

UNITED STATES HOUSE OF REPRESENTATIVES		FORM B	Page 1 of 9
FINANCIAL DISCLOSURE STATEMENT	For New Members, Ca	For New Members, Candidates, and New Employees	LEGISLATIVE RESOURCE OFWITE
Name: Trey Hollingsworth	Daytime Telephone:	•	2016 DEC 22 PM 1: 38
New Member of or Candidate for State: IN U.S. House of Representatives District: 09 Candidates - Date of Election: November 8, 2016		X Check if Amendment	U.S. HOUSE OF REPRESENTATIVES (Office Use Only)
New Officer or Employee Employing Office:		Period Covered: January 1, 2015 to August 31, 2016.	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS	F THESE QUESTIC	SNS	
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? Of b. Make more than \$200 in unearned income from any reportable asset during the reporting period?	X No E. C	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	ing the reporting period Yes X No No
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes reporting period?	x No F. C	F. Did you have any reportable agreements or arrangements with an outside entity during the reporting period or in the current calendar year up through the date of filing?	or arrangements with Yes No X
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?	No x J. C	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	an \$5,000 from a single Yes No X
ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	ATTACH THE CORRESPONDING SCHEDULE IF YOU A INCLUDES ONLY THE SCHEDULES THAT YOU ARE F	DULE IF YOU ANSWER "YES" HAT YOU ARE REQUIRED TO	S" O COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOT	FINFORMATION -	ANSWER <u>BOTH</u> OF THES	TH 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 your dependent child?	on Ethics and certain other "e	excepted trusts" need not be disclosed. H	lave you excluded from Yes No X
EXEMPTION – Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse or de tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	income, transactions, or liabili Committee on Ethics.		pendent child because they meet all three Yes No X

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DULE A – ASSETS &	DULE A – ASSETS & "UNEARNED INCOME"	Name: Trey Hollingsworth	ngsworth	Page 2 of 9
BLOCK A	вгоск в	вгоск с	BLOCK D	
ts and/or Income Sources	Value of Asset	Type of income	Amount of Income	me
each asset held for investment or 1,000 at the end of the reporting period, y other reportable asset or source of ich generated more than \$200 in normal during the year.	each asset held for investment or indicate value of asset at close of the reporting period. If Check at columns that apply. For accounts 1,000 at the end of the reporting period, please specify the method used. 401(K), IRA, 529 accounts), you may check or source of it an asset was sold during the reporting period and is the "Tax-Deferred" column. Dividents, ich generated more than \$200 in included only because if generated income, the value interest, and capital gains, even if roome during the year. 500 in included only because if generated income, the value interest, and capital gains, even if removes the period of the seed of the seed as income during the year. 500 in included only because if generated income, the value period on the results are the disclosed as income for assets held in taxable accounts, please are the period of the asset years and income during the reporting period.	Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k), IRA, 529 accounts), you may check the "Tax-Deferred" column. Dividends, interest, and cepital gains, even if reinvested, must be disclosed as income for assets held in taxeble accounts. Check "None" if the asset generated no income during the reporting period.	A income and with a fair market 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. For all 1,000 at the end of the reporting period, please specify the method used. 401(k), IRA, 523 accounts), you may check and capital gains, even if reinvested, must be disclosed as income for assets held in taxable interest, and capital gains, even if reinvested, must be disclosed as income was earned or generated. 101 generated more than \$200 in included only because if generated income, the value interest, and capital gains, even if reinvested, must be disclosed as income counts. Check "None" if no income was earned or generated. 102 generated more than \$200 in included only because if generated income, the value interest, and capital gains, even if reinvested, must be disclosed as income. 103 generated no counts. 104 generated no counts. 105 generated no counts. 106 generated no capital gains, even if reinvested, must be disclosed as income. Column XII is for assets held by your spouse or dependent child in which you have no interest. 108 generated no counts. 109 generated no counts. 100 generated no counts.	you may check the "None" column. For all appropriate box below. Dividends, interest, and as income for assets held in taxable d.
and other retirement plans (such as provide the value for each esset held in				

Vanguard 529 Savings Account (See Below)		Vanguard Prime Money Market Fund	SP Personal Bank Account (BB&T)	Personal Bank Account (Suntrust)	ABC Hedge Fund X	Examples: Simon & Schuster	UT, Mega Corp Stock	\$6, E#	were in New York or New York o	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.	Identify (a) each asset held for investment or in production of income and with a fair market velue production of income and with a fair market velue produceding \$1,000 at the end of the reporting period, pand (b) any other reportable asset or source of inforceme which generated more than \$200 in unearned income during the year. Provide complete names of stocks and mutual funds of (do not use only ticker symbols).	Assets and/or Income Sources	BLOCK A
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K		×	×	×	Partnership Income	Royallies	,	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTEMBLIND TRUST TAX-DEFERRED 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, 529 accounts), you may check the "Tax-Deferred" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if the asset generated no noome during the reporting period.	Type of Income	вгоск с
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Use additional sheets if more space is required.

SCHEDULE A -- ASSETS & "UNEARNED INCOME"

Name: Trey Hollingsworth

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	- Multiple Certificates of Deposit	HGI, LLC (Financial Asset Holding Co)	HGI - Midwest III, LLC (Indianapolis, IN)	HGI - Midwest II, LLC (Indianapolis, IN Columbus, OH)	HGI - Midwest I, LLC (Indianapolis, IN)	HGI - Kentucky, LLC (Morrow, GA; Charleston, SC	HGI - Indiana, LLC (Sauget, IL; Indianapolis, IN)	HGI - Illinois, LLC (Sauget, IL)	11G1 - Georgia, LLC (Greensteld, IN; Birmingham, AL)	HGI · Atlanta, LLC (Atlanta, GA)	IICP - Alexin, LLC (Aluminum Busines	-Vanguard Total Stock Market Portfolio	-Vanguard Small-Cap Index Portfolio	-Vanguard 500 Index Portfolio	ASSET NAME			Assets and/or Income Sources	BLOCK A
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Trey Hollingsworth

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Trey Hollingsworth

Page 5 of 9

SCHEDULE C - EARNED INCOME

Name: Trey Hollingsworth Page 6 of 9

List the source, type, and amount of eamed 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.

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 2014 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. The 2015 limit is \$27,225. 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.

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

Circe LLC (2015 - 2016), 3642 Brownsboro Rd, #101, Louisville, KY 40207 Hollingsworth G. P., Two Centre Plaza, Clinton, TN 37716 (Real estate development and business operations) P&F inc (2015 - 2016), 280 West Coleman Blvd, Mount Pleasant, SC 29464 Examples: Source (include date of receipt for honoraria ABC Trade Association, Ballimore, MD (July 15)
State of Manyland
CIMI War Roundtable (Oct. 2)
Ontarjo County Board of Education Salary Spouse Salary Spouse Salary Type \$22,884.72 ž N.Y **Current Year to Filing** Amount \$34,655.40 × Š Preceding Year \$76,000 \$1,000

SCHEDULE D - LIABILITIES

Name: Trey Hollingsworth Page 7 of 9

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.

						sp. Dc. Jr		
	_	-		None	Example	-		
					First Bank of Wilmington, DE	Creditor		
					5/98	Date Liability Incurred MO/YR		
ome .					Mortgage on Rental Property, Dover, DE	Type of Liability		
					•	\$10,001- \$15,000	>	
						\$15,001- \$50,000	œ	
						\$50,001- \$100,000	c	
					×	\$100,001- \$250,000	0	,
						\$250,001- \$500,000	m	moun
						\$500,001- \$1,000,000	71	Amount of Liability
						\$1,000,001- \$5,000,000	6	bility
						\$5,000,001- \$25,000,000	=	
			 			\$25,000,001- \$50,000,000	-	
			 			Over \$50,000,000	٠.	
			:			Over \$1,000,000* (Spouse/DC Liability)	*	

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. First-year candidates and new employees report positions held in the current calendar year.

The Culterit Calefidat year. First-year Candidates and new	tie cuitait caiejidal year. Filestyear caiminatee and new anthroyees report positions hard in the cuitait caiejidal year and the provious years.
Position	Name of Organization
Managing Member	HCP and HGI Entities

SCHEDULE F - AGREEMENTS

Name: Trey Hollingsworth Page 8 of 9

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 fo	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 se	
aintained by a former employer.	of government service;	

Date	Parties to Agreement	Terms of Agreement
	None	

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.

	7	
	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services
Nonc		

FILER NOTES (Optional)

Name: Trey Hollingsworth Page 9 of 9

NOTE NUMBER
: