UNITED STATES HOUSE OF REPRESENTATIVES FORM B FINANCIAL DISCLOSURE STATEMENT FOR New Members, Candidates, and New Employees	10 2020 Page 1 of E
Name: STUART H. LINDERMANH Daytime Telephone:	25
New Member of or Candidate for State:	(Office Use Only)
STATUS  New Officer or Employee Staff Filer Type (If Applicable):  Employing Office: Shared Principal Assistant to Period Covered: January 1,	A \$200 penaity shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS	
A. Did you, your spouse, or your dependent child:     a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period?	ing the reporting Yes No X
C. Did you or your spouse have "earned" income (e.g., salaries, honorenta, or pension/IRA distributions) of \$200 or more during the reporting period?  F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period?	r arrangement with an Yes No No
D. Did you, your spouse, or your dependent child have any reportable Yes No J. Did you receive compensation of more than \$5,000 from a fability (more than \$10,000) at any point during the reporting period?	an \$5,000 from a Yes No
ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	S" COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS	E QUESTIONS
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?	Hava you excluded Yes No No
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	et all three tests for Yes No 🔀

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# SCHEDULE A - ASSETS & "UNEARNED INCOME"

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	les-les	4	Franch	ABC Hedge Fund	Simon & Schuster	Maga Corp Stock	discussion of se refer to the inst	If you so choose, you may indicate that an exset o income source is that of your spouse (SP) o dependent child (DC), or jointly held with anyons (JT), in the optional column on the far left.	If you report a privately-traded fund that is an Eucapted investment Fund, please check the "Eir box.	Exclude: Your personal residence, including second homes and vocation homes (unless there was reint recome during the reporting period; and any financial interest in, or income derived front; as federal relievance program, including the Thrift Savings Plan.	200 m	For rental and other red property held investment, provide a complete address description, e.g., "rental property," and a city state.	For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, left every financial institution where there is more than \$1,000 in interest-bearing accounts.	For all IRAs and other retinement plans (such as (01(i) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not use only ticker symbols).	identify (a) each asset held for investment or production of hoome and with a fair market value acceeding \$1,000 at the end of the reporting pentil and and (b) any other reportable asset or source of income which generated more than \$200 in timesmed income during the year.	Assets and/or Income Sources	BLOCK A
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## **SCHEDULE C - EARNED INCOME**

Name: STUTIET A. CINDERMANTE Page 4 or

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

EXCLUDE: Miltary pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

INCOME LIMITS and PROMBITED INCOME: Be advised that the outside earned income limit and prohibitions on types of income may apply to you after you are on House payroll. The 2019 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$28,440. The 2020 limit is \$28,845. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff. MOMC 10 マネアン タヤーカマー し benowen Examples: bha Source (include date of receipt for honoraria) Stevens hard can G reterson (rade Association, Baltimore, MD (July 15) Le ma 10991 wayes 1099 weeps 099/wages 099/ wayes 099/wages 1099/wegs 099 hunger 099/Wages schan 1 6601 Type Current Year to Filling **Amount** 2,250 026 8,220 3050 6,400 5850 Pracading Year 0086 300

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## SCHEDULE C - EARNED INCOME

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exceeded \$10,000. "Column K is for liabilities held sciely by your spouse or dependent child 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 liabile); 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 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

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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, fraternal, 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, fraternal, 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 reporting period and 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

#### SCHEDULE F - AGREEMENTS

Name: STURRY H. LINDERMAN Page 6 of 8

Date	identify the dat continuation or employer.
Parties to Agreement	identify the data, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in employer.
Terms of Agreement	e with respect to: future employment; a leave of absence during the period of government service; emment; or continuing perticipation in an employee welfare or benefit plan maintained by a former

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Date	Parties to Agreement	Terms of Agreement

# SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

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