#### E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? **C.** Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the exchange any securities or reportable real estate in a transaction B. Did you, your spouse, or your dependent child purchase, sell, or A. Did you, your spouse, or your dependent child: Name: Terrold three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics. **EXEMPTION** - Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or your dependent child because they meet all 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? IPO – Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answered "yes" to this question, please contact the Committee on Ethics for further guidance. exceeding \$1,000 during the reporting period? PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS 2015 FINANCIAL DISCLOSURE STATEMENT UNITED STATES HOUSE OF REPRESENTATIVES IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS REPORT b. Make more than \$200 in unearned income from any reportable a. Own any reportable asset that was worth more than \$1,000 at the FILER STATUS end of the reporting period? or U.S. House of Representatives 2015 Annual (Due: May 16, 2016) Member of or Candidate for Lewis District: State: / Yes ž K žes Z Yes ×es 10 X Daytime Telephone: (262) となーらるすら Amendment Š Š Š Z 몽 For Use by Members, Officers, and Employees G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$375 in value from a single source during the reporting period? F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing? ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" I. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$375 in value from a single source during the reporting period? Employee Officer or Employing Office: Termination Date of Termination: A \$200 penalty shall be assessed against any individual who files more than 30 days late. TOTAL AND RESOURCE OF A 2016 MAY 1 COMBB Use bhiy) HAND DELIVERED on 5 BALLYLIZE: Yes Yes Yes Yes ¥es Yes Yes X ĕ Š Š š Š ö ö

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# SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Terrold Lewis Naller Page 2 of

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sp NYC Emp. Retrievant System	mest System	~	TO Marion	Corrested Credit Union	145BC Bank	ABC Hedge Fund X	Examples: Simon & Schuster	SP Mega Corp. Stock	For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left.	If you have a privately-traded fund that is an Excepted Investment Fund, please check the "EIF" box.	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); and enty financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental and other real property held for investment, provide a complete address or description, e.g., 'rental property,' and a city and state.	For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.	For all IRAs and other retirement plans (such as 401(k) 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).			Asset and/or Income Source	BLOCK A
								Ľ.	None								you h	used. If an becau	Indic		
		-		X	X		Indefinite		\$1-\$1,000 \$1,001-\$15						<b>0</b> 0		you have no interest.	used.  If an asset was sold during the reporting period and is included only because it generated income, the value should be "None."  *Column M is for assets held by your spouse or dependent child in which	Indicate value of asset at close of the reporting period. If you use a valuation method other than fair market value, please specify the method		
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<u>ار</u>	D.		X	X	X				INTEREST								9	you in t	ferne mins	볶	
	- 5								CAPITAL G	AINS							ē	mus, may	Check all columns that apply. generate tax-deferred income (su	ō	뽄
0	3								EXCEPTED	/BLIND TRUST							\$	che acc	apply	'n	BLOCK C
Schol.									TAX-DEFEI	RRED							8	529 accounts), you may check the column. Dividends, interest, and even if reinvested, must be discloster assets held in taxable accounts.	Check all columns that apply. For generate tax-deferred income (such as	Type of Income	
de C	late C					Partnership Income	Royalties		Other Type (Specify: e.	of Income g., Partnership I	ncome or Fa	ाग Income)		, ,			period.	529 accounts), you may check the "Tax-Deterred" column. Dividends, interest, and capital gains, even if relivested, must be disclosed as income even if relivested in taxable accounts. Check "None" if the seest sengeted on income during the properties.	or accounts that as 401(k), IRA, or	•	
									None							. 5° ≸	*Column X	categ Divid must	Fora		
			X	X	$oldsymbol{X}$				\$1-\$200							in which you have no interest.	Column XII is for assets held by your spouse or dependent child	category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if no income was earned or	For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets indicate the		
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								S(part)	P, S, S(part), or E						Leave this column blank if there are no transactions that exceeded \$1,000.	an asset was sold, please indicate as follows: (S (part)).	period.	purchases (P), sales (S), or exchanges (E) exceeding \$1,000	Indicate if the	Transaction	BLOCKE

# SCHEDULE C - EARNED INCOME

Name: Frrold Page 3

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

					Business and Labor Coalition of New York	New York City & Employee Retirement System	New York State Employee Retirement System	Examples: State of Maryland Civil War Roundtable (Oct. 2) Ontario County Board of Education	Source (include date of receipt for honoraria)	INCOME LIMITS and PROHIBITED INCOME: The 2015 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,225. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were totally prohibited.
				`	Spouse Consulting Fee	Syouse Pension	Pension	Legislative Pension Spouse Speech Spouse Stary	Туре	ensated at or above the "senior staff" rate re totally prohibited.
					NA	NA	20,971	\$18,000 \$18,000 \$1,000 N/A	Amount	e was \$27,225. In addition, certain

### SCHEDULE D - LIABILITIES

Name: Jerro/L Lewis Page\_ 앜

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. 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.

Example  Thells  These states	`     `	<b>` </b>	<b>`  </b>	Ехетр		SP, DC, JT		
Chair Credit Cad Campies 10/10	7.00	lon knyporstein	ر	Wells Fargo Bank	First Bank of Wilmington, DE	Creditor		
	•	4//3		2/13	5/98	Liability Incurred MO/YR	}	
Revolving Credit Card	home, contlands, all (not restal)	Parchage loom on recation	Resilence, NYC (ust rooted)	Mertage on Personal	Mortgage on Rental Property, Dover, DE	Type of Liability		
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		X	_			\$15,001- \$50,000	œ	
						\$50,001- \$100,000	ი	
					×	\$100,001- \$250,000	0	 ▶
				X		\$250,001- \$500,000	т	Amount of Liability
						\$500,001- \$1,000,000	П	of Li
ı						\$1,000,001- \$5,000,000	ဖ	bility
L						\$5,000,001- \$25,000,000	I	
						\$25,000,001- \$50,000,000	<u>-</u>	
						\$25,000,001-	-	

#### **SCHEDULE E - POSITIONS**

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, fratemal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. Report all positions, compensated or uncompensated, held during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or

East of Hudson Rail Freigh				
			Chair	Position
				Name of Organization

## SCHEDULE F - AGREEMENTS

Page 앜

Identify the da	ldentify the date, 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	Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.
Date	Parties to Agreement	Terms of Agreement
6/13	N.Y. S. Employee Retirement System	6/13 N.Y. S. Employee Retirement System To provide a pension after service as a New York
_		State emplayee.
:		

#### **SCHEDULE G – GIFTS**

Report the source (by name), a brief description, and the value of all gifts totaling more than \$375 received by you, your spouse, or your dependent child from any source during the year. **Exclude**: Gifts from relatives, gifts of personal hospitality from an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$150 or less need not be added towards the \$375 disclosure threshold. **Note**: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph Smith, Arlington, VA	Silver Platter (determination of personal friendship received from the Ethics Committee)	\$400