FINANCIAL	UNITED STATES HOUSE OF REPRESENTATIVES For	FORM B For New Members, Candidates, and New Employees	LEGISLATIVE RESOURCE CENTER
Name: //	Name: Mary S. Matiella Day	Daytime Telephon	17 AUG 17 PM 1: 24
FILER	New Member of or Candidate for State: R2  U.S. House of Representatives District: C.D. 2  Candidates – Date of Election:	Check if Amendment	O.S. HOUSE OF REPRESENTATIVES  (Office Use Only)  (Office Use Only)
STATUS	New Officer or Employee Staff Filer Typ Employing Office: Shared F	Staff Filer Type (If Applicable): Period Covered: January 1,to	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
RELIMIN	RELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE QUESTIONS	ESE QUESTIONS	
A. Did you, yo a. Own any end of the b. Receive of asset dur	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. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	No E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	ng the reporting yes No
C. Did you or you honoraria, or pen 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?	No 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?	n the current calendar Yes No
D. Did you, yo liability (more	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?	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	or years?
	ATTACH THE CORRESPONDING SCHEDULE IF YOU AITHIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE R	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO	NSWER "YES" EQUIRED TO COMPLETE
XCLUSIO	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>BOT</u>	ORMATION - ANSWER BOTH OF THES	H OF THESE QUESTIONS
TRUSTS - De from this repo	TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need from this report details of such a trust that benefits you, your spouse, or dependent child?	s and certain other "excepted trusts" need	not be disclosed. Have you excluded Yes No No
EXEMPTION exemption?	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.	ne, or liabilities of a spouse or dependent child because they me on Ethics.	et all three tests for Yes No No

SCHEDULE A - ASSETS & "UNEARNED INCOME" Page\_

						:	589	For and have investment in the option of the policy of the control	1 e	For \$	Provi (do nu	identi produ excee and () which incom		
į		(Aed# JAC	4	Fide		Examples			the 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 the constitution of th	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 income which generated more than \$200 in "unearned income during the year.	Assets and/or Income Sources	
		Ŧ	broad it house	λe		es.		int other cash accounts, it every financial instit every financial instit \$1,000 in interest-bea and other real propert, complete address openy, and a city and sipenty, and a city and sipeny, and a city and sipeny, and a city and sipeny, and a city and sit cocation in Block A. Your personal residen homes (uning the reporting perioning the reporting perioning the reporting that of you child (DC), or jointly honal column on the far lied discussion of Sche er to the instruction bor	naire	and	plete inly tic	each f inco 1,000 ther n ated g the	s an	
		2 >	<del>\$_</del>		È	S	<u>₹</u>	or cash and a cash	. 60 80	de of he	name kers	at the	Θ	₽
		$\mathbf{x}$	کر	tr	ABC Hedge Fund	Smon & Schuster	Wega Corp Stock	n acco	s me	e r Fallet	ymbc	e end s ble a tha	烹	BLOCK A
				77	Ę		SE	unts, s. If state we have a prive state when the st	ē	reme	is).	n \$3	ë	≨
		-554502	なぞ	Tovest		ľ	$ \hat{\ } $	counts, total the amount in ints. If the total is over institution where there is st-bearing accounts. The total counts at bearing accounts. The total counts are so of the count of the counts are so of the count o	Bull	each	sand	for infair ne rep or sou	Š	
	•	7	$\mathbb{Z}$	S		Ì		total in the interest of the arm where I counts or invectoring or invectoring or investigation. And in the interest of the int	: mresi	ans	mute	invest ir mark eporting ource o in "ui	our.	
		딝		+		L	Ш	mnount in is over it to there is to.  ts.  ts.  on, e.g.,  on, e.g.,  and its are rental financial financial financial financial of second come (SP) or one (JT).	SDIOL	such (such	a Te	estment or arket value ting period, a of income "unearned"	Š	
		<u> </u>			×		2			= 8				
		-				╀	ļ		•	ł	*Column M is for assets held by yo child in which you have no interest.	Indicate value of asset at use a valuation method o specify the method used. If an asset was sold dincluded only because it go hone."		
						┪			<b>*</b>	ł	TIS K	te val valua y the asset ad on		
						Indefinite	<u> </u>	711-17-17-17-17-17-17-17-17-17-17-17-17-	, ,	ł	yo oo G si	meth was		
				V	<del> </del>	╣,	×		n		r assu	asse netho od us solo	<	
					-	+-		\$100,001-\$250,000	π	i	ets h	tatol Model Model	Value of Asset	<u></u>
			<u> </u>		×	L		\$250,001-\$500,000	ก	1	eld b	lose on the	렃	BLOCK B
			<b>,</b>			T		\$600,001-\$1,000,000	=		est y	of the lands	As	6
								\$1,000,001-\$5,000,000	-	1	*Column M is for assets held by your spouse or dependent child in which you have no interest.	Indicate value of asset at dose 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 because if generated income, the value should be "None."	set	
								\$5,000,001-\$25,000,000	_	1	ž.	ing p		Ì
								\$25,000,001-\$50,000,000	~		or de	peric value value		į
								Over \$50,000,000	-		penc	e sho		
								Spouse/DC Asset over \$1,000,000*	Σ			you ase		
								NONE			"None" if the asset gene during the reporting period.	Check all columns that apply. Ec that generate tax-deferred incom 401(k), IRA, or 529 accounts), you the "Tax-Deferred" column. If interest, and capital gains, relivested, must be disclosed; for assets held in taxable accounts and control tax the account of the second taxable accounts.		
				X			×	DIVIDENDS		]	Ç €.	Serie X Qene Pax Rel		
						Γ		RENT			향향	Defe ou	Ţ	
								INTEREST			asse	mns 529 d fried	8	<sub>P</sub>
						T		CAPITAL GAINS			Penio Ge	efern	<u></u>	BLOCK C
								EXCEPTED/BLIND TRUST		1	nerat	apply apply and a coordinates of the coordinates of	Type of Income	ဂ်
				X		T		TAX-DEFERRED		1	<u>8</u>	you Fo	3	
					Partnership Income	Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)			"None" if the asset generated no income during the reporting period.	Check all columns that apply. For accounts that generate tax-deferred income (such as 40°(1k), IRA, or 529 accounts), you may check the "Tax-Deferred" column. Dividends, interest, and capital gains, even if relivested, must be disclosed as income for assets held in taxable accounts. Check		
		-			<del>                                    </del>	1	$\vdash$	None -	Г		Ф			
		+-		$\frown$		t	×	\$1.\$200 =				eck eck		
						T	†	\$201-\$1,000 =		1		n XII		
			·			T		\$1,001-\$2,500 <		1		ster who		
					<u> </u>	×		\$2,501-\$5,000 <	5			esseries sasser		
					×			\$5,001 <i>\$</i> 15,000	₫			tego r rein orme		
								\$15,001-\$50,000 ≦	Current Year			was was		
						L	$\perp$	\$50,001-\$100,000 <u>≦</u>	8	ŀ		d'Ta inco bed, 1 earn		
					ļ	1		\$100,001-\$1,000,000	I			me b must ed or	_	
		ļ	ļ	ļ		╀	-	\$1,000,001-\$5,000,000 ×				y chi	¥	
		<u> </u>	<u> </u>	ļ	ļ	<del> </del>	<u> </u>	Over \$5,000,000				d in ackin disclusion di disclusion disclusion disclusion disclusion disclusion disclusi	Ĭ	ᆵ
						+	-	Spouse/DC Income over \$1,000,000° ≦	$\vdash$	ł		For assets for which you checked "Tax-Deferred" in Block C. you may check the "None" column. assets indicate the category of income by checking the appropriate box below. Dividends, leaping leans, even if relinvested, must be disclosed as income for assets held in taxab 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	Amount of Income	BLOCK D
				X	_	╀-	<u> </u>	None –	ł			lent (	ΠC	ê
_			-	-		+	-	\$1-\$200 = \$201-\$1,000 ==				nopri ncopri	Ŝ	
		-			-	+	<u> </u>	\$201-\$1,000 == \$1,001-\$2,500 <	ı			nayo ate b	Ф	
-		1		-	-	+		\$2,501-\$5,000	3			brack brack		
		+	<del> </del>	<b> </b>		×	+	\$5,001-\$15,000 ≤	Preceding Year	I		the sets		
			$\vdash$	-	×	+	$\vdash$	\$15,001-\$50,000 \(\leq \)		I		Non Di hek		
				<u> </u>	<u> </u>		t	\$50,001-\$100,000	ձ	1		vider In t		
	1	<del> </del>	1-			$\dagger$	T	\$100,001-\$1,000,000	٩	1		iumn nds, baxak erest		
					-	-	+		1	1		<b>5 5 .</b> .		
		<del>                                     </del>					1	\$1,000,001-\$5,000,000				<b>99                                   </b>		
						H	-	\$1,000,001-\$5,000,000 ×  Over \$5,000,000 ×				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. Dividents, interest, and capital gains, even if reinvested, must be disclosed 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.		

										_			``	. ~	₽ŖŖ					٦	S
	-			<u> </u>					E	4(	-	P	tucson	MAFYE					Assets and/or Income Sources		SCHEDULE
									unsthington	0		primary home	SO	191					ts an		ָ פָּב
									<b>E</b> -	7		ځ ر			ASSE				ďor	ВГС	
						-		-	3	<b>=</b>				beseet wood	ASSET NAME				Inco	BLOCK A	À
									3	$\omega$		ž	AZ8574S	4	À				me S		 
									Ø			6	89	<b>S</b>					our		ASSETS & "UNEARNED INCOME"
			_		<u> </u>			Ĺ <u> </u>	7	_			3	<u>8</u>					293	1	Ë
													7)	11	띢	None	,	_	 	4	S.
					-						<u> </u>	<del> </del>				\$1-\$1,000					
			L							<u> </u>	L					\$1,001-\$15,000		,			S
											<u> </u>					\$15,001-860,000	C	,			ΕA
										ļ	<u> </u>					\$50,001-\$100,000		Π	۷alı		Z <sub>2</sub>
					L					<u> </u>	_		ļ			\$100,001-\$250,000 \$250,001-\$500,000		7	ō ē	BLOCK B	Ē
		-		-				<del> </del>	X	-			V			\$500,001-\$1,000,000		<u>.</u>	Value of Asset	χ̈́	-
				<u> </u>	<del>                                     </del>	<u> </u>	E.	ļ		<b></b>	<u> </u>					\$1,000,001-\$5,000,000			set		NC
														,		\$5,000,001-\$25,000,000	•	-			Ö
																\$25,000,001-\$50,000,000				1	S. ∏
			<u> </u>	<u></u>								<u> </u>				Over \$60,000,000		-			
		_		<u> </u>		-										Spouse/DC Asset over \$1,000,000* NONE		-	 	-	
			-	-	ļ	<u> </u>		-							·····	DIVIDENDS		_			
			$\vdash$	<u> </u>		<del>                                     </del>					<u> </u>	<u> </u>				RENT			4		
	'									<u> </u>	<b></b>					INTEREST			Уþе	8	_
																CAPITAL GAINS			<b>♀</b>	BLOCK C	Nam
							L			<u> </u>						EXCEPTED/BLIND TRUST			Type of Income	ဂ်	بغرا
									X				X			TAX-DEFERRED			ne	ı	$\mathbb{Z}_{\mathbb{N}}$
																Other Type of Income (Specify: e.g., Partnership Income or Farm Income)				1	2
									X				X	1		None		Н		-	25
								-						-		\$1-\$200	=				
											ì					\$201-\$1,000	=				3
			<u> </u>								ļ					\$1,001-\$2,500	₹	٥			<i>الله الله</i>
			<u> </u>				<u> </u>	ļ				<u> </u>				\$5,001-\$15,000	< ≤	urn			7
					-		l			<del>                                     </del>						\$15,001-680,000	<u>-</u>	ent )			
				<u> </u>		<u> </u>			<u> </u>						ٽــســٽ	\$50,001-\$100,000	<b>\( \)</b>	Current Year			
														<i>r</i>		\$100,001-\$1,000,000	×				lat
			_					ļ	ļ	ļ	<u> </u>	<u> </u>	ļ	ļ.,,	ļļ	\$1,000,001-\$5,000,000	×		Amount of Income	ı	1
			<u> </u>				ļ	<del> </del>		<u> </u>						Over \$6,000,000 Spouse/DC Income over \$1,000,000*	Xi Xi		Ž	B	el
					ļ		-	-			1	-	7 .	7,	1 ( )	None SpouserDC RICOTTRE OVER \$1,000,000	-	Н	9	BLOCK D	2
				<u> </u>	<b>†</b>				<del>                                     </del>							\$1-\$200	=		nco	٥	
,													<u> </u>	().		\$201-41,000	栗		3		<b> </b>
		<u> </u>	<u> </u>					-			ļ	<u> </u>	-	<b></b>	ļ	\$1,001-\$2,500	₹	ا وِ			Page
				<u> </u>	-	<del> </del>	<u> </u>	ļ <u>.</u>		_	-	ļ	-	<del> </del>		\$2,501-\$5,000 \$5,001-\$15,000	<b>∨</b>	Preceding Year			
			<del>                                     </del>		-	-	<u> </u>	<del>                                     </del>		<del>                                     </del>	·	,	<del> </del>	-	4	\$16,001-\$60,000		ing			
	<b></b>			-	1			1	<del>                                     </del>	<del>                                     </del>		Ė	<u> </u>			\$50,001-\$100,000	<u>-</u>	ğ			
												<u> </u>				980,000,14:700,0012	Ż				
			_					ļ <u> </u>	Į	ļ			_		ļļ	\$1,000,001-\$5,000,000	×				ILE
	L	L	<u> </u>		<u> </u>	ļ		-	<u> </u>	ļ	<u> </u>		<del> </del>	ļ	<u> </u>	Owir \$5,000,500 Spouse/DC Income over \$1,000,000*	<b>×</b>			İ	
			<u>—</u>			Ь.	L	<u> </u>		1						ehomene anomie and \$1,000,000.	=_			_	

## SCHEDULE C - EARNED INCOME

**EXCLUDE**: Willtary pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act. List the source, type, and amount of earned income from any source (other than and filer's spouse, list the source and amount of any honoraria. List only the so

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

professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

	•	Am	Amount
Source (include date of receipt for nonoraria)	Туре	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
Examples: Civil War Roundtable (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	\$0 \$0	\$1,000 N/A
Mary Matrila Stephertigement, Social Sec		) all ded	
(FRANCISCO A Matrella)-Mil retigement Social See	6		
	i i		
	AND TO		

#### SCHEDULE D - LIABILITIES

0	Name: Mapy
	Sa /1
	2
	Matiella
	Page U 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. 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, лГ		
wells	usa,	Example			ï
wells Fargo, working to	USAA FED Saving BK	First Bank of Wilmington, DE	Creditor		
7/14	4/15	5/98	Date Liability Incurred MO/YR		
home mortgage	Car loan	Mortgage on Rental Property, Dover, DE	Type of Liability		
			\$10,001- \$15,000	>	
	X		\$15,001- \$50,000	œ	
			\$50,001- \$100,000	c	
		×	\$100,001- \$250,000	0	$\Big _{\downarrow}$
X			\$250,001- \$500,000	m	moun
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$500,001- \$1,000,000	71	Amount of Liability
			\$1,000,001- \$5,000,000	6	ability
			\$5,000,001- \$25,000,000	±	
			\$25,000,001~ \$50,000,000	_	
			Over \$50,000,000	د .	
			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 or an nonorary nature. New Members and second-year candidates report positions held in the reporting seriod and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

|--|

### **SCHEDULE F - AGREEMENTS**

Name/ Mary Soilly Matiella Page 5 of &

employer. 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 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 Date Done Parties to Agreement Terms of Agreement

# 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.

goson more a	and early and control and cont	government and any intermed to a recent of a printing of contact of the separation and the separation of the separation
	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services
10	10000	
•		

									NOTE
								None	
								6	
		ji							
							:		
									NOTES
						5			