

Name: Elizabeth Walker

**RECEIVED**

By WV Ethics Commission at 9:11 am, Jan 23, 2025

Return completed form to:  
ellen.m.briggs@wv.gov  
WV Ethics Commission  
210 Brooks Street, Suite 300  
Charleston, WV 25301



Candidate information, if applicable  
County : \_\_\_\_\_  
Candidate for: \_\_\_\_\_  
Date you filed for candidacy: \_\_\_\_\_  
District or circuit, if applicable \_\_\_\_\_

# West Virginia Ethics Commission

## Financial Disclosure Statement

# SUPREME COURT JUSTICE

### Directions

- Please read and answer **every question**—even if your answer is “N/A” (not applicable). Incomplete original Statements will be returned to you for completion or correction.
- You must file a new Financial Disclosure Statement **each year** you hold or run for a public position.
- If this is your annual filing, the Statement is due by February 1.
- If you are a new appointee, this Statement is due within 30 days of the date of your appointment.
- If you are a candidate for public office, this Statement is due within 10 days of filing your *Certificate of Announcement*.
- The information you provide on this Statement covers the prior calendar year, except where otherwise indicated.
- You may attach additional pages to this form if necessary.

### 1. Name of Filer and Spouse

Filer's last name Walker First name Elizabeth  
 Spouse's last name Walker First name Michael  
 County of residence Kanawha  
 Business (employment) address Building 1, Room E-302  
1900 Kanawha Blvd East  
 City/state/zip Charleston, WV 25305

### 2. Elective Office

Do you currently hold: (1) an elected county, circuit or state office **OR** (2) an elected office in one of the following cities: Charleston, Fairmont or Morgantown? Yes  No  If yes, title of office: \_\_\_\_\_

Are you presently a candidate for public office? N/A  Yes  No

If yes, for what office: \_\_\_\_\_ Date you filed for candidacy: \_\_\_\_\_

### 3. Positions on State Boards, Commissions or Agencies

List all State Boards, Commissions or Agencies on which you now serve or have served during the past calendar year through appointment by the Governor.  Mark here if N/A

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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#### 4. Business Names

List all names under which you and/or your spouse conducted or did business during the past calendar year. If you or your spouse were self-employed, list the name or names under which you or your spouse conducted the business, trade, sole proprietorship or profession.

Mark here if no business names to report.

self  spouse

self  spouse

self  spouse

#### 5. Employment

For you and your spouse, list the name and address of each full-time or part-time employer(s) during the past calendar year. Include all employment with city, county or state government as well as employment in the private sector. Provide your job title and a general description of your job duties. For purposes of this question, an employer is one who provides you with a W-2 form. This does not include self-employment if listed elsewhere on the Financial Disclosure Statement.

Mark here if neither you nor your spouse were employed.

	Employer Name and Address	Job title and duties of your position
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/>	1. Supreme Court of Appeals of WV	Justice
self <input type="checkbox"/> spouse <input type="checkbox"/>	2.	
self <input type="checkbox"/> spouse <input type="checkbox"/>	3.	
self <input type="checkbox"/> spouse <input type="checkbox"/>	4.	

#### 6. 20% Gross Income Categories for you and your spouse

Did you or your spouse receive more than 20% of your gross income during the past calendar year from any one or more of the categories listed below? Yes \_\_\_\_\_ No  If yes, mark with an 'X' all categories that apply to you and/or your spouse.

<i>self</i> <i>spouse</i>	<i>self</i> <i>spouse</i>	<i>self</i> <i>spouse</i>
<p style="text-align: center;"><u>COMPANIES</u></p> <input type="checkbox"/> <input type="checkbox"/> Advertising <input type="checkbox"/> <input type="checkbox"/> Beer, wine or liquor (or distributor) <input type="checkbox"/> <input type="checkbox"/> Brokerage/Financial Advisor <input type="checkbox"/> <input type="checkbox"/> Cable television <input type="checkbox"/> <input type="checkbox"/> Chemical <input type="checkbox"/> <input type="checkbox"/> Construction <input type="checkbox"/> <input type="checkbox"/> Insurance <input type="checkbox"/> <input type="checkbox"/> Interstate transportation <input type="checkbox"/> <input type="checkbox"/> Intrastate transportation <input type="checkbox"/> <input type="checkbox"/> Manufacturing <input type="checkbox"/> <input type="checkbox"/> Media <input type="checkbox"/> <input type="checkbox"/> Promotional <input type="checkbox"/> <input type="checkbox"/> Race tracks <input type="checkbox"/> <input type="checkbox"/> Recreation <input type="checkbox"/> <input type="checkbox"/> Retail <input type="checkbox"/> <input type="checkbox"/> Timber <input type="checkbox"/> <input type="checkbox"/> Wholesale <input type="checkbox"/> <input type="checkbox"/> Waste disposal	<p style="text-align: center;"><u>MINING</u></p> <input type="checkbox"/> <input type="checkbox"/> Surface mining <input type="checkbox"/> <input type="checkbox"/> Mining equipment <input type="checkbox"/> <input type="checkbox"/> Deep mining <p style="text-align: center;"><u>OIL OR GAS</u></p> <input type="checkbox"/> <input type="checkbox"/> Retail <input type="checkbox"/> <input type="checkbox"/> Wholesale <input type="checkbox"/> <input type="checkbox"/> Exploration <input type="checkbox"/> <input type="checkbox"/> Production & Drilling <p style="text-align: center;"><u>UTILITIES</u></p> <input type="checkbox"/> <input type="checkbox"/> Electric <input type="checkbox"/> <input type="checkbox"/> Gas <input type="checkbox"/> <input type="checkbox"/> Telephone <input type="checkbox"/> <input type="checkbox"/> Water <p style="text-align: center;"><u>FINANCIAL</u></p> <input type="checkbox"/> <input type="checkbox"/> Banks, Savings & Loan Assoc. <input type="checkbox"/> <input type="checkbox"/> Loan or Finance Companies	<p style="text-align: center;"><u>GOVERNMENT</u></p> <input type="checkbox"/> <input type="checkbox"/> City or town <input type="checkbox"/> <input type="checkbox"/> County <input type="checkbox"/> <input type="checkbox"/> State <p style="text-align: center;"><u>ASSOCIATIONS OR ORGANIZATIONS</u></p> <input type="checkbox"/> <input type="checkbox"/> Labor Association/Organization <input type="checkbox"/> <input type="checkbox"/> Professional Association <input type="checkbox"/> <input type="checkbox"/> Association that promotes gaming or lottery <input type="checkbox"/> <input type="checkbox"/> Association of public employees or public officials <input type="checkbox"/> <input type="checkbox"/> Trade Association or Organization <p style="text-align: center;"><u>OTHER</u></p> <input type="checkbox"/> <input type="checkbox"/> Economic Development <input type="checkbox"/> <input type="checkbox"/> Hospitals or other health care providers <input type="checkbox"/> <input type="checkbox"/> Information Technology <input type="checkbox"/> <input type="checkbox"/> Legal service providers <input type="checkbox"/> <input type="checkbox"/> Lobbying

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### 7. For-Profit Business

List the name and address of each for-profit business on which either you or your spouse served on the Board of Directors or as an officer during the past calendar year. Describe the type of business.

Mark here if neither you nor your spouse served on a Board of Directors or was an officer of a for-profit business.

Name and address of the business	Description of the business
self <input type="checkbox"/> spouse <input type="checkbox"/>	
self <input type="checkbox"/> spouse <input type="checkbox"/>	
self <input type="checkbox"/> spouse <input type="checkbox"/>	

### 8. Non-Profit Organization

List the name and address of each non-profit organization on which either you or your spouse served on the Board of Directors or as an officer during the past calendar year. Describe the non-profit organization.

Mark here if neither you nor your spouse served on a Board of Directors or was an officer of a non-profit organization.

Name and address of the organization	Description of the non-profit
self <input type="checkbox"/> spouse <input checked="" type="checkbox"/> Girl Scouts of Black Diamond Council	Girl Scouts
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/> University of Charleston	University
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/> Conference of Chief Justices	Judiciary

### 9. Sales or Contracts with State, County or Local Government

During the past calendar year, did you or your spouse have any sales or contracts with any unit of state, county or local government? Yes \_\_\_\_\_ No  (Sales or contracts for goods or services may be either direct or through a partnership, corporation or association in which either you or your spouse owned or controlled more than 10 percent.)

If yes, identify the government agency that purchased the goods or services, and describe the nature of the goods or services. (See the instruction sheet for more information about the Ethics Act's prohibition against having an interest in a public contract under W. Va. Code § 6B-2-5(d).)

Name of Government organization	Description of goods or services provided
self spouse <input checked="" type="checkbox"/> Example: State of WV DHHR	Foster home placement studies
self <input checked="" type="checkbox"/> spouse Example: Clay County Sheriff's Department	Rental of garage space for patrol cars
self <input type="checkbox"/> spouse <input type="checkbox"/>	
self <input type="checkbox"/> spouse <input type="checkbox"/>	
self <input type="checkbox"/> spouse <input type="checkbox"/>	

### 10. Adult Children – Public Employment

List the name and business address of any adult child or step-child employed by any unit of state, county or local government during the past calendar year.  Mark here if this question does not apply to you.

Name of child or step-child	Business address

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11. DEBTS

A. Owed to others on the date you sign this form: List the names of all persons residing or transacting business in the state who you owe more than \$5,000 (in the aggregate) on the date of this Statement. Include debts you owe in the name of any other person and debts on which you are a cosigner.

You DO NOT have to report:

- 1. Debts to immediate family members, parents or grandparents
2. Home mortgages for your primary and secondary residences
3. Loans for autos maintained for the use of your immediate family
4. Student loans
5. Debts resulting from the ordinary conduct of your business, profession or occupation
6. Debts to a financial institution or to a credit card company

If any debt over \$5,000, which is otherwise non-reportable, required the approval of the state or any of its political subdivisions, or if a loan was obtained from the "Linked Deposit Program" (W. Va. Code § 12-1A-1 et seq.), you must list the debt.

Mark here if you owe no debts as described above.

B. Owed to you on the date you sign this form: List the names of all persons residing or transacting business in the state who owe you, in the aggregate, more than \$5,000 on the date of this Statement (either in your name or any other person's name for your use or benefit.)

You DO NOT have to report:

- 1. Debts from immediate family members, parents or grandparents
2. Debts resulting from the ordinary conduct of your business, profession or occupation
3. Demand or saving accounts in banks, savings and loan associations, or other similar depositories
4. Loans by you to any business in which you have an ownership interest

Mark here if you had no debts owed to you as described above.

12. GIFTS

A gift is anything with monetary value, including meals and beverages. During the past calendar year, if you, your spouse, and/or any of your dependents received one or more gifts whose total value is more than \$100 from a person, business or organization which has a direct and immediate interest in a governmental activity over which you have control, then list the name of each giver UNLESS it falls into one of the exceptions listed below. "Total value" includes the cumulative fair market value of all gifts from the same source, directly or indirectly, during the past calendar year.

Gifts from the following sources need NOT be reported:

- 1. your spouse, child, grandchild, parents or grandparents
2. a trust established by your spouse, child, grandchild or ancestor
3. a will or lawful inheritance in the absence of a will
4. a registered lobbyist (registered lobbyists report these expenditures on the Lobbyist Schedule A form with their Lobbyist Activity Reporting forms)

Mark here if you received no gifts as described above.

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**This page applies to questions 13 and 14 on the next page.**

**\*\* If you are an elected official, candidate or state employee, you do not need to complete Worksheet A. You must, however, answer questions 13 and 14 about you and your spouse.**

**\*\* All other filers:** If you have been appointed to serve on a State Board, Commission or Agency by the Governor and receive no compensation for your service, you may not be required to report certain financial information about your spouse. Complete Worksheet A to determine if this spousal exemption applies. You still must report your own income and business information in questions 13 and 14.

**Worksheet A (for questions 13 and 14)**

**Part 1. Are you a State Board, Commission or Agency member appointed by the Governor?**

**YES**  Continue to Part 2.

**NO**  **DO NOT** complete parts 2 or 3 on this page. Continue to questions 13 and 14 on the next page and answer the questions for both you and your spouse.

**Part 2. Do you hold another office or employment position that requires you to file this Financial Disclosure Statement?**

**YES**  **DO NOT** complete part 3 on this page. Continue to questions 13 and 14 on the next page and answer the questions for both you and your spouse.

**NO**  Continue to Part 3.

**Part 3. Complete this section to determine if you are exempt from disclosing certain financial information about your spouse in questions 13 and 14 on the next page.**

List the name of the State Board, Commission or Agency of which you are an appointed member:  
Board name: \_\_\_\_\_

**Check each box that applies:**

1.  There is no compensation, per diem, salary or other payment authorized by state law for serving on this Board or Commission. (Excluding travel or expense reimbursement) Note: The test is not whether you decline compensation but whether it is authorized by code, statute or law.
2.  Neither my spouse nor a business with which he or she is associated is regulated by the State Board, Commission or Agency on which I serve by appointment. ("Associated" is defined as a business in which your spouse, or his or her immediate family member, is a director, officer, owner, employee, compensated agent or holder of stock which constitutes five percent or more of the total outstanding stocks of any class. "Immediate family member" means dependent children, grandchildren or parents.)
3.  Neither my spouse nor a business with which he or she is associated has a contract with, or receives any grants or appropriations from, the State Board, Commission or Agency on which I (the filer) serve.

**➔ If you have checked all three boxes in Part 3 above, then answer questions 13 and 14 on the next page as they pertain only to you.**

**➔ If you did not check all three boxes in Part 3, you must answer questions 13 and 14 in their entirety as they pertain to both you and your spouse.**

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**13. ALL sources of income over \$1,000 including employment during the past calendar year (To determine if you must disclose income information about your spouse, refer to Worksheet A)**

- a. List every source or category of income or employment over \$1,000 received by you and/or your spouse during the past calendar year in your name, or by any other person for your use or benefit. Include employment even if listed elsewhere on this Statement.
- b. Include distributions received from retirement and pension accounts.
- c. Do not list specific names of clients or customers. For example, if you are a lawyer or an insurance agent, do not list the names of your clients.
- d. Do not disclose actual dollar amounts of income, only the source.

Indicate if the income was received by you or your spouse by marking the appropriate box in the chart below.

Categories of income over \$1,000	Description (or job title)
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/> Example: Social Security	U.S. Government
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/> Example: Sold real estate	Sold residence in Beckley
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/> Example: Farming/timber	Sold timber from my farm
self <input type="checkbox"/> spouse <input checked="" type="checkbox"/> Example: Employment	Teacher, Mingo County schools
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/> <b>Employment</b>	Justice, Supreme Court of Appeals of WV
self <input type="checkbox"/> spouse <input checked="" type="checkbox"/> <b>Investments</b>	Investment income
self <input type="checkbox"/> spouse <input checked="" type="checkbox"/> <b>Social Security</b>	US Government
self <input type="checkbox"/> spouse <input checked="" type="checkbox"/> <b>Retirement</b>	Pension plan
self <input type="checkbox"/> spouse <input type="checkbox"/>	
self <input type="checkbox"/> spouse <input type="checkbox"/>	

**14. Business and/or Property Interests (To determine if you must disclose business or property interests of your spouse, refer to Worksheet A)**

List the name and address of each business in which, during the past calendar year or at present, you or your spouse held an interest with a fair market value of \$10,000 or more including, but not limited to: non-publicly owned businesses, publicly or privately traded stocks, bonds or securities, including those held in self-directed retirement accounts, and commercial real estate. (For purposes of this question, DO NOT include mutual funds or specific holdings in mutual funds or retirement accounts. However, distributions from retirement accounts must be reported in question 13 if they are greater than \$1,000 annually.) Attach additional sheets if necessary.

Mark here if neither you nor your spouse had any interest in a business or real estate as described above.

self <input type="checkbox"/> spouse <input checked="" type="checkbox"/> Example: Jones Coal Hauling, 123 Main Street, Placeville WV
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/> Example: Stonefront Apartment Building, 123 Main Street, Charleston WV 25312
self <input checked="" type="checkbox"/> spouse <input type="checkbox"/> Example: Acme Bank Stock, 788 Water Street, Cincinnati OH 34343
self <input type="checkbox"/> spouse <input checked="" type="checkbox"/> See attached
self <input type="checkbox"/> spouse <input type="checkbox"/>
self <input type="checkbox"/> spouse <input type="checkbox"/>

Rev: 09/2021

Michael S. Walker						
2024 Ethics Act Stock Holdings						
As of 12-31-24						
Name	Street Address	City	State	Country	ZIP	Symbol
Abbott Laboratories	100 Abbott Park Road	Abbott Park	IL	USA	60064	ABT
Abbvie, Inc.	1 Waukegan Road	Lake Bluff	IL	USA	60044	ABBV
Alcon, Inc.	6201 South Freeway	Ft. Worth	TX	USA	76134	ALC
Alphabet, Inc.	1600 Amphitheatre Parkway	Mountain View	CA	USA	94043	GOOGL
American Water Works	1025 Laurel Oak Road	Voorhees	NJ	USA	08043	AWK
Apple, Inc.	One Apple Park Way	Cupertino	CA	USA	95014	AAPL
AstraZeneca PLC	1800 Concord Pike	Wilmington	DE	USA	19850	AZN
Automatic Data Processing	1 ADP Boulevard	Roseland	NJ	USA	07068	ADP
Block, Inc.	1955 Broadway, Suite 600	Oakland	CA	USA	94612	SQ
Bristol-Myers Squibb	430 E. 29th Street	New York	NY	USA	10016	BMY
Cameco Corporation	2121 W. 11th Street	Saskatoon	SK	Canada	S7M 1J3	CCJ
Carrier Global Corporation	13995 Pasteur Boulevard	Palm Beach Gardens	FL	USA	33418	CARR
Cisco Systems, Inc.	170 West Tasman Drive	San Jose	CA	USA	95134	CSCO
Coca-Cola Co.	1 Coca Cola Plaza NW	Atlanta	GA	USA	30313	KO
Costco Wholesale Co.	999 Lake Drive	Issaquah	WA	USA	98027	COST
Digital Realty Trust, Inc.	4 Embarcadero Center Suite 3200	San Francisco	CA	USA	94111	DLR
Emerson Electric Co.	8000 West Florissant Avenue	St. Louis	MO	USA	63136	EMR
IBM Corporation	1 Orchard Road	Armonk	NY	USA	10504	IBM
Johnson & Johnson	One Johnson & Johnson Plaza	New Brunswick	NJ	USA	08933	JNJ
Kimberly-Clark Corporation	351 Phelps Drive	Irving	TX	USA	75038	KMB
Eli Lilly & Co.	893 S. Delaware Street	Indianapolis	IN	USA	46225	LLY
McCormick & Company, Inc.	18 Loveton Circle	Sparks	MD	USA	21152	MKC
Medtronic PLC	20 On Hatch, Hatch Street Lower	Dublin		Ireland		MDT
Merck & Co., Inc.	2000 Galloping Hill Road	Kenilworth	NJ	USA	07033	MRK
Microsoft Corporation	1 Microsoft Way	Redmond	WA	USA	98052	MSFT
Nestle SA	Avenue Nestle 55	Vevvey		Switzerland		NSRGY
Nucor Corporation	1915 Rexford Road	Charlotte	NC	USA	28211	NUE
Otis Worldwide Corporation	1 Carrier Place	Farmington	CT	USA	06032	OTIS
Palantir Technologies, Inc.	1555 Blake Street Ste 250	Denver	CO	USA	80202	PLTR
Paychex, Inc.	911 Panorama Trail South	Rochester	NY	USA	14625	PAYX
PepsiCo, Inc.	700 Anderson Hill Road	Purchase	NY	USA	10577	PEP
Procter & Gamble	1 Procter and Gamble Plaza	Cincinnati	OH	USA	45202	PG
RTX Corporation	1000 Wilson Boulevard	Arlington	VA	USA	22209	RTX
Sysco Corporation	1390 Enclave Parkway	Houston	TX	USA	77077	SYX
Truist Financial Corporation	214 N. Tryon Stret	Charlotte	NC	USA	28202	TFC
VICI Properties, Inc.	535 Madison Avenue, 20th Floor	New York	NY	USA	10022	VICI
Visa, Inc.	P.O. Box 8999	San Francisco	CA	USA	94128	V
Walmart, Inc.	702 SW 8th Street	Bentonville	AR	USA	72716	WMT
Waste Management, Inc.	1001 Fannin Street	Houston	TX	USA	77002	WM
Welltower, Inc.	4500 Dorr Street	Toledo	OH	USA	43615	WELL
Weyerhaeuser Co.	220 Occidental Avenue South	Seattle	WA	USA	98104	WY