD BE PRINTED OR TYPED, and additional sheets may be used if more space is needed. For clarification of any question, read instruction sheet.

Note: If you are a state or municipal official or employee who is required to file a Yearly Financial Statement, a failure to file the Statement is a violation of the law and may subject you to substantial penalties, including fines. If you received a 2009 Yearly Financial Statement in the mail but believe you did not hold a public position in 2009 or 2010 that requires such filing, you should contact the Ethics Commission (See Instruction Sheet for contact information).

1. Lusi Joseph M.
NAME OF OFFICIAL (LAST) (FIRST) (INITIAL)

2. 124 West Park St. Prov. R.I. 02908
HOME ADDRESS (STREET) (CITY/TOWN) (ZIP CODE)

MAILING ADDRESS (If different from home address)

3. List Public Position(s) you hold and governmental unit:

N/A
(PUBLIC POSITION) (MUNICIPALITY, STATE OR REGIONAL)

(PUBLIC POSITION) (MUNICIPALITY, STATE OR REGIONAL)

I was elected on ____ (date). I was appointed on ____ (date). I was hired on ____ (date).

If you no longer hold a public position, state date of termination or resignation _____.

4. List elected office(s) for which you were/are a candidate in either calendar year 2009 or 2010 (Read instruction #4)

N/A

5. List the following: NAME OF SPOUSE

N/A

6. List the names of any employer from which you, your spouse, or dependent child received $1,000 or more gross income during calendar year 2009. If self-employed, list any occupation from which $1,000 or more gross income was received. If employed by a state or municipal agency, or if self-employed and services were rendered to a state or municipal agency for an amount of income in excess of $250, list the date and nature of services rendered. If the public position or employment listed in #3, above, provides you with an amount of gross income in excess of $250 it must be listed here. **(Do Not List Amounts.)**

NAME OF FAMILY MEMBER EMPLOYED	NAME AND ADDRESS OF EMPLOYER OR OCCUPATION	DATES AND NATURE OF SERVICES RENDERED
	Futuristic district	Full Time mangement
	Futuristic district west	Full Time mangement

7. List the address or legal description of any real estate, other than your principal residence, in which you, your spouse, or dependent child had a financial interest.

NAMES	NATURE OF INTEREST	ADDRESS OR DESCRIPTION
See Attached list		

8. List the name of any trust, name and address of the trustee of any trust, from which you, your spouse, or dependent child or children individually received $1,000 or more gross income. List assets if known. **(Do Not List Amounts.)**

NAME OF TRUST: N/A

NAME OF TRUSTEE AND ADDRESS: _____

_____

NAME OF FAMILY MEMBER RECEIVING TRUST INCOME: _____

ASSETS: _____

9. List the name and address of any business organization or other entity, whether for profit or non-profit, in which you, your spouse, or dependent child held a position as a director, officer, partner, trustee, or a management position.

NAME OF FAMILY MEMBER	NAME AND ADDRESS OF BUSINESS	POSITION
N/A		

10. List the name and address of any interested person, or business entity, that made total gifts or total contributions in excess of $100 in cash or property during calendar year 2009 to you, your spouse, or dependent child. Certain gifts from relatives and certain campaign contributions are excluded. (See instruction #10)

NAME OF PERSON RECEIVING GIFT OR CONTRIBUTION	NAME AND ADDRESS OF PERSON OR ENTITY MAKING GIFT OR CONTRIBUTION
N/A	

11. List the name and address of any business in which you, your spouse, or dependent child individually or collectively holds a 10% or greater ownership interest, or a $5,000 or greater ownership or investment interest.

NAME OF FAMILY MEMBER	NAME AND ADDRESS OF BUSINESS
Joseph M. Lusi	Futuristic District 114 W. Park St. Pow. RI 02908
Rebecca Foster	
Joseph M. Lusi	Futuristic District West 209 Redwood rd. Salmon Id. 83467

12. If any business listed in #11, above, did business in excess of a total of $250 in calendar year 2009 with a state or municipal agency, **AND** you are a member or employee of the agency or exercise direct or legislative control over the agency, list the following:

NAME AND ADDRESS OF BUSINESS	NAME OF AGENCY	DATE AND NATURE OF TRANSACTION
N/A		

13. If any business listed in #11, above, was a business entity subject to direct regulation by a state or municipal agency, **AND** you are a member or employee of the agency or exercise direct or legislative control over the agency, list the following:

NAME AND ADDRESS OF BUSINESS	NAME OF REGULATING AGENCY
N/A	

14. If you, your spouse, or dependent child individually or collectively acquired or divested a 10% ownership interest or a $5,000 or greater ownership or investment interest in a business after January 1, 2010 and before the date you file this statement **AND** if said business was regulated by a state or municipal agency of which you are an employee or a member, or over which you exercise direct or legislative authority, list the following:

NAME AND ADDRESS OF BUSINESS	DESCRIPTION OF INTEREST (NOT AMOUNT) AND DATE ACQUIRED AND/OR DIVESTED
N/A	

NAME OF REGULATING AGENCY	HOW REGULATED
N/A	

15. If you, your spouse, or dependent child individually or collectively acquired or divested a 10% ownership interest or a $5,000 or greater ownership or investment interest in a business after January 1, 2010 and before the date you file this statement, which did business in excess of $250 with a state or municipal agency of which you are an employee or a member, or over which you exercise direct or legislative authority, list the following:

NAME AND ADDRESS OF BUSINESS	DESCRIPTION OF INTEREST DATE ACQUIRED AND/OR DIVESTED (DO NOT INCLUDE AMOUNT)	NAME OF STATE OR MUNICIPAL AGENCY
N/A		

16. If you, your spouse or dependent child were indebted in an amount in excess of $1,000 to any person, business entity or other organization other than (i) any person related to you, your spouse or dependent child at any time within the third degree of consanguinity, or (ii) a financial institution regulated by any state or by the United States where such indebtedness is secured solely by a mortgage of record on real property used exclusively as your principal residence, or (iii) any indebtedness arising from transactions involving credit cards, please list the following:

NAME AND ADDRESS OF DEBTOR	NAME AND ADDRESS OF LENDER
Joseph M. Lusi 124 West Park St. Prov. R.I. 02908	Charles Reisig + Carol Reisig 821 14th St. SW Edmunds, Wa. 98020

I certify under penalty of perjury, that this Financial Statement is a complete and accurate response to the questions presented as to the financial information and interests during the year 2009 of myself, my spouse, and my dependent children. I acknowledge that I may request an advisory opinion from the Ethics Commission as to my conduct under the Code of Ethics. I understand that a copy of the Code of Ethics will be provided to me at no cost upon request by contacting the Ethics Commission.

Joseph M. Lusi
SIGNATURE

State of Rhode Island
County of Providence

Subscribed and sworn to before me at Providence this 10th day of August 2010.

My Commission expires: 9/28/2013

Suzy Meo
SIGNATURE OF NOTARY PUBLIC

THIS STATEMENT WILL BE RETURNED IF IT IS NOT SIGNED AND NOTARIZED AND IF ANY QUESTION IS NOT ANSWERED.

R.I. Properties

Primary residence →

124 West Park ST. Providence 02908
135 West Park ST. Providence 02908
125 West Park ST " "
116 Calverly ST " "
380 Smith ST " "

I hold notes on:

4 1/2 Esten ST " "
117 West Park ST. " "

Idaho Properties

204 Redwood rd. Salmon Id. 83467

Parcel T-3762 999 Old Stage rd. " "
21, 18, 21

19+- Cabin Creek rd. " "

307 State ST. " "

I hold a notes on

104-106 Antelope dr. " "

204 Cinnabar Circle " "

GENERAL OFFICER ADDENDUM
TO 2009 FINANCIAL DISCLOSURE STATEMENT

If you hold, or are a candidate for, a statewide general office (Governor, Lieutenant Governor, Secretary of State, Attorney General, General Treasurer), list all sources and amounts of income in excess of two hundred dollars ($200), you received during calendar year 2009. R.I. Gen. Laws § 36-14-17(b)(2).

SOURCE AND DESCRIPTION OF INCOME:

Name of Source: Futuristic District

Address: 124 West Park St.
Prov. R.I. 02908

Description: Property management
rental income

AMOUNT OF INCOME:
(*check one*)

- ☐ Not more than $1,000
- ☐ $1,001 to $10,000
- ☐ $10,001 to $25,000
- ☑ $25,001 to $50,000
- ☐ $50,001 to 100,000
- ☐ $100,001 to $200,000
- ☐ $200,001 to $500,000
- ☐ $500,001 to $1,000,000
- ☐ More than $1,000,000

SOURCE AND DESCRIPTION OF INCOME:

Name of Source: Futuristic District West

Address: 204 Redwood rd.
Salmon Id. 83467

Description: property management
rental income

AMOUNT OF INCOME:
(*check one*)

- ☐ Not more than $1,000
- ☑ $1,001 to $10,000
- ☐ $10,001 to $25,000
- ☐ $25,001 to $50,000
- ☐ $50,001 to 100,000
- ☐ $100,001 to $200,000
- ☐ $200,001 to $500,000
- ☐ $500,001 to $1,000,000
- ☐ More than $1,000,000

I certify under penalty of perjury that the information contained on this form, and on any attachments, is a complete and accurate listing of the sources and amounts of income exceeding $200 that I received in calendar year 2009.

Signed _____ Date

State of Rhode Island
County of Providence

Subscribed and sworn to before me at Providence on the following date: 8/10/10

My Commission Expires: 9/28/2013

Signature of Notary Public

(Attach additional sheets if necessary)

Continuation of General Officer Addendum to 2009 Yearly Financial Statement:

SOURCE AND DESCRIPTION OF INCOME:

Name of Source: Robert Rossi

Address: 4½ Esten ST.
Prov. R.I 02908

Description: hold mortgage

AMOUNT OF INCOME:
(*check one*)

- ☐ Not more than $1,000
- ☑ $1,001 to $10,000
- ☐ $10,001 to $25,000
- ☐ $25,001 to $50,000
- ☐ $50,001 to 100,000
- ☐ $100,001 to $200,000
- ☐ $200,001 to $500,000
- ☐ $500,001 to $1,000,000
- ☐ More than $1,000,000

SOURCE AND DESCRIPTION OF INCOME:

Name of Source: Randy Carpano

Address: 117 West Park St.
Prov. R.I. 02908

Description: hold mortgage

AMOUNT OF INCOME:
(*check one*)

- ☐ Not more than $1,000
- ☑ $1,001 to $10,000
- ☐ $10,001 to $25,000
- ☐ $25,001 to $50,000
- ☐ $50,001 to 100,000
- ☐ $100,001 to $200,000
- ☐ $200,001 to $500,000
- ☐ $500,001 to $1,000,000
- ☐ More than $1,000,000

SOURCE AND DESCRIPTION OF INCOME:

Name of Source: Bruce long

Address: dagoT Ranch
Salmon Id. 83467

Description: hold mortgage
for Cinnabar Circle
prop.

AMOUNT OF INCOME:
(*check one*)

- ☐ Not more than $1,000
- ☑ $1,001 to $10,000
- ☐ $10,001 to $25,000
- ☐ $25,001 to $50,000
- ☐ $50,001 to 100,000
- ☐ $100,001 to $200,000
- ☐ $200,001 to $500,000
- ☐ $500,001 to $1,000,000
- ☐ More than $1,000,000