

FINANCIAL DISCLOSURE REPORT FOR CALENDAR YEAR 2017

Report Required by the Ethics
in Government Act of 1978
(5 U.S.C. app. §§ 101-111)

1. Person Reporting (last name, first, middle initial) McDade, Joe B.	2. Court or Organization U.S.District Court, Central District for Illinois	3. Date of Report 03/30/2018
4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time) U.S. District Judge - Senior Status	5a. Report Type (check appropriate type) ☐ Nomination ☐ Date ☐ Initial ☒ Annual ☐ Final 5b. ☐ Amended Report	6. Reporting Period 01/01/2017 to 12/31/2017
7. Chambers or Office Address 127 Federal Building 100 N.E. Monroe Street Peoria IL 61602		
IMPORTANT NOTES: The instructions accompanying this form must be followed. Complete all parts, checking the NONE box for each part where you have no reportable information.		

I. POSITIONS. (Reporting individual only; see pp. 9-13 of filing instructions.)

☐ NONE (No reportable positions.)

POSITION

NAME OF ORGANIZATION/ENTITY

1. Eeritus Status Member	American Inn of Court/Abraham Lincoln of Peoria, IL
2.	
3.	
4.	
5.	

II. AGREEMENTS. (Reporting individual only; see pp. 14-16 of filing instructions.)

☐ NONE (No reportable agreements.)

DATE

PARTIES AND TERMS

1. 1992	Illinois State Retirement System: Judicial Pension upon retirement in 1992
2.	
3.	

FINANCIAL DISCLOSURE REPORT

Page 2 of 8

Name of Person Reporting

McDade, Joe B.

Date of Report

03/30/2018

III. NON-INVESTMENT INCOME. *(Reporting individual and spouse; see pp. 17-24 of filing instructions.)***A. Filer's Non-Investment Income**NONE *(No reportable non-investment income.)*DATESOURCE AND TYPEINCOME
(yours, not spouse's)

1. _____

2. _____

3. _____

4. _____

B. Spouse's Non-Investment Income - *If you were married during any portion of the reporting year, complete this section.**(Dollar amount not required except for honoraria.)*NONE *(No reportable non-investment income.)*DATESOURCE AND TYPE

1. _____

2. _____

3. _____

4. _____

IV. REIMBURSEMENTS *— transportation, lodging, food, entertainment.**(Includes those to spouse and dependent children; see pp. 25-27 of filing instructions.)*NONE *(No reportable reimbursements.)*SOURCEDATESLOCATIONPURPOSEITEMS PAID OR PROVIDED

1. _____

2. _____

3. _____

4. _____

5. _____

FINANCIAL DISCLOSURE REPORT

Page 3 of 8

Name of Person Reporting

McDade, Joe B.

Date of Report

03/30/2018

V. GIFTS. *(Includes those to spouse and dependent children; see pp. 28-31 of filing instructions.)*NONE *(No reportable gifts.)*

	<u>SOURCE</u>	<u>DESCRIPTION</u>	<u>VALUE</u>
1.			
2.			
3.			
4.			
5.			

VI. LIABILITIES. *(Includes those of spouse and dependent children; see pp. 32-33 of filing instructions.)*NONE *(No reportable liabilities.)*

	<u>CREDITOR</u>	<u>DESCRIPTION</u>	<u>VALUE CODE</u>
1.	Reliastar Life Ins (ING)	Policy Loan	J
2.	Metropolitan Life Ins	Policy Loan	K
3.			
4.			
5.			

FINANCIAL DISCLOSURE REPORT

Page 4 of 8

Name of Person Reporting

McDade, Joe B.

Date of Report

03/30/2018

VII. INVESTMENTS and TRUSTS – income, value, transactions (Includes those of spouse and dependent children; see pp. 34-60 of filing instructions.)

☐ NONE (No reportable income, assets, or transactions.)

A. Description of Assets (including trust assets) Place "(X)" after each asset exempt from prior disclosure	B. Income during reporting period		C. Gross value at end of reporting period		D. Transactions during reporting period				
	(1) Amount Code 1 (A-H)	(2) Type (e.g., div., rent, or int.)	(1) Value Code 2 (J-P)	(2) Value Method Code 3 (Q-W)	(1) Type (e.g., buy, sell, redemption)	(2) Date mm/dd/yy	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A-H)	(5) Identity of buyer/seller (if private transaction)
1. Commerce Bank Accts	A	Interest	L	T					
2. Note Rcvble Lexington Assoc Ltd	B	Interest	J	U					
3. Met Life (universal life)	A	Dividend	J	T					
4. Southside Bank Accts	A	Interest	L	T					
5. Broker Acct #1 (H)									
6. -Lincoln Natl Choice Plus Assurance L Share Variable Annuity	C	Dividend	L	T					
7. Broker Acct #3 (H)									
8. -Hartford ILA Leaders Outlook Variable Annuity IRA	B	Dividend	K	T					
9. Heartland Bank Acct	A	Interest	J	T					
10. Vanguard IRA Acct (H)									
11. -Vanguard GNMA Fund Investor Shares	A	Dividend	J	T					
12. -Vanguard S-T Investment-Grade	A	Dividend	J	T					
13. -Vanguard Health Care Fund Adm (conversion from Inv shares)	A	Dividend	K	T	Distributed (part)	12/30/17	J	C	
14. -Vanguard Dividend Growth Fund	A	Dividend	K	T	Distributed (part)	12/30/17	J	A	
15. -Vanguard International Growth Adm (conversion from inv shares)	A	Dividend	K	T	Distributed (part)	12/30/17	J	A	
16. -Vanguard Selected Value Fund	A	Dividend	K	T	Distributed (part)	12/30/17	J	B	
17. -Vanguard Mid Cap Index Fund Adm	A	Dividend	K	T	Distributed (part)	12/30/17	J	A	

1. Income Gain Codes: (See Columns B1 and D4)	A = \$1,000 or less F = \$50,001 - \$100,000	B = \$1,001 - \$2,500 G = \$100,001 - \$1,000,000	C = \$2,501 - \$5,000 H1 = \$1,000,001 - \$5,000,000	D = \$5,001 - \$15,000 H2 = More than \$5,000,000	E = \$15,001 - \$50,000
2. Value Codes (See Columns C1 and D3)	J = \$15,000 or less N = \$250,001 - \$500,000 P3 = \$250,000.01 - \$500,000.00	K = \$15,001 - \$50,000 O = \$500,001 - \$1,000,000	L = \$50,001 - \$100,000 P1 = \$1,000,001 - \$5,000,000 P4 = More than \$5,000,000	M = \$100,001 - \$250,000 P2 = \$5,000,001 - \$25,000,000	
3. Value Method Codes (See Column C2)	Q = Appraisal U = Book Value	R = Cost (Real Estate Only) V = Other	S = Assessment W = Estimated	T = Cash Market	

FINANCIAL DISCLOSURE REPORT

Page 5 of 8

Name of Person Reporting

McDade, Joe B.

Date of Report

03/30/2018

VII. INVESTMENTS and TRUSTS -- income, value, transactions (Includes those of spouse and dependent children; see pp. 34-60 of filing instructions.)

☐ NONE (No reportable income, assets, or transactions.)

A. Description of Assets (including trust assets) Place "(X)" after each asset exempt from prior disclosure	B. Income during reporting period		C. Gross value at end of reporting period		D. Transactions during reporting period				
	(1) Amount Code 1 (A-H)	(2) Type (e.g., div., rent, or int.)	(1) Value Code 2 (J-P)	(2) Value Method Code 3 (Q-W)	(1) Type (e.g., buy, sell, redemption)	(2) Date mm/dd/yy	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A-H)	(5) Identity of buyer/seller (if private transaction)
18. Vanguard/Joe B. McDade Trust Acct (fka Vanguard/Individual Acct) (H)									
19. -Vanguard GNMA Fund Investor Shares	A	Dividend	J	T					
20. -Vanguard S-T Investment-Grade Inv	A	Dividend	J	T					
21. -Vanguard Health Care Fund Adm Shares	D	Dividend	M	T					
22. -Vanguard Dividend Growth Fund	B	Dividend	K	T					
23. -Vanguard International Growth Fund Inv	A	Dividend	J	T					
24. -Vanguard Selected Value Fund	D	Dividend	M	T					
25. -Vanguard MidCap Index Fund Adm	B	Dividend	M	T					
26. Vanguard Rollover IRA Brokrge Acct (fka Vanguard Rollover (H)									
27. -Life Strategy Med Growth	B	Dividend	K	T	Distributed (part)	12/18/17	J	A	
28. Vanguard Indiv Brokerage Acct (fka Vanguard Indiv Acct) (H)									
29. -Vanguard Fed Money Mkt Fund (fka Vanguard Total Bnd Mkt Indx	A	Dividend	J	T					
30. Vanguard Brokerage Acct (JBM) (H)									
31. -Abbott Laboratories	A	Dividend	K	T					
32. -Vanguard Federal Money Market Fund	A	Dividend	J	T					
33. Vanguard International Growth Fund Adm	A	Dividend	L	T					
34.									

1. Income Gain Codes: (See Columns B1 and D4)	A = \$1,000 or less F = \$50,001 - \$100,000	B = \$1,001 - \$2,500 G = \$100,001 - \$1,000,000	C = \$2,501 - \$5,000 H1 = \$1,000,001 - \$5,000,000	D = \$5,001 - \$15,000 H2 = More than \$5,000,000	E = \$15,001 - \$50,000
2. Value Codes (See Columns C1 and D3)	J = \$15,000 or less N = \$250,001 - \$500,000 P3 = \$25,000,001 - \$50,000,000	K = \$15,001 - \$50,000 O = \$500,001 - \$1,000,000	L = \$50,001 - \$100,000 P1 = \$1,000,001 - \$5,000,000 P4 = More than \$50,000,000	M = \$100,001 - \$250,000 P2 = \$5,000,001 - \$25,000,000	
3. Value Method Codes (See Column C2)	Q = Appraisal U = Book Value	R = Cost (Real Estate Only) V = Other	S = Assessment W = Estimated	T = Cash Market	

FINANCIAL DISCLOSURE REPORT

Page 6 of 8

Name of Person Reporting

McDade, Joe B.

Date of Report

03/30/2018

VII. INVESTMENTS and TRUSTS -- income, value, transactions (Includes those of spouse and dependent children; see pp. 34-60 of filing instructions.)

☐ NONE (No reportable income, assets, or transactions.)

A. Description of Assets (including trust assets) Place "(X)" after each asset exempt from prior disclosure	B. Income during reporting period		C. Gross value at end of reporting period		D. Transactions during reporting period				
	(1) Amount Code 1 (A-H)	(2) Type (e.g., div., rent, or int.)	(1) Value Code 2 (J-P)	(2) Value Method Code 3 (Q-W)	(1) Type (e.g., buy, sell, redemption)	(2) Date mm/dd/yy	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A-H)	(5) Identity of buyer/seller (if private transaction)
35.									
36.									
37.									

1. Income Gain Codes: (See Columns B1 and D4)	A = \$1,000 or less F = \$50,001 - \$100,000	B = \$1,001 - \$2,500 G = \$100,001 - \$1,000,000	C = \$2,501 - \$5,000 H1 = \$1,000,001 - \$5,000,000	D = \$5,001 - \$15,000 H2 = More than \$5,000,000	E = \$15,001 - \$50,000
2. Value Codes (See Columns C1 and D3)	J = \$15,000 or less N = \$250,001 - \$500,000 P3 = \$25,000,001 - \$50,000,000	K = \$15,001 - \$50,000 O = \$500,001 - \$1,000,000	L = \$50,001 - \$100,000 P1 = \$1,000,001 - \$5,000,000 P4 = More than \$50,000,000	M = \$100,001 - \$250,000 P2 = \$5,000,001 - \$25,000,000	
3. Value Method Codes (See Column C2)	Q = Appraisal U = Book Value	R = Cost (Real Estate Only) V = Other	S = Assessment W = Estimated	T = Cash Market	

FINANCIAL DISCLOSURE REPORT

Page 7 of 8

Name of Person Reporting

McDade, Joe B.

Date of Report

03/30/2018

VIII. ADDITIONAL INFORMATION OR EXPLANATIONS. *(Indicate part of report.)*

Item 2: Note Receivable -- Lexington Assoc. Ltd., a Colorado Ltd. partnership c/o Cheyenne Mount Investments, re: installment sale of Lexington Hills Apartments, owned by Investors Land Tr #50 of which I own 1.9048% beneficial interest -- Jefferson Trust & Savings Bank, Trestee, Under Trust Agreement

FINANCIAL DISCLOSURE REPORT

Page 8 of 8

Name of Person Reporting

McDade, Joe B.

Date of Report

03/30/2018

IX. CERTIFICATION.

I certify that all information given above (including information pertaining to my spouse and minor or dependent children, if any) is accurate, true, and complete to the best of my knowledge and belief, and that any information not reported was withheld because it met applicable statutory provisions permitting non-disclosure.

I further certify that earned income from outside employment and honoraria and the acceptance of gifts which have been reported are in compliance with the provisions of 5 U.S.C. app. § 501 et. seq., 5 U.S.C. § 7353, and Judicial Conference regulations.

Signature: **s/ Joe B. McDade**

NOTE: ANY INDIVIDUAL WHO KNOWINGLY AND WILLFULLY FALSIFIES OR FAILS TO FILE THIS REPORT MAY BE SUBJECT TO CIVIL AND CRIMINAL SANCTIONS (5 U.S.C. app. § 104)

Committee on Financial Disclosure
Administrative Office of the United States Courts
Suite 2-301
One Columbus Circle, N.E.
Washington, D.C. 20544