EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS FINANCIAL DISCLOSURE STATEMENT **UNITED STATES HOUSE OF REPRESENTATIVES 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. 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? D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point 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 A. Did you, your spouse, or your dependent child: Name: Alfred Michael De Cillis reporting period? FILER STATUS b. Receive more than \$200 in uneamed income from any reportable a. Own any reportable asset that was worth more than \$1,000 at the asset during the reporting period? end of the reporting period? or Employing Office: New Officer or Employee U.S. House of Representatives New Member of or Candidate for Candidates – Date of Election: THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES District: State: Shared Staff Filer Type (If Applicable): Z ¥ × ğ X X X Y Daytime Telephone: For New Members, Candidates, and New Employees Principal Assistant 8 Š J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years? E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? 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? FORM B Period Covered: January 1, Amendment Check if A \$200 penalty shall be assessed against any individual who files more than 30 days late. U.S. HOUSE OF REPRESENTATIVES LEGISLATIVE RESOURCE CENTER 17 AUG 30 PM 1: 37 HAND DELIVERED 1 or 4 Yes Yes Ύes Yes ĕs S 0 S ö ö

 ∇

all interest-bearing accounts. If the total is ov \$5,000, list every financial institution where there For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over ncome during the reporting period); and any financianterest in, or income derived from, a federa hat is not publicly traded, state the business, the nature of its activit or an ownership interest in a privately-held busi rental property," and a city and state. or rental and other real property held for investmen nore than \$1,000 in interest-bearing accounts he account that exceeds the reporting thresholds. 101(k) plans) provide the value for each asset held in or all IRAs and other retirement plans (such do not use only ticker symbols). SCHEDULE A – ASSETS & "UNEARNED INCOME" etirement program, including the Thrift Savings Plar rovide a complete address or description, come during the year. nd (b) any other reportable asset or source of incom omes and vacation homes (unless there was rent xctude: Your personal residence, including secon rovide complete names of stocks and mutual fund you have a privately-traded fund that is an Excepte eographic location in Block A. vestment Fund, please check the "EIF" box. ceeding \$1,000 at the end of the reporting period Assets and/or Income Sources generated more than \$200 (a) each asset income and with a fair market value **BLOCK A** activities, ₫ in "unearnec investment name and of 9.9 specify the method used. child in which you have no interest *Column M is for assets held by your spouse or depender Indicate value of asset at close of the reporting period. If you use a valuation method other than fair market value, please be None. if an asset was sold during the reporting period and is included only because it generated income, the value should • C 0 т Value of Asset П BLOCK B ଚ I _ ے _ ₹ Spouse/DC Asset over \$1,000,000* 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 assets held in taxable accounts. Check "None" if the asset generated no income uring the reporting period. Type of Income BLOCKC Name: Other Type of Income (Specify: e.g., Partnership Income or Farm Income) For assets for which you checked "Tax-Deferred" 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 discissed as income for assets held in taxable accounts Check "None" if no income was earned or generated. *Column XII is for assets held by your spouse or dependent child in which you have no interest = Michae = ₹ **Current Year** ٧ ≤ ≦ ≦ × Amount of Income × × BLOCK D ≚ Spouse/DC Income over \$1,000,000* = ≡ Page ₹ Preceding Year < ٧ ≦ ≦ 앜 ⋝ × 1 ≥ ¥ Spouse/DC Income over \$1,000,000*

Use additional sheets if more space is required

<u>≒,8,%</u>

Examples:

Simon & Schuster Mega Corp Stock

EF

×

×

ABC Hedge Fund

×

×

Morgan chase

For a detailed discussion of Schedule A requirement blease refer to the instruction booklet.

None

\$1-\$1,000

\$1,001-\$15,000

\$15,001-\$50-000

\$50,001-\$100,000

\$100,001-\$250,000

\$250,001-\$500,000 \$500,001-\$1,000,000

\$1,000,001-\$5,000,000

\$5,000,001-\$25,000,000 \$25,000,001-\$50,000,000 Over \$50,000,000

NONE

RENT

None \$1-\$200

\$201-\$1,000 \$1,001-\$2,500

\$2,501-\$5,000

\$5,001-\$15,000

\$15,001-\$50,000

\$50,001-\$100,000

Over \$5,000,000

None \$1-\$200

\$201-\$1,000

\$1,001-\$2,500

\$2,501-\$5,000

\$5,001-\$15,000

\$15,001-\$50,000

\$50,001-\$100,000

Over \$5,000,000

\$100,001-\$1,000,000

\$1,000,001-\$5,000,000

×

×

\$100,001-\$1,000,000

\$1,000,001-\$5,000,000

×

DIVIDENDS

INTEREST

CAPITAL GAINS EXCEPTED/BLIND TRUST

ncome 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.

you so choose, you may indicate that an asset

SCHEDULE C - EARNED INCOME

Name: Alfred Michael De Cillis Page 3 or 4

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.

professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff. 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 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,765. In addition, certain types of income (notably honoraria, director's fees, and payments for **EXCLUDE**: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

| | | | | Menicucci, Villa, Cilmi PHC | Waterfil America | New York State Police Rousian Fund | New York State Dept. of Education | EXAMPIES: Civil War Roundtable (Oct. 2) Ontario County Board of Education | ABC Trade Association, Baltimore, MD (July 15) State of Maryland | Source (include date of receipt for honoraria) | |
|--|--|--|--|-----------------------------|------------------|------------------------------------|-----------------------------------|---|--|--|--------|
| | | | | Salan (Spouse) | Salary (Spouse) | Pension | Sodary | Spouse Speech Spouse Salary | Honorarium Salary | Туре | 1 |
| | | | | NA | · N/A | | 140,000 | \$0 N/A | \$0 \$20,000 | Current Year to Filing | Am |
| | | | | 36,000 | \$30,000 | 135,000 | \$62,000 | \$1,000 N/A | \$500 \$76,000 | Preceding Year | Amount |

SCHEDULE D - LIABILITIES

| Name: Alfred |
|--------------|
| Michael |
| Decillis |
| Page 4 |
| of L |

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

| S | , | (3 | ادا | | D | | | • |
|-----------------------|------------------------|--------------|-------------------|--|---|--------|---------------------|---|
| 38 | ĺ | 77 | 24 | | sp, Dc, Jт | | | |
| ACS Eduction Services | ACS Education Services | rending Club | One Main Firemual | Example First Bank of Wilmington, DE | Creditor | | | |
| 1 09 | 1/09 | 4:12 | 3/17 | 5/98 | Date Liability Incurred MO/YR | | | |
| Street loan | Stodut Wan | loan | loan | Mortgage on Rental Property, Dover, DE | Type of Liability | | | |
| | , | X | X | | \$10,001- \$15,000 | > | | |
| | X | | | | \$15,001- | | | |
| | i. 🖊 | 1 | | | \$50,000 | ω |] [| |
| X | | | | | \$50,001- \$100,000 | С | | |
| X | | | | × | \$50,001- | | A | |
| X | | | | × | \$50,001- \$100,000 \$100,001- | n | Amoun | |
| X | | | | × | \$50,001- \$100,000 \$100,001- \$250,000 \$250,001- | c D | Amount of Li | |
| X | | | | × | \$50,001- \$100,000 \$100,001- \$250,000 \$250,001- \$500,000- | n n | Amount of Liability | |
| X | | | | × | \$50,001- \$100,000 \$100,001- \$250,000 \$250,001- \$500,000 \$500,001- \$1,000,000 | n T | Amount of Liability | |
| X | | | | × | \$50,001- \$100,000 \$100,001- \$250,000 \$250,000 \$500,000 \$500,001- \$1,000,000 \$5,000,001- | C D | Amount of Liability | |
| X | | | | × | \$50,001- \$100,000 \$100,001- \$250,000 \$250,000 \$500,000 \$1,000,000 \$5,000,000 \$5,000,000 \$5,000,000 \$25,000,000 | C D | Amount of Liability | |

SCHEDULE E - POSITIONS

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 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 period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

| Position |
|----------|
| Travall |
| |
| |
| |
| |