RESENTATIVES
FINANCIAL DISCLOSURE STATEMENT
Name: Tom Wells Daytime Telephone: S. FILE OF BEENERINGER OF BEENERS AND TO BE THE PROPERTY OF BEENERS AND THE PROPERTY
New Member of or Candidate for State: U.S. House of Representatives District: CD3 Candidates – Date of Election: 8 Nov, 2016 Check if Amendment
STATUS New Officer or Employee Employing Office: Period Covered: January 1, to Individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER EACH OF 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?
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? F. Do 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?
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? No. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?
ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>BOTH</u> 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 that benefits you, your spouse, or dependent child?
EXEMPTION Have you excluded from this report any other assets, "uneamed" income, 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.

SCHEDULE A

A – ASSETS & "	A – ASSETS & "UNEARNED INCOME"	Name: Tom	Tom Wells Page 2 of 8
OCK A	BLOCK B	BLOCK C	BLOCK D
Income Sources	Value of Asset	Type of Income	Amount of Income
at held for investment or indicated with a fair market value you under the reporting period please ortable asset or source of please than \$200 in the more than \$200 in the contract of the co	te value of asset at close of the reporting period. If se a valuation method other than fair market value, a specify the method used. asset was sold during the reporting period and is	Check all columns that apply. For accounts that generate tax-deferred income (such as 4df(k), IRA, or 629 accounts), you may check the "Tax-Deferred" column. Dividends. Interest. and califal califa.	et held for investment or indicate value of asset at close of the reporting period. If Check all columns that apply. For accounts for assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column, and with a fair market value you use a valuation method other than fair market value, that generate tax-deferred income (such as 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 that more than \$200 in. Tax-Deferred" column, accounts. Check "None" if no income was earned or generated.

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	Consume)	(S-Corp, Engineering	World Radomes Inc	John Hancock IRA		Examples: Simon & Schuster	Mega Corp Stock	or a detailed discussion of Schedule A equirements, please refer to the instruction booklet.	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.	f you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box.	Exclude: Your personal residence, including second homes and vacation homes (unless there was and income during the reporting period); and any financial interest In, or income derived from, a federal retirement program, including the Thrift Savings Plan.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the trusiness, the nature of its activities, and its geographic location in Block A.	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 bank and other cash accounts, total the amount in all interest-bening accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.	he account that exceeds the reporting thresholds.	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in	Provide complete names of stocks and mutual funds (do not use only ticker symbols).	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 period, and (b) any other reportable asset or source of the constant which generated more than \$200 in the come which generated more than \$200 in the come during the year.	Assets and/or Income Sources	BLOCK A
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name:

Tom Wells

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SCHEDULE C - EARNED INCOME

••
Tom Wells
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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.

INCOME LIMITS at Members and emplo professional service	INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2015 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,225. The 2016 limit is \$27,495. 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.	come may apply to you after yo mit is \$27,495. In addition, certs staff.	u are on House payroll. The 2015 in types of income (notably honorar	i limit on outside earned income for ia, director's fees, and payments for
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Ų	Source (include date of receipt for nonoraria)	iype	Current Year to Filing	Preceding Year
	ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$20 000	\$500 *78 000
Examples:	Civil War Roundtable (Oct. 2)	Spouse Speech	\$0	\$1,000
	Critatio County Exert of Education	Spouse Setary	N/A	Z N
World Rado	World Radomes Inc, Gainesville, FL	Salary	\$50,000	0
		:		

SCHEDULE D - LIABILITIES

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	Name:	
	Tom Wells	
	Page_5 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 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 (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 the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child.

Example First Bank of Wilmington, DE 5/98 Mortgage on Rental Property, Dover, DE \$115,000	ехсеед	exceeded \$10,000.	Column K is for liabilities held solely by your spouse or dependent child. Date	by your spouse Date	y dependent child.	>		c	·	1 <i>2</i> I	Amoun	Amount of Li	Amount of Liability	unt of Liab		
First Bank of Wilmington, DE 5/98			Creditor	Date Liability Incurred MO/YR	Type of Liability	 	\$15,001-	\$15,001- \$50,000	\$50,000 \$50,001- \$100,000	\$50,001-	\$50,001- \$100,000 \$100,001-	\$50,001- \$100,000 \$100,001- \$250,000	\$50,001- \$100,000 \$100,001- \$250,000 \$250,001- \$500,000	\$50,001- \$100,000 \$100,001- \$250,000 \$250,001- \$500,001- \$1,000,000	\$50,001- \$100,000 \$100,001- \$250,000 \$250,001- \$500,001- \$1,000,000 \$5,000,000	\$50,001- \$100,000 \$100,000 \$250,000 \$250,001- \$500,000 \$1,000,000 \$1,000,001- \$5,000,000 \$5,000,000
N/A		Example	First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE					×	×	×	×	×	×	×
		N/A														

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 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 positions held in the reporting period and the current calendar year and two previous years.

I the current carendar year. First-year candidates and new o	the current caterious year. First-year candidates and new emproyees report positions ried in the current caterious year and two previous years.
Position	Name of Organization
President - Sole Owner (since 2006)	World Radomes Inc

SCHEDULE F - AGREEMENTS

Name:
Tom Wells
Page 6 of 8

dentify the date, parties to, a continuation or deferral of pa	
identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment, a leave of continuation or deferral of payments by a former or current employer other than the U.S. government, or continuing participation in an employe	
ent or arrangement that you hav	
e with respect to: future employ imment; or continuing participat	
∕ment; a leave of absence durin tion in an employee welfare or t	
ng the period of government service; benefit plan maintained by a former employ	
er.	

Date	Parties to Agreement	Date Parties to Agreement Terms of Agreement
	N/A	

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.

government and any information considered confidential as a resolt of a	government and any information consideration as a festit of a privileged relationship recognized by law. To not repeat information used on scriedure co.
Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services
Customer name withheld per cofidentiality agreement	Microwave measurements & analyses, contracted through World Radomes Inc [2014, \$16,000; 2015, \$50,000; 2016 to date, \$79,000]
Customer name withheld per cofidentiality agreement	Microwave measurements & analyses, contracted through World Radomes Inc [2014, \$25,500]

FILER NOTES (Optional)

Name: Tom Wells Page 7 of 8

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