	STATES HOUSE OF REPRESENTATIVES L DISCLOSURE STATEMENT	FORM B For New Members, Candidates, and New Emp	MAY 1 1 2024 age 1 of 14 bloyees LEGISLATIVE RESOURCE CENTER
Name:	New Member of or Candidate for U.S. House of Representatives Candidates – Date of Election:		2024 MAY 16 PM 12: 13 OFFICE OF THE CLECK U.S. HOUSE OF 1.2 mixed ITATIVES (Office Use Only)
STATUS		ler Type (if Applicable): Period Covered: Jenuary 1. Principal Assistant to 4/30/24	A \$200 penalty shall be assessed against any individual who files more than 30-days late.
A. Did you, you a. Own any end of the b. Receive asset du. C. Did you or honoraria, or reporting park	your spouse have "earned" income (e.g., salaries, pension/IRA distributions) of \$200 or more during the yes od? Yes our spouse, or your dependent child have any reportable than \$10,000) at any point during the reporting period?	F. Did you have any reportable por period or in the current calendar you have any reportable age outside entity during the reporting year up through the date of filing? No X J. Did you receive compensation or single source in the current year at RESPONDING SCHEDULE IF YOU ANSWI	reement or arrangement with an period or in the current celendar of more than \$5,000 from a read two prior years?
	THIS FORM INCLUDES ONLY 1	HE SCHEDULES THAT YOU ARE REQU	RED TO COMPLETE
TRUSTS - D	ON OF SPOUSE, DEPENDENT, OR TRUS Tetalls regarding "Qualified Blind Trusts" approved by the Committee out details of such a trust that benefits you, your spouse, or depend	on Ethics and certain other "excepted trusts" need not be	
EXEMPTION	I - Have you excluded from this report any other assets, "unearned Do not answer "yes" unless you have first consulted with the Comm	income, or liabilities of a spouse or dependent child becau	

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Name: ANNA CHENG KRAMER

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Identify (a) each asset held for investment of production of income and with a fair market value according \$1,000 at the end of the reporting period, and (b) any other reportable asset or source income which generated more than \$200 in "unearmed" income during the year. Provide complete names of stocks and mutual funds (do not use only titules symbols).	Indicates to the control of the cont	sto value i value ily the i cassel ded on lone." imn M in whic	ue of a don m method t was ly book is for sh you	sted a other disposed sold suse i seast	et clos other L dustry t gene a held no int	to of the thing the stated	teir m report incom	orting erkek ting (ne, the	period velue period per	od. tř: a, ptod d and de sho apend	F F F 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	iheck enera RA, or leferre epitei isolor scabi enera eriod.	all co to tau (529) od c i gati sed :	furnis i-defe iccour clumin is, ex es in counte no in	that and in the property of th	epply. ncome ou me letend rein for sok "N durk	For si (such y chec a, Inti rested asset ione" i ig the	counteits as 401(k), sk the Tax- erest, and , must be a held in the asset a reporting	For ass cap Che	essets its ind Ital gr ok "No Isma >	itor wi loste (ins, e ins' (f ill is (c	High y the cr wen i no in	Pu ch Hago Freir Jome Ota iv	ecker ry of i westr was r	i "Tax incom ed, m same	abori to or di to or	med check e dis eners	in Elic dag ti close ted. deper	ck C, he ap d as tdent	you (propi ince child	may e date me fi in wi	heck box b or as: hich y	the "f slow, rets i	None , Divi held	" celu Idend in ter e inte	mn. F Ip, int xable rest.	For at teres	fother Land Marts
For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that axceeds the reporting thresholds.			·	7	7			, .	,		_[7	· - ,	-	,	, ,			L			70	24	,							2	0 2	3					
For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every figencial institution where there is more than \$1,000 is interest-bearing accounts.		9 C	B	E	F	9 1	H 1	4	ĸ	L	*								ı	ı.	B W			VI V		X	IX.	XS	ï	•] •		Pred V				DX X	××	X
For rental and other real property held for investment, provide a complete address or description, e.g., rentel property," and a city and state.																																						
For an ownership indenset in a privately best business that is not publicly traded, state the name of the business, the nature of its collection, and its geographic location in Block A.																		(protect)																				
Exclude: Your personal residence, including second homes and vecation homes (unless there was rental knoone during the reporting period); and any financial interest in, or thooms derived from, a faderal retirement program, including the Thrift Savings Plan.																		nship beams or Farn																				
If you report a privately traded fund that is en Excepted investment Fund, please check the "BIF" box.											1 S S S S S S S S S S S S S S S S S S S							fy eg. Pata				1						20000										20000
If you so choose, you may indicate that an esset of income acurse is that of your spouse (SP) of dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left.		8	8	985	0000	000	Souther	2,000,000	00000000	9001	marDC Asset over \$1,000,000				₩ ₩	EXCEPTEDALLAD TRUST	65	i bropone (Spec					8	8	900	200000	8	come over \$1,000,000					8	8	000	00000		SpouseOC home over \$1,000,00
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SCHEDULE D - LIABILITIES

Name: ANA CHENG KRAMER Page/4 of 14

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child.

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SP. DC, JT		Creditor	Date Liability incurred MO/YR	Type of Liability	\$10,001- \$15,000	\$15,001- \$50,000	\$50,001- \$100,000	\$100,001- \$250,000	\$250,001- \$500,000	\$500,001- \$1,000,000	\$1,000,001- \$5,000,000	\$5,000,001- \$25,000,000	\$25,000,001-	Over \$50,000,000	Over \$1,000,000* (Spouse/DC Liability)
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SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, tratemal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

Position	Name of Organization
Trustee	Chartable Remainer Unitrust
Lowited Partner	Donne V Juvestors, LLC