



KENTUCKY LEGISLATIVE ETHICS COMMISSION

STATEMENT OF FINANCIAL DISCLOSURE (KRS 6.787)

To be filed by: All members of the General Assembly, all candidates and nominees for election to the General Assembly, and major management personnel in the legislative branch of state government.

ED

Check here and attach additional sheets if necessary. 1 Number of sheets attached.

Please include the following information for the preceding calendar year:

Name AARON REED
Business address 1016 MT VERNON DR, SHELBYVILLE, KY 40065
Business telephone 502-800-5427
Home address [REDACTED]
Title of public position, or office sought STATE SENATOR #7
Other occupations of filer RETIRED NAVY, OWNER: OPS SUPPLY INC.,
Occupations of ASR ENTERPRISES INC, & KODIAK COATING INC.
spouse ~~FARM~~ OWNER FARMER WING A PRAYER FARM

NOTE: The following sections do not require disclosure of specific dollar amounts.

1. Positions held by filer in any business, partnership, corporation for profit, or corporation not for profit from which the filer receives compensation, and the name of the business, partnership, or corporation OWNER: ASR ENTERPRISES INC
OPS SUPPLY INC
KODIAK COATING INC

2. Positions held by filer's spouse in any business, partnership, corporation for profit, or corporation not for profit from which the filer's spouse receives compensation, and the name of the business, partnership, or corporation FAMILY FARM
OWNER: WING A PRAYER FARM

3. Names and addresses of all businesses, investments, or securities in which the filer, filer's spouse, or filer's minor children had at any time during the reporting year an interest of \$10,000 at fair market value, or 5% ownership interest or more OWNER
ASR ENTERPRISES INC, OPS SUPPLY INC, KODIAK COATING,
AND WING-A PRAYER FARM.

INDEPENDENCE BANK, LFN FEDERAL CREDIT UNION
AND GERMAN AMERICAN BANK.

4. Sources and form of gross income of the filer (list sources by name)

KODIAK KOATING INC monetary
OP'S SUPPLY INC monetary
ASR ENTERPRISES INC monetary
WING A PRAYER monetary

5. Sources and form of gross income of the filer's spouse (list sources by name)

~~KOD~~ SAME AS #4

6. Positions of a fiduciary nature held by the filer in a business

N/A

7. A designation as commercial, residential, or rural, and the location of all real property other than the filer's primary residence, in which there is an interest of \$10,000 or more held by the filer, filer's spouse, or filer's minor children

RESIDENTIAL

SOLD OUR HOME IN NORTH CAROLINA IN 2023
* OUR HOME when on active duty with the NAVY

8. Sources of gifts of money or property with a retail value of more than \$200 to the filer or the filer's immediate family, except those from a member of the filer's family. (Family means spouse, parent, sibling, child, mother-in-law, father-in-law, son-in-law, daughter-in-law, grandparent, or grandchild, or dependent member of the filer's household. Immediate family means unemancipated child residing in an individual's household, spouse, or a person claimed by the filer as a dependent for tax purposes.)

NONE

9. The name of any creditor owed more than \$10,000 except debts arising from the purchase of consumer goods. (Goods used or bought for use primarily for personal, family, or household purposes) INDEPENDENCE BANK

10. The name of any legislative agent who is:

- (a) A member of the filer's immediate family;
- (b) A partner of the filer, or a partner of a member of the filer's immediate family;
- (c) An officer or director of the filer's employer;
- (d) An employer of the filer or an employer of a member of the filer's immediate family;
- (e) A business associate of the filer or a business associate of a member of the filer's immediate family

N/A

11. The names of any of the filer's clients who are legislative agents or employers

N/A

12. If you have held a professional license during the filing period, has a properly licensed partner of yours engaged in the practice of cases or other matters which you are prohibited from practicing under KRS 6.744? Yes No Not Applicable

13. If yes, list the names of the clients represented and list the agencies before which the partner made an appearance. The filer need not identify which client was represented before a specific agency.

Clients

N/A

State Agency

N/A

NOTICES

1. Upon receipt by the Commission, a statement of financial disclosure shall be a public record available for copying.
2. Any person who fails to file a statement of financial disclosure or who fails to remedy a deficiency identified by the Commission in a timely manner may be fined an amount not to exceed \$100 per day up to a maximum total fine of \$1000.
3. Any person who files a statement of financial interests which they know to contain false information, or to omit required information, shall be guilty of a class A misdemeanor.

13 FEB 2024
Date

AARON REED
Filer

Send completed statements to: The Kentucky Legislative Ethics Commission
22 Mill Creek Park
Frankfort, Kentucky 40601
FAX (502) 573-2929

If you have questions please call us at (502) 573-2863.

Question #3 for Aaron Reed

Owner:

ASR ENTERPRISES INC,
1016 MT VERNON DR,
SHELBYVILLE KY 40065

OPS SUPPLY INC,
1016 MT VERNON DR,
SHELBYVILLE KY 40065

KODIAK KOATING INC,
1016 MT VERNON DR,
SHELBYVILLE KY 40065

WING A PRAYER FARM (FAMILY FARM)
981 BUZZARD ROOST RD
SHELBYVILLE KY 40065

BANKS with Accounts and CDs:

Independence Bank
65 Mack Walters Rd
Shelbyville KY 40065

L&N Federal Credit Union
12981 Shelbyville Rd
Louisville, KY 40243

German American Bank
1854 Midland Trail
Shelbyville KY 40065

Other:

Thrift Savings Plan (Military option)
C/O Broadridge Processing
PO Box 1600
Newark, NJ 07101-1600

A handwritten signature in cursive script, appearing to read "Aaron Reed", is located in the bottom right corner of the page.