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		2019 MAY 15 PM 3: 29	Page 1 of
UNITED STATES HOUSE OF REPRESENTATIVES 2018 FINANCIAL DISCLOSURE STATEMENT	For Use by Member	CS FOLC OF THE SLERK ON THE SENTATIVE	
		(Office Use Only)	nly)
Name: Jaume Hundra Bellful Daytime Telephone: 202-725	Daytime Telephone: 2	02-725 –3536 A \$200 penalty shall be assessed against any individual who files more than 30 days late.	sed against any 30 days late.
FILER STATUS Member of the U.S. State: WAY STATUS District: 0	\(\sigma\) \(\frac{\pi}{\pi}\) \(\frac{\pi}{\	Officer or Employing Office: Staff Filer Type: (If Applicable) Employee Shared Principal Assistan	pe: (If Applicable) Principal Assistant
REPORT 2018 Annual (Due: May 15, 2019)	Amendment	Termination Date of Termination:	
PRELIMINARY INFORMATION - ANSWER EACH OF THESE	SE 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? b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	No U	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar Yes year up through the date of filing?	No No
B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period?	₩ 8 ₩	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$390 in value from a single source 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 reporting period?	No C	pendent child receive any for travel totaling more than travel totaling more than travel totaling period?	8
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?	× v	al or organization make a donation to charity in for a speech, appearance, or article during the	¥
E. Did you hold any reportable positions during the reporting period or Yes in the current calendar year up through the date of filing?	. ×	THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	WER "YES"
IPO AND EXCLUSION OF SPOUSE, DEPENDENT,	OR TRUST INFORMATION	DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS	
IPO – Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answortact the Committee on Ethics for further guidance.	ublic Offering during the reporting period?	? If you answered "yes" to this question, please Yes ☐☐	№
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need from this report details of such a trust that benefits you, your spouse, or dependent child?	tee on Ethics and certain other "excepted dent child?	trusts" need not be disclosed. Have you excluded Yes	₹ X
EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or yo all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	td" income, transactions, or liabilities of a suffice with the Committee on Ethics.	ur dependent child because they meet Yes	₹ ∑

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					T D a credit union	ABC Hedge Fund X	Examples:	SP Mega Corp. Stock EIF	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 nental and other real property held for investment, provide a complete address or description, e.g., Tental 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 business, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); and any financial interest in, or income derived from, a feeding retirement program, including the Thrift Savings Plan. If you report a privately-traded fund that is an Excepted Investment Fund, please check the "EIF" box. If you so choose, you may indicate that an asset or dependent child (DC), or jointy held with anyone (JT), in the optional column on the far left. For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	the account that exceeds the reporting thresholds. For bank and other cash accounts, total the amount in	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in	during the year. Provide complete names of stocks and mutual funds (do not use only ticker symbols).	Identity (a) each asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income that generated more than \$200 in "unearned" income	Assets and/or Income Sources	BLOCK A
									None	>					٦
									\$1-\$1,000	Ø	'	umn M	ation n		
					X		Indefinite		\$1,001-\$15,000	റ	,	*Column M is for ass you have no interest.	atue o nethod		
					Ċ		6		\$15,001-\$50,000	0		Column M is for assets held by your spouse 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 than fair market value, please specify the method used. If an asset was sold during the reporting period and is included only the period and is included only the period and is included only the period of the period of the period and the period of the period	!	ı
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									\$100,001-\$250,000	-11		by you	air ma	Value of Asset	ВГС
						×			\$250,001-\$500,000	<u></u>		ir spou	eportine	of A	BLOCK B
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-									\$25,000,001-\$50,000,000		-1	E C	ify the	:	
									Over \$50,000,000			n whic	meth ded o		
									Spouse/DC Asset over \$1,000,000* NONE	£					4
					~			u	DIVIDENDS		-	assets held in taxable accounts. asset generated no income during t	Check all columns that apply. For a generate tax-deferred income (such as 40 529 accounts), you may check the "T column. Dividends, interest, and capital if reinvested, must be disclosed as		
					×	\vdash		×	RENT		1	held	all c te tax count		1
									INTEREST		- I	in tax	defer defer idend		
				\vdash	<u> </u>				CAPITAL GAINS		-	able a	ast braid Sinta	be	<u></u>
	··•								EXCEPTED/BLIND TRUST		1	me du	mapp come ay charest, edis		BLOCK C
									TAX-DEFERRED		1	ring t	(such	_	n
						Partnership Income	Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		-	₽	Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k), IRA, or 529 accounts), you may check the "Tax-Deferred" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income for		
									None	_		acco *Colo			7
				Ľ	X				\$1-\$200	=	:	accounts. Check "None" if n *Column XII is for assets held in which you have no interest	check check gory of dends		
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									\$15,001-\$50,000	<u></u>	_	ome v	or all or	Amount of Income	õ
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				\vdash					Over \$5,000,000	<u>~</u>		or ge	Freim	!	
			<u> </u>	<u> </u>	_				Spouse/DC Asset with Income over \$1,000,000*	×	-	accounts. Check "None" if no income was eamed or generated. "Column XII is for assets held by your spouse or dependent child in which you have no interest.	ror assets for which you checked lax-u-beteried 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 must be disclosed as income for assets held in taxable.	•	
Н						┝		S(┥
								S(part)	no transactions that exceeded \$1,000.	Leave this column	an asset was sold, please indicate as follows: (S (part)).	exceeding \$1,000 in the reporting period.	asset had asset (P), purchases (P), sales (S), or exchanges (E)	Transaction	BLOCK E

SCHEDULE C - EARNED INCOME

Name: JAIM HWAN BOUTH Page 3 of 5

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	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.	
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INCOME LIMITS and PROHIBITED INCOME: The 2018 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$28,050. The 2019 limit is \$28,440. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited.	ated at or above the "senior staff" rate was say relationship) are totally prohibited.	\$28,050. The 2019 limit is \$28,440.
Source (include date of receipt for honoraria)	Туре	Amount
	Approved Teaching Fee	\$6,000
Examples: State of Maryland Civil War Roundtable (Cct. 2)	Legislative Pension Spouse Speech	\$18,000 \$1,000
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	Change Service	
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SCHEDULE D - LIABILITIES

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Name

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 of 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 *Column K is for liabilities held solely by your spouse or dependent child.

		9		SP. DC. JT		
		mu	Example			
		WILLS Fargo	First Bank of Wilmington, DE	Creditor		
		01/10	5/16	Date Liability Incurred MO/YR		
		matgage_	Mortgage on Rental Property, Dover, DE	Type of Liability		
	·			\$10,001- \$15,000	>	
				\$15,001- \$50,000	В	
				\$50,001- \$100,000	ი	
			×	\$100,001- \$250,000	D	$\left \ \right $
·	į	X		\$250,001- \$500,000	m	Amount of Liability
				\$500,001- \$1,000,000	π	of L
				\$1,000,001- \$5,000,000	ര	ability
				\$5,000,001- \$25,000,000	I	
				\$25,000,001-		1
				\$50,000,000		
				\$50,000,000 Over \$50,000,000		$\left\{ \ \right $

SCHEDULE E - POSITIONS

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 consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution ofther 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.

		−⊤	П
			Position
			Name of Organization

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

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Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$390 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

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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 (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to

Bepublican Mainstract Partnership March 1-4 the filer. Amunian South of Transplantation Examples: Habitat for Humanity (charity fundraiser) Government of China (MECEA) Source RB9-10 Aug 6-11 Date(s) Mar. 3-4 DL - Sun Junh IDC 2- Phoenix-DC City of Departure-Destination-City of Return DC-Beijing, China-DC DC-Boston-DC Lodging? (Y/N) ~< 2 (YN) ~ Family Member Included? (Y/N)