E. Did you hold any reportable positions during the reporting period or in the current calendar yeer up through the date of filing? D. Did you, your spouse, or your dependent child have any reportable fieblitty (more than \$10,000) at any point during the reporting period? EXEMPTION - Have you excluded from this report any other assets, "uneamed" income, transactions, or Rabilities of a spouse or your dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics. #PO - Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answered "yes" to this question, please contact the Committee on Ethics for further guidance. C. Did you or your spouse have "eemed" income (e.g., salaries, honoraria, or pension/RNA distributions) of \$200 or more during the B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period? TRUSTS — Debails regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. this report details of such a trust that benefits you, your spouse, or dependent child? A. Did you, your spouse, or your dependent child: 2017 FINANCIAL DISCLOSURE STATEMENT IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS reporting period? PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS Name: **UNITED STATES HOUSE OF REPRESENTATIVES** end of the reporting period? <u>er</u>
b. Receive more than \$200 in unearned income from any reportable a. Own any reportable asset that was worth more than \$1,000 at the NEPONT THE FLER STATUS asset during the reporting period X Richard M. House of Representatives Member of the U.S. 2017 Annual (Due: May 15, 2018) former Nolan State: Diatric: タン i X Ф * * * ** ** ** Daytime Telephone: Amendmen ₹ |<u>`</u> ₹ 푷 ₹ For Use by Members, Officers, and Employees t. Did any individual or organization make a donation to charity in fieu of paying you for a speech, appearance, or article during the reporting period? 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? **ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"** H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$390 in value from a single source during the reporting period? G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$390 in value from a single source during the reporting period? Employee Officer or **Employing Office** Termination Date of Termination: Have you excluded from A \$200 penalty shall be assessed against any individual who files more than 30 days late. CETTINE (Office Lise Only) Page 1 of 10 Page 1 of 10 2019 JAN 28 AM 10: 14 JAN 14 2019 Jan. Shered Staff Filer Type: (If Applicable) í X * ž š ž \$ š Principal Assistant 20/9 풓 \$ **Z** 중 ₹ 중 凶 X X 図

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\$1,000 F, S, S(part), or E	Spouse/DC Asset with income over \$1,000,000*	Over \$5,000,000	\$100,001-\$1,000,000	\$50,001-\$100,000	\$15,001-\$80,000	\$5,001-\$15,000	\$2,501-85,000	\$1,001-\$2,500	\$201-\$1,000	\$1-5200	None	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	EXCEPTED/BLHID TRUST TAX-OFFERRED	CAPITAL GAMS	MTEREST	RENT	DIVIDENDS	Spoure/DC Arest over \$1,000,000* MONE	Over \$80,000,000	\$25,000,001-\$50,000,000	\$5,000,091-\$25,000,000	\$1,000,001-\$5,000,000	\$500,001-\$1,000,000	\$220,001-\$500,000	\$100,001-\$250,000	\$50,001-\$100,000	\$15,001-\$86,000	\$1,001-\$15,000	\$1-\$1,000	(GP) or	more than \$1,000 in interest-bearing accounts. For rental and other real properly held for investment, provide a complete address or description, e.g., "swell properly," and a city and stee. For an ownership interest in a privately-hald business that is not publicly traded, sinter the amme of the business. The resture of its activities, and its geographic broaden horses (whises there was rental focuses and vession horses (whises there was rental fromes daring the responsing period); and any financial interest in, or income derived from, a factoral element program, shoulding the Thrift Serving Plats. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or formation of the optional column on the far lat. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or formation of the optional column on the far lat. For a detailed discussion of Schedule. A requirements, please refer to the instruction bootled.	an \$1,000 in and other a complete money; "are money are money; "are money are money	more than \$1,000 more than \$1,000 provide a compilation of compila	ar cosm somm arrived appear to Programme of the cosm sommer arrived to the cosm some some some some some some some s		
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an asset was sold, please indicate as follows: (S (part)).	4	-	-	1		1 i	1 \$	1 1	1	-		1	1	_	1	1	1	 	-	1	1	1	-	-	1	1	-	1	1	A held s	refirement plans value for each sea the reporting threat	For all State and other re 601(t) plane) provide the val he account that exceeds the	For all said 601(t) plant the account	7 & 3		
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sales (S), or exchanges (E) exceeding \$1,000	9		173	in a	3 3 4 3	7		C				Ω						•				eares. If an easet was sold during the reporting puriod and is included only because it generated income, the value should be "Note." Column M is for easets had by your sooses or decendant child in which				T ON			T an a		concerning at your or and you are reporting person of (b) any other reportable seed for source of come that generated more than \$200 in "unearned" come during the year.	nd (b) any other recome that generated to come during the year.	(C)	8811		
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SCHEDULE B - TRANSACTIONS

Name: Richard Notas

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	o any a	required in a capital total. Process a creat carectypost of an excessing exercence, Exclude temescalons between you, your aposes, or dependent children, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an exset is sold, please choose 'partial sale' as the type of transaction.	Capital Gales: If a sales transaction resulted in a capital gain in eccess of \$200, check the "capital gains" box, unless it was an asset in a tax-deferred account, and disclose	Income on	Column v as we assess arrest many of your species or astronomy reserve		Example															
e, sale, or exchange transactions that exceeded \$1,000 in the	Q Q	7		Schedule	- Tona		Maga C			ļ												
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SCHEDULE C - EARNED INCOME

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Name: \(\)(\)\(\)\(\)\(\)\(\) The source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.	Page_Page_Page_Page_Page_Page_Page_Page_	Page 7 of 10	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 a spouse, list the source and amount of any honoraria; list only the source carried income exceeding \$1,000. See examples below.		Naan
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NCOME LIMITS and PROMBITED INCOME: The 2017 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,765. The 2018 limit is \$28,050. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited.

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

Source (include date of receipt for honoraria)	Туре	Amount
f	Approved Teaching Fee Lagislative Paneion	\$18,000
Chall Name County Board of Education Challeto County Board of Education	Spouse Speech Spouse Salary	\$1,000 N/A
mary Notan LLC	Reel Estate Broker	

SCHEDULE D - LIABILITIES

Name: Aichard Maland Page 6 of 10 the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you	the reporting period by)		
Richard Notan Page 6 of 10 use, or your dependent child. Mark the highest amount owed during the reporting in personal residence. Exclude: Any mortgage on your personal residence (unless you	ou, your apo	Name: (s	
A Mo lam Page 6 of 10 and and the highest amount owed during the reporting too. Exclude: Any mortuges on your personal residence funders you	use, or your depo	dichar	
RAM Page 6 of 10 The highest amount owed during the reporting on your personal residence (unless you	ndent child. Me nce. Exclude: A	1 Not	
Page 6 of 10	rk the highest a		
of /C uring the reporting	mount owed d	Page 6	
	Pertur	<u> </u> e	

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. If the modern is described to report all flabilities 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; flabilities of a business in which you own an interest (unless you are personally flable); and flabilities owed to you by a spouse or the child, perent, or sibling of you or your spouse. Report a reverting charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000.

				DC. JT		
			Example			
		none	First Bank of Wilmington, DE	Creditor		2
			5/15	Date Liability Incurred MO/YR		
			Mortgage on Rental Property, Dover, DE	Type of Liability		
				\$10,001- \$15,000	*	
				\$15,001- \$50,000	-	
•				\$50,001- \$100,000	n	
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				\$250,001- \$500,000	m	Amount of Liability
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				\$1,000,001- \$5,000,000	<u>ெ</u>	ability
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				\$25,000,001- \$50,000,000	-	
				Over \$50,000,000	_	
				Over \$1,000,000* (Spouse/DC Liability)	*	

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employes, 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 and in the Compensation of the Comp

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SCHEDULE F - AGREEMENTS

Name: Hichard. Molan Page 9 0

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; continued on 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.

		1/1/200	Date
		1/1/2000 Myself and the state of Minna rote - continued	Parties to Agreement
		rote-continued perticipation in lension plan	Terms of Agreement

SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more then \$390 received by you, your spouse, or your dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality from an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$156 or less need not be added towards the \$390 disclosure threshold. Nets: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule and some gifts require prior approval of the Committee on Ethics.

	Source	Description	Value
Example:	Mr. Joseph Smith, Arlegion, VA	Sheer Pluster (prior determination of personal friendship received from the Committee on Ethics)	\$400
	2000		

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

Name: eta
Richard
Nolan
Page 8 of /0

Identify the source and list travel itinerary, detes, and nature of expenses provided for travel and travel-related expenses totaling more than \$390 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

EXCLUDE: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

no mor.						
	Source	Date(e)	City of Departure-Decidedition-City of Return	Ledging? (Yas)	Foed? (YAI)	Family Manufacture Included? (YM)
	Gevenoment of China (MECEA)	11-9 day	DC-Beijing, Chine-DC	۲	٧	Z
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SCHEDULE I PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA	Hame: Richard Notan		Page 9 of 10
List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics.	naor of an event to a charitable orga	inization in lieu of pay	to a charitable organization in lieu of paying an honorarium to you. A
Source	Activity	Date	
Examples: Association of American Associations, Washington, DC XYZ Massache	Speed	Feb. 2, 2017 Aug. 13, 2017	\$2,000 \$500
none			

FILER NOTES (Optional)

Name: Richard Nolan

Page 10 of 10

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