STATEMENT OF ECONOMIC INTERESTS
A PUBLIC DOCUMENT

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Winger Nicole Denise

1. Office, Agency, or Court
   Agency Name: (Do not use acronyms)
   State Controller
   Division, Board, Department, District, if applicable
   Your Position
   Deputy Controller, Public Affairs
   ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
   Agency: __________________________ Position: __________________________

2. Jurisdiction of Office (Check at least one box)
   ☑ State
   □ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
   □ Multi-County __________________________
   □ County of __________________________
   □ City of __________________________
   □ Other __________________________

3. Type of Statement (Check at least one box)
   ☑ Annual: The period covered is January 1, 2019, through December 31, 2019.
   □ The period covered is ___________ / ___________ / ___________ through December 31, 2019.
   □ Assuming Office: Date assumed ___________ / ___________ / ___________
   □ Leaving Office: Date Left ___________ / ___________ / ___________
   (Check one circle.)
   □ The period covered is January 1, 2019, through the date of leaving office.
   □ The period covered is ___________ / ___________ / ___________ through the date of leaving office.
   □ Candidate: Date of Election ___________ and office sought, if different than Part 1: ___________

4. Schedule Summary (must complete) ▶ Total number of pages including this cover page: _______
   Schedules attached
   ☑ Schedule A-1 - Investments – schedule attached
   ☑ Schedule A-2 - Investments – schedule attached
   ☑ Schedule B - Real Property – schedule attached
   ☑ Schedule C - Income, Loans, & Business Positions – schedule attached
   ☑ Schedule D - Income – Gifts – schedule attached
   ☑ Schedule E - Income – Gifts – Travel Payments – schedule attached
   □ None - No reportable interests on any schedule

5. Verification
   MAILING ADDRESS
   (Business or Agency Address Recommended - Public Document)
   300 Capitol Mall, Suite 1850
   SACRAMENTO, CA 95814
   ( ) EMAIL ADDRESS
   DAYTIME TELEPHONE NUMBER
   I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.
   I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

   Date Signed March 27, 2020 (month, day, year) Signature
SCHEDULE C
Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Capital Public Radio

ADDRESS (Business Address Acceptable)
7055 Folsom Blvd., Sacramento

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Journalism and entertainment

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

☐ No Income - Business Position Only
☐ $500 - $1,000
☒ $10,001 - $100,000
☐ OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary
☒ Spouse’s or registered domestic partner’s income
☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
☐ Sale of
☐ Loan repayment
☐ Commission or
☐ Rental Income, list each source of $10,000 or more
☐ Other

(Describe)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender’s regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender’s regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000

INTEREST RATE

☐ None

TERM (Months/Years)

☐ None

SECURITY FOR LOAN

☐ Personal residence

☐ Real Property

☐ Guanator

☐ Other

(Describe)

Comments:
**SCHEDULE E**  
Income – Gifts  
Travel Payments, Advances, and Reimbursements

- Mark either the gift or income box.
- Mark the “501(c)(3)” box for a travel payment received from a nonprofit 501(c)(3) organization or the “Speech” box if you made a speech or participated in a panel. Per Government Code Section 89506, these payments may not be subject to the gift limit. However, they may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

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