hid Yes ☐ No ☑	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 "yes" unless you have first consulted with the Committee on Ethics.	sets, "unearned" i ? Do not answer "	Exemptions Have you excluded from this report any other as because they meet all three tests for exemption
Yes No 🗸	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?	wed by the Commidetails of such a tr	Trusts Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain disclosed. Have you excluded from this report details of such a trust benefiting you, your s
Yes No V	Itial Public Offering?	d as a part of an in	IPO Did you purchase any shares that were allocated as a part of an initial Public Offering?
SE QUESTIONS	INFORMATION ANSWER EACH OF THESE QUESTIONS	OR TRUST	IPO and EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
" response.	appropriate schedule attached for each "Yes" response		If yes, complete and attach Schedule V.
and the	Each question in this part must be answered and the	Yes V No	Old you, your spouse, or a dependent child have any reportable liability V. (more than \$10,000) during the reporting period?
	If yes, complete and attach Schedule IX.		If yes, complete and attach Schedule IV.
outside Yes ✔ No	Did you have any reportable agreement or arrangement with an outside IX. entity?	Yes No	Did you, your spouse, or dependent child purchase, sell, or exchange any IV. reportable asset in a transaction exceeding \$1,000 during the reporting reshort?
	If yes, complete and attach Schedule VIII.		If yes, complete and attach Schedule III.
ing in the Yes ✔ No □	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Yes ✓ No	Did you, your spouse, or a dependent child receive "unearned" income of III. 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 VII.		If yes, complete and attach Schedule II.
le travel or lan \$350 Yes ✔ No ☐	Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$350 from one source)?	Yes ✓ No	Did any individual or organization make a donation to charity in lieu of paying II. you for a speech, appearance, or article in the reporting period?
	If yes, complete and attach Schedule VI.		If yes, complete and attach Schedule I.
legiftin herwise Yes ☐ No ☑	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)?	Yes 🕢 No 🗌	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?
	QUESTIONS	THESE	PRELIMINARY INFORMATION ANSWER EACH OF
more than 30 days late.	Termination Date:	☐ Termination	Report Type Annual (May 15) Amendment
be assessed against	Employee		Status House of Representative District: 01
A \$200 penalty shall	Officer Or Employing Office:		✓ Member of the U.S. State: MD
(Office Use Omly)	(Daytime Telephone)		(Full Name)
	-		Andy Harris
15 PH 2: 58	2013 15.0		
THIO BOSHOSBUT	For use by Members, officers, and employees. The source center	MENT	CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT
DELIVERED	FORM A Page 1 of 12	TATIVES	UNITED STATES HOUSE OF REPRESENTATIVES
I NO			

SCHEDULE I - EARNED INCOME

Name Andy Harris

Page 2 of 12

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 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.

4,5446.		
Source	Туре	Amount
Tidewater Anesthesia Associates	Anesthesia Services	\$7,500
Maryland Right to Life	Spouse Salary	N/A

SCHEDULE II - PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

Name Andy Harris

Page 3 of 12

It made by the sponsor of an event to a charitable organization in lieu

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 envelope for transmitting the list is included in each Member's filing package. Employees may request a green envelope from the Clerk or use a plain envelope that is appropriately labeled.

Source	Activity	Date	Amount
Oklahoma Society of Anesthesiologists	CME Lecture	June 23, 2012	\$500

SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Andy Harris	ris (Page 4 of 12
	BLOCK A	вгоск в	вгоск с	BLOCK D	BLOCK E
Assidentify (a) each value exceedin reportable asse "unearmed" inc	Asset and/or income Source 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 income which generated more than \$200 in "unearmed" income during the year.	Year-End Value of Asset Indicate value of asset at close of reporting year. If	Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that	Amount of Income For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets, indicate the	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E)
Provide comple For all IRAs and each asset held	Provide complete names of stocks and mutual funds (do not use ticker symbols.) 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.	method other than fair market value, please specify the method used.	(such as 40 (k) plans or RAs), you may check the "None" column. Dividends, interest, and capital gains, even if	the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check	reporting year.
For rental or ot a description, e	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.	If an asset was sold during the reporting year and is included only because it	reinvested, must be disclosed as income. Check "None" if the asset generated no income during the generating partial.	"None" it no income was earned or generated.	
For an ownership in state the name of the location in Block A.	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.	generated income, the value should be "None." * This column is for assets	annig an opposit process	generated by assets held solely by your spouse or dependent child.	
Exclude: Your I (unless there w \$5,000 or less i In, or income d Savings Plan.	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.	or dependent child.			
If you so choos spouse (SP) or optional colum	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 spouse (JT), in the optional column on the far left.				
For a detailed discuinstruction booklet.	For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.				
SP	First Mariner Bank CD	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
JT	M and T Bank Checking	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC1	529, College Savings Plan of MD, Portfolio for College	\$1,001 - \$15,000	None	NONE	
DC2	529, College Savings Plan of MD, Portfolio for College	\$15,001 - \$50,000	None	NONE	
DC2	529, Maryland Prepaid College Trust	\$1,001 - \$15,000	None	NONE	
DC3	529, College Savings Plan of MD, Portfolio for College	\$15,001 - \$50,000	None	NONE	

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SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	IE Name Andy Harris	rris		Page 5 of 12
DC3	529, Maryland Prepaid College Trust	\$1,001 - \$15,000	None	NONE	
DC4	529, College Savings Plan of Maryland, Portfolio 2012	\$15,001 - \$50,000	None	NONE	
DC4	529, Maryland Prepaid College Trust	\$1,001 - \$15,000	None	NONE	
	403b, CREF Equity Index	\$100,001 - \$250,000	TAX-DEFERRED	NONE	
	MD State Retirement, 457, 401K, Investment Contract Pool	\$100,001 - \$250,000	TAX-DEFERRED	NONE	
	MD State Retirement, 457, 401K, Large Cap Value	\$100,001 - \$250,000	TAX-DEFERRED	NONE	
	403b Vanguard, Mid Cap Index	\$15,001 - \$50,000	TAX-DEFERRED	NONE	
•	403b Vanguard, Capital Opportunity	\$15,001 - \$50,000	TAX-DEFERRED	NONE	
	403b, TIAA Tradtional	\$100,001 - \$250,000	TAX-DEFERRED	NONE	
	403b Vanguard, REIT Index	\$50,001 - \$100,000	TAX-DEFERRED	NONE	
	Keogh, T Rowe Price, Money Market	\$15,001 - \$50,000	TAX-DEFERRED	NONE	
	403b Vanguard, Life Strategy Growth	\$15,001 - \$50,000	TAX-DEFERRED	NONE	
	403b, American Century, Strategic Allocation	\$15,001 - \$50,000	TAX-DEFERRED	NONE	
	403b, American Century, Money Market	\$250,001 - \$500,000	TAX-DEFERRED	NONE	

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SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	IE Name Andy Harris	ris		Page 6 of 12
	403b, American Century, International Discovery	\$100,001 - \$250,000	TAX-DEFERRED	NONE	
	403b, American Century, Emerging Markets	\$50,001 - \$100,000	TAX-DEFERRED	NONE	
	403b Vanguard, Energy	\$15,001 - \$50,000	TAX-DEFERRED	NONE	
	Keogh, T Rowe Price, International Discovery	\$50,001 - \$100,000	TAX-DEFERRED	NONE	
DC5	529, Maryland Prepaid College Trust	\$15,001 - \$50,000	None	NONE	
DC5	529, College Savings Plan of MD, Portfolio 2018	\$15,001 - \$50,000	None	NONE	
	403b, American Century, Global Gold	\$50,001 - \$100,000	TAX-DEFERRED	NONE	
DC5	Vanguard 500 Index	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DG5	Venguard 500 Index	\$1,001 \$15,000	DIVIDENDS	\$1-\$200 Pup	Of sym
DC4	Vanguard Wellington	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC4	Vanguard Tax-managed Growth and Income	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	403b CREF Infl Linked Bond	\$100,001 - \$250,000	TAX-DEFERRED	NONE	
JT	T Rowe Price Charitable Gift Fund	\$15,001 - \$50,000	None	NONE	
Ţ	Fidelity Charitable Gift Fund	\$15,001 - \$50,000	None	NONE	

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SP DC3 DC3 DC4 DC4 DC4 DC5 DC5 Vanguard Money Market Vanguard Money Market Vanguard Wellington Vanguard Wellington Vanguard MidCap Index Growth and Income Vanguard Tax-managed Markets 403b Vanguard, Emerging 403b Vanguard, Money Marker Vanguard Money Market IRA Ameritrade, Money Market IRA Ameritrade, Money Market IRA Merck Labs IRA Joseph A Bank IRA McCormick \$1,001 -\$15,000 \$1,001 -\$15,000 \$1,001 -\$15,000 \$1,001 -\$15,000 \$1,001 -\$15,000 \$1,001 -\$15,000 \$50,001 -\$100,000 \$1,001 -\$15,000 \$100,001 -\$250,000 \$1,001 -\$15,000 \$1,001 -\$15,000 \$15,001 -\$50,000 \$1,001 -\$15,000 m \$1 - \$1,000 Name Andy Harris DIVIDENDS **DIVIDENDS/CAPI** DIVIDENDS DIVIDENDS/CAPI DIVIDENDS/CAPI TAX-DEFERRED TAX-DEFERRED TAL GAINS TAX-DEFERRED DIVIDENDS DIVIDENDS TAX-DEFERRED TAL GAINS TAL GAINS TAX-DEFERRED TAX-DEFERRED TAX-DEFERRED NONE NONE NONE NONE NONE NONE \$201 - \$1,000 \$1 - \$200 \$201 - \$1,000 \$201 - \$1,000 \$1 - \$200 NONE \$1 - \$200 \$1 - \$200 Page 7 of 12

SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	E Name Andy Harris	ris		Page 8 of 12
	403b Vanguard, 500 Index	\$15,001 - \$50,000	TAX-DEFERRED	NONE	
	403b Vanguard, Selected Value	\$15,001 - \$50,000	TAX-DEFERRED	NONE	
	403b Vanguard, Pacific Index	\$15,001 - \$50,000	TAX-DEFERRED	NONE	
DC5	Vanguard SmallCap Value	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	State Senate Pension	Determined at retirement	None	NONE	

SCHEDULE V - LIABILITIES

Name Andy Harris

Page 9 of 12

for liabilities held solely by your spouse or dependent child. 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 residence (unless it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances; your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. *This column is liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or

JT	JT	SP, DC, JT
Wells Fargo, Iowa	M and T Bank, New York	Creditor
May 2008	April 2008	Date Liability Incurred
Mortgage on 900 Marshy Cove, Cambridge, MD	HELOC on 49 Montiveu Ct, Cockeysville, MD	Type of Liability
\$100,001 - \$250,000	\$250,001 - \$500,000	Amount of Liability

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Andy Harris Page 10 of 12

spouse or dependent child that is totally independent of his or her relationship to you. 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 sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$350 received by 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 the

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3 davs	Z	~	Υ	Washington DC - Baltimore	Feb. 6 - 8	Heritage
expense	(Y/N)	(Y/N)	(Y/N)	Destination-Point of Return	Date(s)	Source
sponsor's	Food? Member Included?	Food?	Lodging?	Point of Departure		
Days not at	Was a Family					

SCHEDULE VIII - POSITIONS

Name Andy Harris

Page 11 of 12

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any honorary nature; and positions listed on Schedule I. educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an

Position	Name of Organization
Associate Professor on leave	Johns Hopkins University

SCHEDULE IX - AGREEMENTS

Name Andy Harris

Page 12 of 12

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 employee welfare or benefit plan maintained by a former employer.

- 1			Г
	2012	Date	,
	Johns Hopkins University	Parties To	
	Leave of Absence, Dental Plan and Life Insurance Benefit	Terms of Agreement	