

**UNITED STATES HOUSE OF REPRESENTATIVES**  
**2014 FINANCIAL DISCLOSURE STATEMENT**

**Form A**  
 For Use by Members, Officers, and Employees

**HAND DELIVERED** 1 of 4

2015 OCT 22 PM 12:12

Name: DINA TITO S

Daytime Telephone: \_\_\_\_\_

RECEIVED  
 U.S. HOUSE OF REPRESENTATIVES  
 (Office Use Only)

|              |  |   |  |                            |
|--------------|--|---|--|----------------------------|
| FILER STATUS | <input checked="" type="checkbox"/> Member of or Candidate for U.S. House of Representatives | State: <u>NEVADA</u><br>District: <u>01</u>   | <input type="checkbox"/> Officer or Employee | Employing Office: _____    |
|              | <input type="checkbox"/> 2014 Annual (Due: May 15, 2015)                                     | <input checked="" type="checkbox"/> Amendment | <input type="checkbox"/> Termination         | Date of Termination: _____ |
| REPORT TYPE  |  |   |  |                            |

**PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS**

|   |   |  |   |
|---|---|--|---|
| <p>A. Did you, your spouse, or your dependent child:</p> <p>a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? <u>or</u></p> <p>b. Make more than \$200 in unearned income from any reportable asset during the reporting period?</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> | <p>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?</p>                       | <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> |
| <p>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?</p>  | <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> | <p>G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$375 in value from a single source during the reporting period?</p>                             | <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> |
| <p>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?</p>   | <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> | <p>H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$375 in value from a single source during the reporting period?</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> |
| <p>D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?</p>  | <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> | <p>I. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period?</p>  | <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> |
| <p>E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?</p>  | <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> | <p><b>ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"</b></p>  |   |

**IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS**

|  |   |
|--|---|
| <p>IPO - 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.</p>   | <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> |
| <p>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?</p>                  | <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> |
| <p>EXEMPTION - Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities 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.</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> |

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**Use additional sheets if more space is required.**

# SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: DINA TITUS

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| BLOCK A<br>Asset and/or Income Source |                    | BLOCK B<br>Value of Asset |             |                  |                   |                    |                     |                     |                       |                         |                          |                           |                   |                                   | BLOCK C<br>Type of Income |           |      |          |               |                      |              | BLOCK D<br>Amount of Income  |      |           |               |                 |                 |                  |                   |                    |                     |                     |                       | BLOCK E<br>Transaction |   |  |
|---------------------------------------|--------------------|---------------------------|-------------|------------------|-------------------|--------------------|---------------------|---------------------|-----------------------|-------------------------|--------------------------|---------------------------|-------------------|-----------------------------------|---------------------------|-----------|------|----------|---------------|----------------------|--------------|--|------|-----------|---------------|-----------------|-----------------|------------------|-------------------|--------------------|---------------------|---------------------|-----------------------|------------------------|---|--|
| SP<br>DC<br>JT                        | ASSET NAME         | A                         | B           | C                | D                 | E                  | F                   | G                   | H                     | I                       | J                        | K                         | L                 | M                                 | NONE                      | DIVIDENDS | RENT | INTEREST | CAPITAL GAINS | EXCEPTED/BLIND TRUST | TAX-DEFERRED | Other Type of Income<br>(Specify: e.g., Partnership Income or Farm Income) | I    | II        | III           | IV              | V               | VI               | VII               | VIII               | IX                  | X                   | XI                    | XII                    |   |  |
|                                       |                    | 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 | Spouse/DC Asset over \$1,000,000* |                           |           |      |          |               |                      |              |  | 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 | \$100,001-\$250,000 | \$250,001-\$500,000 | \$500,001-\$1,000,000 | Over \$1,000,000       | Spouse/DC Asset with income over \$1,000,000* |  |
|                                       | MOREAN STANLEY IRA |                           |             |                  |                   |                    |                     |                     |                       |                         |                          |                           |                   |                                   |                           |           |      |          |               |                      | X            |  |      |           |               |                 |                 |                  |                   |                    |                     |                     |                       |                        |   |  |
|                                       | MOREAN STANLEY IRA |                           |             |                  |                   |                    |                     |                     |                       |                         |                          |                           |                   |                                   |                           |           |      |          |               |                      | X            |  |      |           |               |                 |                 |                  |                   |                    |                     |                     |                       |                        |   |  |
|                                       | MOREAN STANLEY IRA |                           |             |                  |                   |                    |                     |                     |                       |                         |                          |                           |                   |                                   |                           |           |      |          |               |                      | X            |  |      |           |               |                 |                 |                  |                   |                    |                     |                     |                       |                        |   |  |

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**Use additional sheets if more space is required.**