three Yes No X	spouse or dependent child because they meet all	income, transactions, or liabilities of a	EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "see" unless you have first consulted with the Compatition on Ethics
d from Yes No X	trusts" need not be disclosed. Have you excluded from	on Ethics and certain other "excepted d?	TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" this report details of such a trust that benefits you, your spouse, or dependent child?
SNS	VER <u>BOTH</u> OF THESE QUESTIONS	I INFORMATION - ANSI	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER
	THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	THE SCHEDULES THAT Y	THIS FORM INCLUDES ONLY 1
	IF YOU ANSWER "YES"	ATTACH THE CORRESPONDING SCHEDULE IF Y	ATTACH THE CORF
single Yes No X	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	No J. Did you receive source in the curre	D. Did you, your spouse, or your dependent child have any reportable Yes liability (more than \$10,000) at any point during the reporting period?
with Yes No	F. Do you have any reportable agreements or arrangements with an outside entity?	No F. Do you have an an outside entity?	C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?
period Yes X No	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	X	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? or b. Make more than \$200 in unearned income from any reportable asset during the reporting period?
		F THESE QUESTIONS	PRELIMINARY INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS
A \$200 penalty shall be assessed against any individual who files more than 30 days late.	Covered: January 1, <u>20</u> 14	Period to _£	New Officer or Employee  Employing Office:
(Office Use Only)	Check If Amendment	14	New Member of or Candidate for State: 44  U.S. House of Representatives District: 1  Candidates – Date of Election: MAY 20, 20
2014 JUN 24 AM II: 13	2011 - US 110	Daytime Telephone:_	Name: Jaho A. MCCALLUM
JUN 1 3 2014 Page 1 of 6 LEGISLATIVE RESOURCE CENTER	nd New Employees	FORM B For New Members, Candidates, a	UNITED STATES HOUSE OF REPRESENTATIVES
L			

SCHEDULE A - ASSETS & "UNEARNED INCOME" Name: JOHN A. MCCALLIM Page 2 of 6

						:	5	3 4	S5.0 mon For Porcy Tren hour integration of the form o	\$ <u>\$</u>	g 6 g	Identify production exceeding and (b) income funcione		
-	Jam Cliani Raman 122	Ľ	5/1	JAM ACH DT 515	ABC Hedge Fund	Examples: Simon & Schuster	Mega Corp Stock	EFF	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 rental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and state.  For an ownership interest in a privately-held business that is not publicly traded, state the name of the geographic location in Block A.  Exclude: Your personal residence, including second formes and vacation homes (unless there was rental income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan, If you have a privately-traded fund that is an Excepted investment Fund, please check the "Elif" box.  If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left.  For a defailed discussion of Schedule A For a defailed discussion of Schedule A	401(t) 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).  For all IRAs and other retirement plans (such as	identify (a) each asset held for investment or production of income and with a fair market value sexceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in unearned income during the year.	Assets and/or income Sources	BLOCK A
	メ								None 2	·	Pile Col	Indic you pleas If an inclu		
				<u> </u>	ļ		L		\$1-\$1,000		*Column M is for assets held by y child in which you have no interest	indicate value of asset at close you use a valuation method obt please specify the method used. If an asset was sold during thinduded only because it gen should be "None."		- 1
				_		indefinite			***************************************	,	Hich y	alue a value ecify et wa only 'Non		J
メ			-		_	<b>a</b>	⊣			2	o as	e, sec		
		×	Х.	×	$\vdash$	+	-	×	\$50,001-\$100,000 n	n n	sets ave n	set a metho bid di suse	Valu	
				-	×	╁╌	-		\$100,001-\$250,000 \$250,001-\$500,000 6		o inte	atclo thod duse duse	ĕ	BLOCK B
	<del></del>				1	+-	$\vdash$		· · · · · · · · · · · · · · · · · · ·	<u>′</u>	"Column M is for assets held by your spause or dependent child in which you have no interest.	indicate value of asset at close of the reporting period. If you use a valuation method other then fair market value, please specify the method used.  If an asset was sold during the reporting period and is included only because it generated income, the value should be "None."	Value of Asset	Κ̈́B
					+-	+	H		\$1,000,001-\$5,000,000		F 목	than than	set	
				-		╁			\$5,000,001-\$25,000,000	-	) BSUD	reporting		
	i					†	T		\$25,000,001-\$50,000,000	ς .	or d	mar) perio		
	-								Over \$50,000,000	-	epes.	perio et ve he v		
					l				Spouse/DC Asset over \$1,000,000*	:				
X	X	X	X	X					NONE		in core	Check that Check that the the that the the that the the that the the that the the the that the the the the the the the the the th		
	• • •						,	×	DIVIDENDS		Check "None" if the asset gen income during the reporting period	Check all columns the that generate tax-del that generate tax-del 401(k), IRA, 529 acc the "Tax-Deferred" interest, and cap reinvested, must be for assets held I		
							Ī		RENT		uring.	Defe	J	
						T	Ī	_	INTEREST		퇇뼥	mns tax-c 29 a med d c	Pe	9
					<b>†</b>		1		CAPITAL GAINS		ebor En	columns that a rate tax-deferre tax-deferre A, 529 account Deferred columns and capital d, must be dis ta held in t	Type of Income	BLOCK C
						†	Ì		EXCEPTED/BLIND TRUST		asse ting p	nat apply ferred in counts). Column. column. ital ga disclos	nca	õ
						t	-		TAX-DEFERRED		e de	pply. For income sincome sinco	Ä	
					Partnership Income	Royalties			Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		nerated not	Check all columns that apply. For eccounts that generate tax-deferred income (such as 401(k), IRA, 529 accounts), you may check the "Tax-Deferred" column. Dividends, interest, and capital gains, even if relinvested, must be disclosed as income for essets held in taxable accounts.		
х	×	Х	X	X	8 -5	1	┢		None -		- 0			ヿ
		-	-		t	+	<del>  ,</del>	×	\$1-\$200 =			For assets other asset and capit accounts.		
						T	1-		\$201-\$1,000			ets f		
									\$1,001-\$2,500 <			orwh indic gair ∑heck istor		
						×			\$2,501-\$5,000 <	င္		asse		
					×		L		\$5,001-\$15,000 <b>\leq</b>	<u>1</u>		10 10 10 10 10 10 10 10 10 10 10 10 10 1		
									\$15,001 <b>-</b> \$50,000 ≦	Current Year		for which you checked "Tax-Deferred" in Block C, y s indicate the category of income by checking the are indicate the category of income by checking the are if gains, even if reinvested, must be disclosed Check 'None" if no income was samed or generated. It is for assets held by your spouse or dependent child		
						L	Ļ	_	\$50,001-\$100,000 <u>≦</u>	ar ar		ed "		
					_	_	L	4	\$100,001-\$1,000,000			inco sted e wa	_	
					<u> </u>	┞-	<u> </u>	_	\$1,000,001-\$5,000,000			)efen me b , mu s ear	Amount of Income	
<b>  </b>					-	$\vdash$	$\vdash$	_	Over \$5,000,000   Secure (NO Income prior \$1,000,000)*			red"	ğ	ᇣ
	J	Ų.	lacksquare	<u></u>		_	H	_	Spouse/DC Income over \$1,000,000*	H		eckin orga orga	<u>o</u>	BLOCK D
X	X	X	X	X		-	$\vdash$	_	None = \$1-\$200 =			ock ( scloral neral	inc.	θł
$\vdash$					<del> </del>	$\vdash$	,	$\dashv$	\$201-\$1,000			hild in	ğ	ĺ
-			-				H	$\dashv$	\$1,001-\$2,500	_ [		oropri as ir	(D)	1
╟─┼						-	+		\$2,501-\$5,000	ē		For assets for which you checked "Tax-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, 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 generated.  "Column XII is for assets held by your spouse or dependent child in which you have no interest.		
						×	$\vdash$	$\dashv$	\$5,001-\$15,000 \leq	Preceding Year		That is		I
					×			-	\$15,001-\$50,000 <b>\leq</b>	គ្គ		the "lelow.		I
1						İΠ		$\neg$	\$50,001-\$100,000 ≦	<u>ا</u> ۾		None Divisets o inte		
						T		$\dashv$	\$100,001-\$1,000,000 😾	4		y" 80 vider hel		
			-		Ţ	T			\$1,000,001.\$5,000,000 ×					
									Over \$5,000,000 ×			interest, taxable		
	$\rightarrow$					Г	Г	$\neg$	Spouse/DC Income over \$1,000,000°   ≦	- 1		<b>5 8</b> €		

Use additional sheets if more space is required.

Name:

JOHN A. MCCALLIAM

ু ক

				Τ_	Π			Γ	Γ						ㅋ႙ઙ		
A/ Incalcim TD	JAM MOREY 5:1	The Cotto the Life	TAN CAPTON PARTINES	Marking LTC	14 WZ V	NIN BOT	_	750 29 1	<b>1</b>	JAN MY PS 144	Jam Mic Acts 2:2	TOW THE WAS	DAM GIL PLANT 2221	A CACAL	ASSET NA		Assets and/or income Sources
	X	X	X	<u> </u>	Х		T									None >	
									<u> </u>							\$1-\$1,000 co	
			<u> </u>	ļ		ļ	ļ		<u>L</u> _		L_					\$1,001-\$15,000 O	
		<u> </u>	ļ	<u> </u>					<u> </u>	×						\$15,001-\$50,000	
		<u> </u>	<u> </u>	<u> </u>	<u> </u>	Х.	×	X	<u>L</u> _	_	<u>×</u>	Х.				\$50,001-\$100,000 m	<u>≨</u>
X		<u> </u>		ļ	<b> </b>	<u> </u>	ļ		_		<b>_</b>		X			\$100,001-\$250,000	2
		<u> </u>	<u> </u>	X	<u> </u>	<u> </u>	<b>}</b>	<u> </u>	<u>×</u>	<u> </u>	<u> </u>	ļ	<u> </u>	X		\$250,001-\$500,000 ග	of D
		<u> </u>		<u> </u>	ļ	ļ	<u> </u>	<u> </u>		_						\$500,001-\$1,000,000 =	Value of Asset
		<u> </u>	_	<u> </u>	ļ	<u> </u>	<u> </u>	<u> </u>								\$1,000,001-\$5,000,000 ~~	*
			_	<u> </u>	<del>                                     </del>	<u> </u>	<b> </b>	<u> </u>		<b> </b>		<u> </u>				\$5,000,001-\$25,000,000 -	
$\dashv$			ļ. <u> </u>	├-	├	ļ	<b>├</b> —	_	<u> </u>	<u> </u>						\$25,000,001-\$50,000,000	
$\dashv$		_	<b> </b>	├	<del> </del>	ļ	ļ			ļ	-		ļ 	-		Over \$50,000,000	
			1.7	1	20	تمع	2	X	<b>.</b>	×	~	×	<u>د</u> د	×		Spouse/DC Asset over \$1,000,000°	_
		×	×	×	X	X	^	$\hat{}$		-	~	^	^	<u> </u>		NONE	
_			ļ	├	<del>                                     </del>		├—	<del> </del>			<del> </del>			-		RENT	
-				├	├	-	-	-			-	ļ	-		-		₹
-		<u> </u>	_				<u> </u>				ļ				<b>[</b> ]	INTEREST	<b>.</b>
$\times$				<u> </u>	ļ	ļ	ļ					ļ				CAPITAL GAINS	Type of Income
_				<u> </u>			<u> </u>							<u> </u>	i	EXCEPTED/BLIND TRUST	Š
					<u> </u>		ļ									TAX-DEFERRED	<b>4</b>
3	ğ×												_			Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	_
		X	X	Х	Х	Х	×	X	Х	Х	X	X	X	Х		None –	
							<u> </u>									\$1-\$200 =	
				<u> </u>			<u> </u>									\$201-\$1,000 =	
			<u> </u>	<b>\</b>	<u> </u>	<b></b>										\$1,001-\$2,500 <	
$\dashv$				_							ļ					\$2,501.\$5,000 < CT   CT   CT   CT   CT   CT   CT   CT	
_							ļ									\$5,001-\$15,000 \leq 0	
<del>  </del>	-			<u> </u>	1	-					-					\$15,001-\$50,000 \( \leq \) \( \le	
X	<u> </u>		-		<b>-</b>		<u> </u>								$\vdash \vdash \vdash$		
				-	<del> </del>		<u> </u>									\$100,001-\$1,000,000 🔀	>
-+																\$1,000,001-\$5,000,000 × Over \$5,000,000 ×	á
$\dashv$	$\dashv$			$\vdash$												Spouse/DC Income over \$1,000,000° ≧	ğ
$\times$	$\overline{}$	<del>√</del>	Y	X	V	Y	X	×	V	×	<b>\</b>	X	V	×	$\vdash$	None –	<u>o</u>
7	$\sim$	^	<u>/\</u> _	1	/	/`						_	^			\$1-\$200 =	in C
-	-	<u> </u>		-			<del> </del>				_					\$201-\$1,000 =	Amount of Income
$\dashv$				_	1	-		$\vdash$									U
-+	$\dashv$				<u> </u>							-			H	\$1,001-\$2,500	
- 1	$\dashv$			<b></b>				Н						Н		\$5,001-\$15,000 ≤ ©	
$\dashv$																\$15,001-\$50,000 ≦ <b>2</b>	
<del>-</del>						<b>—</b>	$\vdash$		_							\$50,001-\$100,000	
					ļ ,			!									
																\$190,001-\$1,000,000 😾	
																\$100,001-\$1,000,000 × \$1,000,001-\$5,000,000 ×	

Use additional sheets if more space is required.

## SCHEDULE C - EARNED INCOME

Name:
Name: John A. MCCALLINA
A MC
CALL
7.5
70
Page 4 of G
of
G,

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

# 36,000 "	<b>4 18</b> ,000. "		·
\$329,773 °°	<b>#</b> 98, 538. "	SALARY	JAM CAPITAL PARTILIERS MALLAGEMENT, LLC
\$1,000 N/A	N/A	Spouse Speech Spouse Salary	Ļ
\$500 \$76,000	\$0 \$20,000	Honorarium Salary	ABC Trade Association, Baltimore, MD (July 15)  Examples: State of Maryland
Amount Preceding Year	Am Current Year to Filing	Туре	Source (include date of receipt for honoraria)
te was \$26,955. It is unchanged in ad for Members and senior staff.	ensated at or above the "senior staff" rate was \$26,955. It is unchange fiduciary relationship) are totally prohibited for Members and senior staff.	nbers and employees compensatessional services involving a fidu	INCOME LIMITS and PROHIBITED INCOME: The 2013 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. It is unchanged in 2014. 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.

#### SCHEDULE D - LIABILITIES

Name: Jata A. MCCALLUM Page S

Page S of 6

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. exceeded \$10,000. 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 (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 \*Column K is for liabilities held solely by your spouse or dependent child.

	 					1		
						DC, JT		
1 2 = 1	WAY 3	2000	८गा	AME	Example			
SCHEDI II E E DOSITIONS	JAM CAPITAL PARTHERS	Sourie maé	CTTBANK	Americal express	First Bank of Wilmington, DE	Creditor		
	6/2014	42014	42019	4/214	5/98	Date Liability Incurred MO/YR	,	
	درمصا	Epines was labor	LOAN	6/214 CRESIT CARD	Mortgage on Rental Properly, Dover, DE	Type of Liability		
				Χ		\$10,001- \$15,000	>	
		X	×			\$15,001- \$50,000	8	
						\$50,001- \$100,000	n	
					×	\$100,001- \$250,000	0	
	乂					\$250,001- \$500,000	m	moun
						\$500,001- \$1,000,000	71	Amount of Liability
				-		\$1,000,001- \$5,000,000	ဓ	ability
						\$5,000,001- \$25,000,000	I	
						\$25,000,001- \$50,000,000	-	
								_
						Over \$50,000,000	۔	

#### 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 listed in Schedule C; 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

Position	Position Name of Organization
DIRECTOR	RENTWIKT, WC.
DIRECTOR	CHARCELLOR

### SCHEDULE F - AGREEMENTS

	Name: Jaha A MCCALLUM
	Name: Jahu A MC
	MCCÁL
	100
	Page 6 of 6
	of 6
ı I	)

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

# 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.

•	•	
	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services