

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

| | | | | | |
|---|----------------------|--|-------------------|--|--|
| The C/OH Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00089957 | | 2 Total pages filed: 18 | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR Mr. | | FIRST Kevin M. | MI | |
| | NICKNAME | | LAST Jackson | SUFFIX Jr. | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | | ADDRESS / PO BOX; APT / SUITE #; CITY; 1613 Catalan Rd. Austin, TX 78748 | | ZIP CODE | |
| | | OFFICE USE ONLY | | | |
| | | Date Received ELECTRONICALLY FILED 01/15/2026 | | | |
| | | Date Hand-delivered or Date Postmarked | | | |
| 5 CAMPAIGN TREASURER NAME | | MS / MRS / MR Jennifer J. | | MI | |
| | | NICKNAME | | LAST Jackson | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1613 Catalan Rd. Austin, TX 78748 | | | |
| 7 CAMPAIGN TREASURER PHONE | | AREA CODE PHONE NUMBER EXTENSION (737) 268-2621 | | | |
| 8 REPORT TYPE | | <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR) | | | |
| 9 PERIOD COVERED | | Month Day Year THROUGH Month Day Year 08/21/2025 12/31/2025 | | | |
| 10 ELECTION | | ELECTION DATE Month Day Year 03/03/2026 | | ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | |
| 11 OFFICE | | OFFICE HELD (if any) | | 12 OFFICE SOUGHT (if known) State Board Of Education District 5 | |

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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| | |
|---|---|
| 13 C / OH NAME Jackson Jr., Kevin M. (Mr.) | 14 Filer ID (Ethics Commission Filers) 00089957 |
|---|---|

| | | |
|---|--|--------------------------|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. | |
| | COMMITTEE TYPE | COMMITTEE NAME |
| | <input type="checkbox"/> GENERAL | COMMITTEE ADDRESS |
| | <input type="checkbox"/> SPECIFIC | |
| | COMMITTEE CAMPAIGN TREASURER NAME | |
| | COMMITTEE CAMPAIGN TREASURER ADDRESS | |

| | | |
|-------------------------|---|-------------|
| 16 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 3,657.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 2,526.71 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 2,087.71 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 30.67 |

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Kevin M. Jackson Jr.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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| | | |
|---|--|---|
| 18 FILER NAME Jackson Jr., Kevin M. (Mr.) | | 19 Filer ID (Ethics Commission Filers) 00089957 |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 2,857.00 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 800.00 |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input checked="" type="checkbox"/> SCHEDULE E: LOANS | \$ 30.67 |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 799.97 |
| 6. | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ 1,426.74 |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 9. | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ 300.00 |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 0.01 |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/18 |
| 2 FILER NAME Jackson Jr., Kevin M. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089957 |
| 4 Date 11/02/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayres, Robert 6 Contributor address; City; State; Zip Code West Lake Hills, TX 78746-6429 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 11/02/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Cecelia Contributor address; City; State; Zip Code Austin, TX 78731-2806 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/13/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Cecelia Contributor address; City; State; Zip Code Austin, TX 78731-2806 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Scott Contributor address; City; State; Zip Code Austin, TX 78703-4827 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Scott Contributor address; City; State; Zip Code Austin, TX 78703-4827 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/5 Rpt: 5/18 |
| 2 FILER NAME Jackson Jr., Kevin M. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089957 |
| 4 Date 12/31/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Candelaria, Noel <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78739-4811 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 12/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb, Gary <hr/> Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coronado, Santiago <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-4508 | Amount of Contribution (\$) \$125.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DePalma, Richard <hr/> Contributor address; City; State; Zip Code Austin, TX 78739-1993 | Amount of Contribution (\$) \$125.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeTullio, Michael <hr/> Contributor address; City; State; Zip Code Austin, TX 78749-2805 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/5 Rpt: 6/18 |
| 2 FILER NAME Jackson Jr., Kevin M. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089957 |
| 4 Date 12/31/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hyde, Catrina <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78745-4950 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 12/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim, Patricia <hr/> Contributor address; City; State; Zip Code Austin, TX 78727-6714 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marston, James <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-1645 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Barbara <hr/> Contributor address; City; State; Zip Code Austin, TX 78745-4951 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neaves, Michael <hr/> Contributor address; City; State; Zip Code Austin, TX 78748-5268 | Amount of Contribution (\$) \$27.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/5 Rpt: 7/18 |
| 2 FILER NAME Jackson Jr., Kevin M. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089957 |
| 4 Date 10/31/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert 6 Contributor address; City; State; Zip Code Austin, TX 78731-6061 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 11/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert Contributor address; City; State; Zip Code Austin, TX 78731-6061 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert Contributor address; City; State; Zip Code Austin, TX 78731-6061 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/05/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley, Alfred Contributor address; City; State; Zip Code Austin, TX 78703-2516 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, James Contributor address; City; State; Zip Code Austin, TX 78752-4124 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/18 |
| 2 FILER NAME Jackson Jr., Kevin M. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089957 |
| 4 Date 12/30/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zeller, Charles <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78733-3243 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|---|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 1/1 Rpt: 9/18 | |
| 2 FILER NAME Jackson Jr., Kevin M. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089957 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 10/07/2025 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Osdol, Scott | 8 Amount of contribution (\$) \$800.00 | 9 In-kind contribution description Discount on photography and post-production services |
| | 7 Contributor address; City; State; Zip Code Austin, TX 78745 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Photographer | | 11 Employer (FOR NON-JUDICIAL) (See instructions) Self | |
| 12 Contributor's principal occupation (FOR JUDICIAL) | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |

LOANS

SCHEDULE E

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule E: Sch: 1/1 Rpt: 10/18 |
| 2 FILER NAME Jackson Jr., Kevin M. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089957 |
| 4 TOTAL OF UNITEMIZED LOANS | | \$ |
| 5 Date of loan 09/03/2025 | 7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley, Alfred | 9 Loan Amount (\$) \$30.67 |
| 6 Is lender a financial institution? No | 8 Lender address; City; State; Zip Code Austin, TX 78763 | 10 Interest Rate 0 |
| | | 11 Maturity Date 03/03/2026 |
| 12 Principal occupation / Job title (See Instructions) Political consultant | | 13 Employer (See Instructions) Self |
| 14 Description of Collateral <input checked="" type="checkbox"/> None | | 15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/> |
| 16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable | 17 Name of guarantor | 19 Amount Guaranteed (\$) |
| | 18 Guarantor address; City; State; Zip Code | |
| 20 Principal occupation | | 21 Employer (See Instructions) |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 1/4 Rpt: 11/18 | 2 FILER NAME Jackson Jr., Kevin M. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00089957 |
| 4 Date 12/31/2025 | 5 Payee name ActBlue | |
| 6 Amount (\$) \$92.14 | 7 Payee address; City; State; Zip Code 366 Summer St Sommerville, MA 02144 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Aggregated credit-card processing fees during reporting period |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/01/2025 | Payee name Austin NAACP | |
| Amount (\$) \$100.00 | Payee address; City; State; Zip Code 1717 E 12th St Austin, TX 78702 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ticket to event |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/12/2025 | Payee name Diggs, Miles | |
| Amount (\$) \$375.00 | Payee address; City; State; Zip Code 4017 Ayala Dr Austin, TX 78725 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages for campaign management |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 2/4 Rpt: 12/18 | 2 FILER NAME Jackson Jr., Kevin M. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00089957 |
| 4 Date 10/09/2025 | 5 Payee name Frost Bank | |
| 6 Amount (\$) \$8.00 | 7 Payee address; City; State; Zip Code 111 W Houston St, Suite 100 San Antonio, TX 78205 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank service charge |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 09/03/2025 | Candidate/Officeholder name Payee name GoDaddy.com | |
| Amount (\$) \$30.67 | Payee address; City; State; Zip Code 14455 N Hayden Rd Ste 100 Scottsdale, AZ 85260 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain name registration |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 12/05/2025 | Candidate/Officeholder name Payee name Google, Inc. | |
| Amount (\$) \$64.47 | Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Internet services | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign email and software license |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 3/4 Rpt: 13/18 | 2 FILER NAME Jackson Jr., Kevin M. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00089957 |
| 4 Date 11/05/2025 | 5 Payee name Google, Inc. | |
| 6 Amount (\$) \$39.51 | 7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Internet services | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign email and software license |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/03/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Slack Technologies, LLC | | |
| Amount (\$) \$50.68 | Payee address; City; State; Zip Code 415 Mission St, 3rd Floor San Francisco, CA 94105 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Internet services | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Collaboration platform |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 12/02/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Slack Technologies, LLC | | |
| Amount (\$) \$34.83 | Payee address; City; State; Zip Code 415 Mission St, 3rd Floor San Francisco, CA 94105 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Internet services | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Collaboration platform |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 4/4 Rpt: 14/18 | 2 FILER NAME Jackson Jr., Kevin M. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00089957 |
| 4 Date 10/01/2025 | 5 Payee name Slack Technologies, LLC | |
| 6 Amount (\$) \$4.67 | 7 Payee address; City; State; Zip Code 415 Mission St, 3rd Floor San Francisco, CA 94105 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Internet services | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Collaboration platform |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F2: Sch: 1/1 Rpt: 15/18 | 2 FILER NAME Jackson Jr., Kevin M. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00089957 |
| 4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS | | \$ |
| 5 Date 10/23/2025 | 6 Payee name McCulloch, Mark | |
| 7 Amount (\$) \$560.74 | 8 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Austin, TX 78741 | |
| 9 TYPE OF EXPENDITURE | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | |
| 10 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Logo design, name badges, lapel stickers |
| 11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/07/2025 | Payee name Van Osdol, Scott | |
| Amount (\$) \$866.00 | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Austin, TX 78745 | |
| TYPE OF EXPENDITURE | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography and post-production services |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule G: Sch: 1/1 Rpt: 16/18 | 2 FILER NAME Jackson Jr., Kevin M. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00089957 |
| 4 Date 11/24/2025 | 5 Payee name Texas Democratic Party | |
| 6 Amount (\$) \$300.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code 314 E Highland Mall Blvd, Ste 508 Austin, TX 78752 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing fee for a place on primary ballot |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 1/1 Rpt: 17/18

2 FILER NAME

Jackson Jr., Kevin M. (Mr.)

3 Filer ID (Ethics Commission Filers)
00089957

4 Date

09/30/2025

5 Name of person from whom amount is received

Google, Inc.

8 Amount (\$)

\$0.01

6 Address of person from whom amount is received; City; State; Zip Code

Mountain View, CA 94043

7 Purpose for which amount is received

Account verification deposit for billing purposes

☐ Check if political contribution returned to filer

TEXT ANNOTATION

Sch: 1/1 Rpt: 18/18

FILER NAME

Jackson Jr., Kevin M. (Mr.)

Filer ID (Ethics Commission Filers)

00089957

Schedule

E

Information entered by filer as a memo:

Consultant paid for domain name registration at GoDaddy.com reported on Schedule F1.