PERSONAL FINANCIAL STATEMENT

FORM **PFS-LOCAL**
COVER SHEET
PAGE 1

Filed in accordance with chapter 572 of the Government Code.
For filings required in 2018, covering calendar year ending December 31, 2017.
Use FORM PFS--INSTRUCTION GUIDE when completing this form.

TOTAL NUMBER OF PAGES FILED:
9

Filer ID

1	NAME	TITLE; FIRST; MI	OFFICE USE ONLY

1 NAME

TITLE; FIRST; MI

Austin City Council D3 Sabino

NICKNAME; LAST; SUFFIX

Pio Renteria

2 ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

1511 Haskell St

Austin Tx 78702

3 TELEPHONE NUMBER

AREA CODE   PHONE NUMBER; EXTENSION

_(512) 4786770_

4 REASON FOR FILING STATEMENT

☐ CANDIDATE _____ (INDICATE OFFICE)

☑ ELECTED OFFICER _Austin City Council District 3_ (INDICATE OFFICE)

☐ OTHER _____ (INDICATE POSITION)

5 Family members whose financial activity you are reporting (see instructions).

SPOUSE ___ _Lori B Renteria_ ___

DEPENDENT CHILD 1. _____

2. _____

3. _____

In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child (see instructions).

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

SOURCES OF OCCUPATIONAL INCOME

PART 1A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, *and do NOT include this page in the report.*

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 INFORMATION RELATES TO

☑ FILER   ☐ SPOUSE   ☐ DEPENDENT CHILD _____

2 EMPLOYMENT

○ EMPLOYED BY ANOTHER

○ SELF-EMPLOYED

NAME AND ADDRESS OF EMPLOYER / POSITION HELD

City of Austin

Elected Officer

NATURE OF OCCUPATION

INFORMATION RELATES TO

☑ FILER   ☐ SPOUSE·   ☐ DEPENDENT CHILD _____

EMPLOYMENT

○ EMPLOYED BY ANOTHER

○ SELF-EMPLOYED

NAME AND ADDRESS OF EMPLOYER / POSITION HELD

IBM Personal Pension

Retired

NATURE OF OCCUPATION

INFORMATION RELATES TO

☐ FILER   ☐ SPOUSE   ☐ DEPENDENT CHILD _____

EMPLOYMENT

○ EMPLOYED BY ANOTHER

○ SELF-EMPLOYED

NAME AND ADDRESS OF EMPLOYER / POSITION HELD

NATURE OF OCCUPATION

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

STOCK

PART 2

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, *and do NOT include this page in the report.*

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, *see* FORM PFS-- INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 BUSINESS ENTITY	NAME *International Business Machine*
2 STOCK HELD OR ACQUIRED BY	☑ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____
3 NUMBER OF SHARES	☐ LESS THAN 100 ☑ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
4 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000–$9,999 ☐ $10,000–$24,999 ☐ $25,000–OR MORE

BUSINESS ENTITY	NAME *I B M*
STOCK HELD OR ACQUIRED BY	☐ FILER ☑ SPOUSE ☐ DEPENDENT CHILD _____
NUMBER OF SHARES	☑ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000–$9,999 ☐ $10,000–$24,999 ☐ $25,000–OR MORE

BUSINESS ENTITY	NAME
STOCK HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____
NUMBER OF SHARES	☐ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000–$9,999 ☐ $10,000–$24,999 ☐ $25,000–OR MORE

BUSINESS ENTITY	NAME
STOCK HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____
NUMBER OF SHARES	☐ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000–$9,999 ☐ $10,000–$24,999 ☐ $25,000–OR MORE

BUSINESS ENTITY	NAME
STOCK HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____
NUMBER OF SHARES	☐ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000–$9,999 ☐ $10,000–$24,999 ☐ $25,000–OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

PERSONAL NOTES AND LEASE AGREEMENTS
PART **6**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, *and do NOT include this page in the report.*

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability *of more than $1,000* in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, *see* FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	
2 LIABILITY OF	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____
3 GUARANTOR	
4 AMOUNT	◯ $1,000--$4,999 ◯ $5,000--$9,999 ◯ $10,000--$24,999 ◯ $25,000--OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	
LIABILITY OF	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____
GUARANTOR	
AMOUNT	◯ $1,000--$4,999 ◯ $5,000--$9,999 ◯ $10,000--$24,999 ◯ $25,000--OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	
LIABILITY OF	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____
GUARANTOR	
AMOUNT	◯ $1,000--$4,999 ◯ $5,000--$9,999 ◯ $10,000--$24,999 ◯ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2017 and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.
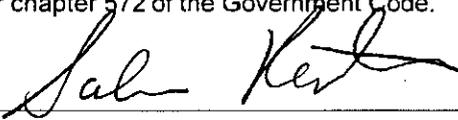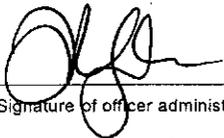
_____
Signature of Filer

AFFIX NOTARY STAMP / SEAL ABOVE

FRANCES AGUILAR REPKA
My Notary ID # 11133515
Expires August 30, 2020
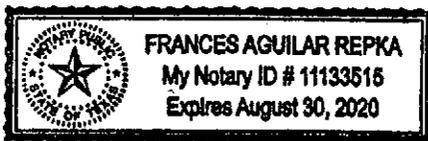
Sworn to and subscribed before me, by the said _Sabino Renteria_ this the _27TH_ day of _April_, 20 _18_, to certify which, witness my hand and seal of office.

_____   Frances Aguilar Repka   Notary
Signature of officer administering oath   Printed name of officer administering oath   Title of officer administering oath