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UNITED STATES HOUSE OF REPRESENTATIVES 2013 FINANCIAL DISCLOSURE STATEMENT	S Form A For Use by Members, Officers,	DELIVERED and Employees	Page 1 of 6
Name: U.S. Rep. John F. Tierney	Daytime Telephone: 508-52	3-6766 2015 JAN 12 AM II: 09 3-6766 OFFICE OF THE GLICK OF THE GLIC	AHII: 09 SECULOR FM SECULOR FM SECULOR FM SECULOR FM
FILER FILER X Member of or Candidate for State: STATUS U.S. House of Representatives District:	MA Officer or Employee	or Employing Office:	
REPORT X 2013 Annual (Due: May 15, 2014) TYPE X 2014 Fcb. 2, 2015	Amendment	Termination Date:	
PRELIMINARY INFORMATION - ANSWER EACH OF TH	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? or b. Make more than \$200 in unearned income from any reportable asset during the reporting period? 	Yes No F. Did you have any routside entity during t	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?	es 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?	Yes No G. Did you, your spouse, or your de reportable gift(s) totaling more than source during the reporting period?	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$350 in value from a single source during the reporting period?	es No
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?	Yes No H. Did you, your spoureportable travel or re \$350 in value from a	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$350 in value from a single source during the reporting period?	es No
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	Yes No I. Did any individual o lieu of paying you for reporting period?	or organization make a donation to charity in a speech, appearance, or article during the Yes	es No
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes No V ATTACH THE C	ORRESPONDING SCHEDULE IF YOU ANSWER "YES"	J ANSWER "YES"
PENDENT,	OR TRUST INFORMATION - ANSW	ER EACH OF THESE QUESTIONS	S
IPO − Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you at the Committee on Ethics for further guidance.	ublic Offering during the reporting period? If you a	nswered "yes" to this question, please contact Yes	es No V
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" neithis report details of such a trust that benefits you, your spouse, or dependent child?	Ethics and certain other "excepted trusts" ne	ed not be disclosed. Have you excluded from Yes	es 🔲 No 🔐
EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	ed" income, transactions, or liabilities of a spouse or the Committee on Ethics.	dependent child because they meet all three	es No D

SCHEDULE A - ASSETS & "UNEARNED INCOME"

M.S. Rep. John F. Tierney Page_ 잋 6

Assidentify (a) production cerceeding \$ and (b) any	BLOCK A Asset and/or Income Source Identify (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 peniod and (b) any other reportable asset or source of		te value	of asset a	BLOW Value of at close of an fair man	BLOCK B BLOCK B Value of Asset t close of the report an fair market value, p	ing period. lease specif	BLOCK B Value of Asset 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		all column e tax-defer counts), y	BLOCK C Type of Income Check all columns that apply. For accome tax-deferred income (such as 401) 529 accounts), you may check the Tax column. Dividends, linterest, and capit	C COME	accounts that 401(k), IRA, or "Tax-Deferred" capital gains,	For asse may che category Dividence	BLO Amount Amount For assets for which you checke Amount to the common to the c	Amou hyou ch one oolu ne by ch	BLOCK D Amount of Income hyou checked "Tax-Defen ne" column. For all other by checking the appro st, and capital gains, e- st, and capital gains, e-	ncome ax-Deferral other he appropriately	d" in B	ার ≘ ই বি	
income that generated income that generated income during the year. Provide complete name (do not use only ticker s For all IRAs and othe 401(k) plans) provide the	income that generated more than \$200 in 'unearned' income during the year. Provide complete names of stocks and mutual funds (do not use only ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) provide the value to each asset held in		If an asset was soll because it generated *Column M is for ass you have no interest.	as sold du erated inco or assets h terest.	ring the re me, the val eld by your	porting pen ue should b spouse or o	iod and is e "None." dependent c	If an assel 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 you have no interest.		reinveste ets held ir sset genera	even if reinvested, must be disclosed as for assets held in taxable accounts. Char if the asset generated no income during the period.	counts.	even if reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if the asset generated no income during the reporting period.	must be accounts. generated. *Column X child in whi	must be disclosed as income accounts. Check "None" if a generated. "Column XII is for assets held be child in which you have no interest	Check "None" is for assets he you have no inte	e" if no held by nterest.		your spo	as income for assets held in "None" if no income was ear sets held by your spouse or de e no interest.	
For bank an in all interes \$5,000, list more than \$	ure account that exceeds the reporting presholds. 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.	>	o		n T	o (*)		×			12.1 (18.1 (=	```	< }\ \ \ \ \	≤		≦	¥≣ ×	VIII X
For rental ar provide a c	For rental and other real property held for investment, provide a complete address or description, e.g. rental property, and a city and state.	r A	100																		
For an owne that is not business, to geographic h	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.	8 n 8																			
Exclude: Yo homes and income durin interest in, retirement part	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 federal retirement program, including the Thrift Savings Plan.	<u>~ ≅ 50 67 ⊈</u>						198 3 (1987)					m income)								00,000*
If you have Excepted in box.	If you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box.	15	rae	1 P 71	18 S 18 18 18 18 18 18 18 18 18 18 18 18 18		Q. Y. a.	000.000*					ncome or Fari		\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\						me over \$1,00
tf you so ch income sou dependent of (JT), in the o	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.	9 2 3	000	AN		(ACAUCE)	epistojana	1-\$50,000,000 Asset over \$1,0			VBLIND TRUST		of Income g., Partnership I			y Assaya.		******	71.00 amas 20 am	\$5,000,000	\$5,000,000
For a de requirement	For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	None >	\$1,001-\$15	Stration	\$50,001-\$10 3 405 EF s &	\$250,001-\$1		0 - 1 -1	DIVIDENDS	INTEREST	- 1 C 20 S	102,000	Other Type (Specify: e.(\$1-\$200	\$1,001-\$2,5	702	\$5,001-\$15, \$18,601-80	\$50.001.\$4	\$50,001-\$10	\$1,000,901	\$1,000,001- \$45,000 Spouse/DC
1 Z &	SP Mega Corp. Stock EIF	1			×				×		2.0	el el				×			6.3		S(part)
JT Examples:	Simon & Schuster	3	ī,	Indefinite		850							Royaties		7 (S)			32.3835.2			e e
	ABC Hedge Fund X	×				×							Partnership Income					25,000			
Ci	Cisco Systems						1	100 g		<u> </u>	2.32				i de			3.400033000			
Nille	le Chass B	2000000	3.7		4.													20050000	62		
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Was	Washington, OC	100							2 50 E												

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SCHEDULE A – ASSETS	- ASSETS & "UNEARNED INCOME"	Name: S. R. P. John F	nn F. Tierney Page 3 of	6
BLOCK A Asset and/or Income Source	BLOCK B Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
	> 00 CCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCC	2	1 # # V V V W VIII X X X XI XI	
	30	RUST		
	None \$1,001-\$15,000 \$1,001-\$15,000 \$50,001-\$100,000 \$250,001-\$100,000 \$250,001-\$1,000,000 \$1,000,001-\$5,000,000 \$25,000,001-\$25,000,000	INTEREST CAPITAL GAINS EXCEPTED/BLIND TRU AN DEFENSE Other Type of Income	\$1,001-\$2,500 \$2,601-\$5,000 \$5,001-\$15,000 \$16,001-\$30,000 \$50,001-\$1,000,000 \$100,001-\$5,000,000 Over \$5,000,000	P, S, S(part), or E
SP, ASSET NAME EIF JT ASSET NAME				
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Berkshire Hathaway	×			P
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Fidelity Cosh Reserves				Þ
mey	X	X		
Eastern Savings Dank				
Wright Parman F.C. U.	X X			
			저 지 첫 참 처 관	

SCHEDULE B – TRANSACTIONS

Name: Rep. John F. Tierney Page 4 of 6

																Bank Deposit Program Citibank	Western Asset Gov't Miney Market	Sp Example Mega Corp. Stock	SP, DC, JT Asset	Capital Gains: If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box, unless it was an asset in a tax-deferred account, and disclose the capital gain income on Schedule A. * Column K is for assets solely held by your spouse or dependent child.	dependent child for investment or the production of income. Include transactions that resulted in a capital loss. Provide a brief description of an exchange transaction. Exclude transactions between you, your spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please choose 'partial sale' as the type of transaction.	Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the reporting period of any security or real property held by you, your spouse, or your
										leiki Jego sab						X	X			Sale	Silver (1) June 10 (1)	Type of Tr
				2010 2010			h di		nr.										10000000	Exchange	er gehind Fridans	Type of Transaction
r		f	:												 			×		Check Box if C Exceeded \$20	Capital Gain 0	,
																1/9/17	2/18/14	3/5/13		weekly, if applicable	(MO/DAYR) or Quarterly, Monthly, or Bi-	Date
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	TY The	6 V		34											5					Parking Productions December		

SCHEDULE C - EARNED INCOME

Name: Rep. John F. Tierney Page 5 of 6

the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.	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	
	or a spouse,	
	ist	

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

						Darci L		Examples:			INCOME LIMITS and types of income (notate
						Darci L. Gilbo, marblehead, mA	Onlario County Board of Education	State of Maryland	Keene State	Source (include date of receipt for honoraria)	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. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were totally prohibited.
						independent contract/ Spouse income	Spouse Salary	Legislative Pension	Approved Teaching Fee	Туре	pensated at or above the "senior staff" rate vere totally prohibited.
						N/A	N/A	\$18,000	\$6,000	Amount	was \$26,955. In addition, certain

SCHEDULE D - LIABILITIES

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

						Amou	Amount of Liability	ability		
	Creditor	Date Liability	Type of Liability	>		D •	F		± 0 ←	
.		MO/YR		\$15,001- \$50,000	SSCOOL PROCESS	\$100,001- \$250,000	\$500,001- \$1,000,000	\$1,060,001 \$5,500,006 \$5,000,001	\$25,000,000 \$25,000,000 \$50,460,000 Over \$50,000,00	
	Example First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE			×				
77	Nat'l Grand Burne or Musbleneud	9/97	Home most sage salem, MA			Х				
	inuvoicnesa, mm	,								
77	CHASE	Y10	1025 1st st. SE Washington, DC			$X \sqsubseteq$				
						•				
2										

SCHEDULE E – POSITIONS N/A

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 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.

				HOLOU III O
	22222		Position	chedule C, positions held in dry religious, social, he
			Name of Organization	insee in schedule c, positions return any religious, social, inaterial, or political entities (such as political parties and campagn organizations), and positions solely or an noticinary nature.