PRELIMINARY INFORMATION --EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE 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 benefiting you, your spouse, or dependent child? ***PO—**Did you purchase any shares that were allocated as a part of an Initial Public Offering? \$1,000 during the reporting period?
If yes, complete and attach Schedule IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding If yee, complete and attach Schedule III. III. Did you, your spouse, or a dependent child receive "unearmed" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?
 If yes, complete and attach Schedule I. Name: Matthew J. Salmon **EXEMPTION**—Have you excluded from this report any other assets, "unearned" income, transactions, or flabilities 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. If yes, complete and attach Schedule V. V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? **CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT** UNITED STATES HOUSE OF REPRESENTATIVES reporting period: Report Type Status Annual (May 15, 2013) House of Representatives Member of the U.S. District: State: Arizona ANSWER EACH /Amendment ¥**85** ۆ ∑ <u>و</u> ک Yes Ϋ́ος |<u>Χ</u> OF THESE QUESTIONS Daytime Telephone. ₹ |X <u>z</u> 8 Ş <u>Z</u> Employee Officer or reportable travel or reimbursements for travel in the reporting period (worth more than \$350 from one source)? If yea, complete and attach Schedule VII. VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?

If yes, complete and attach Schedule VIII. an outside entity?

If yes, complete and attach Schedule IX. VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)?

If yes, complete and attach Schedule VI. VII. Did you, your spouse, or a dependent child receive any IX. Did you have any reportable agreement or arrangement with For use by Members, officers, and employees appropriate schedule attached for each "Yes" response. Employing Office Each question in this part must be answered and the Termination Termination Date: HAND DELIVEREDS Exemp against anyone who files more than 30 days late. A \$200 penalty shall be assessed 2013 2013 21 2010: 27 (Office Use Only) Yes. Yes Yes Yes Yes <u>هٔ</u> ک <u>№</u> × <u>8</u> × <u>8</u> × Z 0 § |∑ <u>₹</u> 8

Name Matthew J. Salmon

Page 2 of S

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. 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.

Source State of Mandand	Type Approved Teaching Fee Legislative Pension	Amount \$6,000
Examples: Civil War Roundtable (Cct. 2nd) Ontario County Board of Education	Spouse Speech Spouse Salary	\$1,000 NA
	Salary	\$ a17,500.
Wostream Consulting Inc.	Spouse Salary	
	Spouse Proprietashid	ZA A

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SCHEDULE II — PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics. A green enverlope for transmitting the list is included in each Member's filing package.

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eamos	Activity	Date	Amount
Association of American Associations, Washington, DC	Speech	Feb. 2, 2012	\$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2012	\$500
None			

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Sp Opperteinner Equily Income	Opposheimer Equity Theme	401K-PAT, Custodian	Sotenatic. Stack	T Bank of America	Mright Padman CRCLL	1st Bank of Paducah,	Examples:	SP Mega Corp. Stock	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your abouse (JT), in the optional column on the far left. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	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 or other real property held for investment, provide a complete address or a description, e.g., "rental property," and a city and state.	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 ticker symbols.)	identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of knoome which generated more than \$200 in "unearned" income during the year.	Asset and/or income Source	BLOCK A
E	8		X						None	>		ods I.L	anc inc	year. year. fair m used.		
	3_					L	Z		\$1 - \$1,000	ø	_	* This column is for assets held sciely by your spouse or dependent child.	It an asset was sold during the reporting year and is included only because it generated income, the value should be "None."	indicate value or asset at close or reporting year. If you use a valuation method other than fair market value, please specify the method used.		
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<u> </u>					×	×	_	\Box	RENT		<u> </u>	글을	8 8 5		₹	
		<u> </u>	X	×	^	₽	 	×	CAPITAL GAINS		—	vested, must be disclosed as income. Check "None" if the asset generated no income during the reporting that the control of th	IRAs), you may check the Deferred" column. Dividends est, and capital gains, even	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or	Type of Income	BLOCK C
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		 				╁	۴	H	\$1,000,001 - \$5,000,000	<u>×</u>	\dashv	* This column is for income generated assets held solely by your spouse	# 무 등	ets, ch	. 6	
		l		\vdash		\vdash	 	H	Over \$5,000,000	<u>×</u>	-	ated use	and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was assed or penerated	For assets for which you checked "lax- Deferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest.	•	
				\vdash		t	 	Н	Spouse/DC Income over \$1,000,000*	<u>_</u>		ই ≦	", Ē	T T A T A T A T A T A T A T A T A T A T	•	
								S (partial)	(S) (pertial) See below for exam- ple. P, S, E	an asset is sold, please indicate as	If only a	yes	\$1,000 in reporting	asset had purchases (P), sales (S), or exchanges (E) exceeding	Indicate if the	BLOCK €

SCHEDULE IV— TRANSACTIONS

Name

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SP, DC, JT In a capital loss, Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below. Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III. Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted This column is for assets solely held by your spouse or dependent child. Sp Example: Sotema Inc Sotena Inc Mega Corporation Common Stock (partial sale) of Transaction X **PURCHASE** Type × SALE **EXCHANGE** Check Box if Capital × Gain Exceeded \$200 9/30/12 Quarterly, Monthly, or Bi-weekly, if (MO/DAY/YR) 9/30/12 applicable 10-12-12 Date \$1,001-> \$15,000 \$15,001-\$50,000 W \$50,001-\$100,000 O Amount of Transaction \$100,001-× o \$250,000 \$250,001-M \$500,000 \$500,001-Ħ \$1,000,000 \$1,000,001-Ω \$5,000,000 \$5,000,001-I \$25,000,000 \$25,000,001-\$50,000,000 \$50,000,000 Over \$1,000,000* ㅈ (Spouse/DC Asset)

SCHEDULE V— LIABILITIES

Name Page 6 of 8

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

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	77	7	4		JT DC, SP,	
	Cutibank	US BONL	Chase Bank	Example: First Bank of Wilmington, DE	Creditor	
	72003	12/2005	7/1997	May 1998	Liability Incurred Mo/Year	Date
	Personal Residence HELD 2739 ENEWEST NOSAL AZ	Bergaral Residence Mortgage 3871 Hillipo Dr. Labusida A.Z.	Mortgarizate Home St-Masa Az	Mortgage on 123 Main St., Dover, DE	Type of Liability	
	ι ι ·	i	A2		\$10,001- \$15,000	
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	×				\$50,001- \$100,000 \$100,001-	4
	^	×	×	×	\$250,000 \$250,001-	
					\$500,000 T	E S
					\$1,000,000 3 \$1,000,001- \$5,000,000	Amount of Liability
					\$5,000,000 - \$5,000,001- \$25,000,000	1 -
			<u> </u>		\$25,000,001- \$50,000,000	1
					Over \$50,000,000 ⁵	1

SCHEDULE VI— GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of 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 \$140 or less need not be added towards the \$350 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

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 H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	\$375
Not Apolicable - No	Not Apolicable - New Member January 2013	

	Name
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SCHEDULE VII— TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed by the sponsor. the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$350 received by

spouse or dependent child that is totally independent of his or her relationship to you. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a

Examples: Roycroft Corporation Chicago Chamber of Commerce New Member Aug. 6-11 Date(s) Mar 2 January 2013 City of Departure—Destination— City of Return DC-Los Angeles-Cleveland DC-Chicago-DC Lodging? (Y/N) ≺ z (Y/N) **~**│ z Was a Family Member included? (Y/N) Z Number of days not at sponsor's expense 2 Days None

SCHEDULE VIII—POSITIONS

Namo Matthew J. Salmon

Page 8 of 8

organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

tions); and positions solely of an honorary nature. Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organiza-

note), and positions somety of all individually hateres.	orary hardres.
Position	Name of Organization
St. VP External Affairs	St. VP External Affairs Sottera Inc. dba NJOy - Terminated in 2011
Member	Solid Ground Solutions LIC - Terminated in 2012/No Compared
Director	Passort Potash-Terminated early 2012 (No Compensation)

SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. Identify the date, parties to, and general terms of any agreement or arrangement 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