

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	FORM B For New Members, Candidates, and New Employees	Page 1 of 7 LEGISLATIVE RESOURCE CENTER
Name: Elise Stefanik	Daytime Telephone:	OFFICE OF THE CLERK
New Member of or Candidate for State: NY  U.S. House of Representatives District: 21  Candidates – Date of Election: 06/24/14	Check if Amendment	(Office Use Only)
STATUS  New Officer or Employee  Employing Office:	Period Covered: January 1, 2013 to April 30, 2014 .	A \$200 penalty shall be assessed against any individual who files more than 30 days late.

## PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

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. Make more than \$200 in unearmed income from any reportable asset during the reporting period?  Yes X No C In the current calendar year up through the date of filing?  E. Did you hold any reportable positions during the reporting period Yes No X	rned" income (e.g., salaries, ns) of \$200 or more during the Yes X No Sendent child have any reportable and outside entity?  Pr. Do you have any reportable agreements or arrangements with Yes No	or arrangements with Yes No X  an \$5,000 from a single Yes X No S:S"  O COMPLETE
		Yes

# EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH 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 dependent child? Yes Š ×

EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, 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. Yes

»

## SCHEDULE A -- ASSETS & "UNEARNED INCOME"

E"

Name: Elise Stefanik

Page 2 of 7

ertifi- x x x x x x x ertifi- x x x x x x x x x x x x x x x x x x x	ABC Hedge Fund	Niagara IRA (1)	Examples: Simon a Somusier y	DC, Mega Corp Stock	ital property, and a city and state.  Ital property, and a city and state, or description, e.g., an ownership interest in a privately-held business is not publishy interest in a privately-held business, is not publishy interest in a privately-held business, is not publishy interest in a privately-held business, and its graphic location in Block A.  Signatic location in	rev paint and other case accounts, local me amount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest bearing accounts.	For all IRAs and other retirement plans (such as For all IRAs and other retirement plans (such as AVII(k) plans) provide the value for each asset head in the account that exceeds the reporting thresholds.	Identify (a) each asset held for investment or production of income and with a fair market value accepting \$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 "unearmed" income during the year.  The provide complete names of stocks and mutual funds (to not use only licker symbols).	Assets and/or Income Sources	BLOCK A
X	ABCHedge Fund X	Niagara IRA (1)	oman e ocuser			and orner cash accounts, to the total is over its every financial institution where there is \$1,000 in interest bearing accounts.	RAs and other retirement plans (such ans) provide the value for each asset held int that exceeds the reporting thresholds.	(a) each asset held for investment not discovere and with a fair market; us \$1,000 at the end of the reporting per any other reportable asset or source which generated more than \$200 of income during the year.  Complete names of stocks and mutual fuse only ticker symbols).	sets and/or Income Sources	BLOCK A
× × × * * * * * * * * * * * * * * * * *	ABCHedge Fund X	Niagara IRA (1)	oman e ocuser			unier castri accounts, torai me amount in sering accounts. If the total is over very financial institution where there is 000 in interest bearing accounts.	and other retirement plans (such a provide the value for each asset held at exceeds the reporting thresholds.	each asset held for investment moveme and with a fair market vi moveme and with a fair market vi cook at the end of the reportable asset or source h generated move than \$200 come during the year.  John Cook and mutual fully licker symbols).	and/or Income Sources	BLOCK A
× × × * * * * * * * * * * * * * * * * *	×	(1)	× ·			cash accounts, to all the amount in accounts. If the total is over financial institution where there is interest bearing accounts.	other retirement plans (such a the value for each asset held caeds the reporting thresholds.	asset held for investment me and with a fair marker vi at the end of the reporting per reportable asset or source enerated more than \$200 during the year.  terms of stocks and mutual fuller symbols).	d/or Income Sources	BLOCK A
× × × * * * * * * * * * * * * * * * * *	×	(1)	× ·			I accounts, total one amount in accounts. If the total is over call institution where there is trest bearing accounts.	ar retirement plans (such a sach beid s value for each asset heid s the reporting thresholds.	and with a fair market; us and with a fair market; us and of the reporting per portable asset or source alsed more than \$200 kg the year. s of stocks and mutual fu ymboss).	r Income Sources	OCK A
× × × * * * * * * * * * * * * * * * * *	×	(1)	× ·			to the total is over institution where there is bearing accounts.	tirement plans (such a sue for each asset held reporting thresholds.	held for investment with a fair market way of the reporting per ble asset or source more than \$200 a year.	come Sources	Â
× × × * * * * * * * * * * * * * * * * *	×	(1)	× ·			the total is over the total is over the total is over there is accounts.	ent plans (such a r each asset held orting thresholds.	for investment a fair market v. the reporting per sesset or source re than \$200 ir.	ne Sources	
× × × * * * * * * * * * * * * * * * * *	×	(1)		9		of the amount in total is over where there is coounts.	plans (such a ch asset held thresholds.	investment ir market vi esporting per t or source than \$200 and mutual fu	ources	
X	×	3		Ş		al is over al is over re there is nts.	(such asset held sholds.	stment arket vi ing per source \$200 utual fu	rces	
× × ×				Ş		ere is	. <b>F</b> 2	≥ ₽8₫≥∃	40	ŀ
X	×		ennison				- = 12	inds in allus		
X X	×		GRUIBOU		None	:	- T	2 5 % E T B 5 E		$\neg$
X X	×		BRITING		\$1-\$1,000		20	Indicate value of asset at close you use a valuation method cit please specify the method used. If an asset was sold during the included only because it gent should be "hone."  "Column M is for assets held by child in which you have no interest child in which you have no interest.		
× ×	×				\$1,001-\$15,000			value value value pecificant value v		
× ×	×		$\neg$		\$15,001-\$50-000		<del>-</del>	was be of was was one.		
× ×	×			×	\$50,001-\$100,000	·	n	asse kon n sold sold sold sold hasse	<b>&lt;</b>	
X X	×	T T			\$100,001-\$250,000		T1	tati durii a ii a	ᇣ	മ
××			<u> </u>		\$250,001-\$500,000	•	ລ	close sed of a close gen and a close gen a	9	BLOCK B
X X	$\perp$		$\bot$		\$500,001-\$1,000,000		I .	Indicate value of asset at close of the reporting period. It you use a valuation method other than fair market value, please specify the method used.  If an asset was solid during the reporting period and is included only because it generated income, the value should be "done."  "Column M is for assets held by your spouse or dependent child in which you have no interest.	Value of Asset	Βò
X X					\$1,000,001-\$5,000,000		-	han i han i yorti id in	9	
X X	$\perp$				\$5,000,001-\$25,000,000		_	eport fair n come		ł
X X	1_				\$25,000,001-\$50,000,000		×	narke		
X X				ļ	Over \$50,000,000			pend * val		ļ
X X	4		٠.	+	Spouse/DC Asset over \$1,000,000*		<u> </u>			_
X X	$\perp$		4	_	NONE			Check all columns that apply. Fo that generate bax-deferred income that generate bax-deferred income 401(k), IRA, 529 accounts), you feet a 1-2-beferred column. If the 1-2-beferred column increases, and capital plans, reinvested, must be disclosed of assets held in taxable Check 'None if the asset generations are supporting period income during the reporting period.		
X X			_	×	DIVIDENDS			A SECTION TO THE SECTION OF THE SECT		
X X				<u> </u>	RENT			Defe one	¥	
X X					INTEREST			mns the med the man the med th	8	묘
X X					CAPITAL GARIS		]	petal petal potal	=	вгоск с
X X					EXCEPTED/BLIND TRUST			pply din	Type of Income	C
× ×		<u> </u>			TAX-DEFERRED			ou nou nou nou nou nou nou nou nou nou n	Ħ	
× ×	Partnership	7	Partnership		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)			is Check all columns that apply. For accounts put that generate tax-deferred income (such as 401(tk), IRA, 525 accounts), you may check at the Tax-Deferred column. Dividence, the reserved capital pains, even if a lease in the sassets held in taxable accounts. In the assets generated no income during the reporting period.		
	om or	in in	<u>ş</u>							
			_	ļ	None	-		College College		
	+		4	×	\$1-\$200		I I	unta capi unta		
	+	$\vdash$	+	-	\$201-\$1,000					
	-}-	┾		-	\$1,001-\$2,500		ျ	whice dicar		
	-	+ +	<u> </u>	+	\$2,501-\$5,000 \$5,001-\$15,000	<u>×</u>	Current Yea	For assets for which you checked other assets indicate the category and capital gains, even if rein accounts. Check "Nore if no into "Column XII is for assets held by y		
	×	<del>    '</del>	+	╁╌	\$5,001-\$15,000 \$15,001-\$80,000	<u>×</u>	ă l	Sheed of the		
	+	++	+	+	\$50,001-\$100,000	<u>*</u>		For assets for which you checked the assets indicate the category and capital gains, even if reinaccounts. Check "None if no inco "Column XII is for assets held by you		ŀ
	1	$\vdash$	-+	+-	\$100,001-\$1,000,000		▝▋	d Ta / of ir west our s		
	-	<del>                                     </del>	$\dashv$	+	\$1,000,001-\$5,000,000			spous	≥	
			十	$\vdash$	Over \$5,000,000	<u>×</u>		earni se by	Jon	
			十	+	Spouse/DC Income over \$1,000,000*	ĕ		For assets for which you checked Tax-Deferred in Block C, you may check the "None" column. For all other sets is 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 Toxore if no income was sensed or generated.  "Column XII is for assets held by your spouse or dependent child in which you have no interest.	Amount of Income	문
×   ×			┪		None	_	П	Blor disk Jang	읔	BLOCK D
			$\top$		\$1-\$200	=		the Brate	CO	٦
			_	×	\$201-\$1,000	=		d d day	Ð	
			I		\$1,001-\$2,500	~	ا با	may opriat which		
			$\perp$		\$2,501-\$5,000	٧	Preceding Year	ie bo		
			>		\$5,001-\$15,000	<u> </u>	ğ.	-have		
			<u> </u>	$\downarrow$	\$15,001-\$50,000	<b>S</b>	<u> </u>	e no		
	×	3		+	\$50,001-\$100,000	<b>≨</b>	ea l	one.		
	×	,	-	<del> </del>	\$100,001-\$1,000,000	. ×	[	ast. Medical columns		ı
	×	,	$\downarrow$	1		×	ll			
	×	3	1	+	\$1,000,001-\$5,000,000					ŀ
	×			<u> </u>	Over \$5,000,000  Spouse/DC Income over \$1,000,000*	K K		For teres axeb		

## SCHEDULE A - ASSETS & "UNEARNED INCOME"

				_								T	Т			·	ትጸዩ	'		
				├─					ָן קּי	四	33 17	10	٠,,	ე.≱.	a 1	F			Ąs	
				1					-Residential Rental Property (Washingto	EMS DC	Market Account	Checking Account	First Niagara Personal	American Maggie LLCPolitical ConsultingWashington, DC	-First Niagara (	First Niagara IRA (3)			Assets and/or Income Sources	
							ĺ		ěr	╏	et.	ř	۳	Can	, o	*			ë ⊗	
									K B	按	Ac	12	짉	-Pa	ı, ki	NİE	. ₹		<u>a</u>	
ļ '	1			1	1	1	<b>\</b>	\	<b>€</b> #	ş	O P	8	<u>آۋ</u>	erk-	Sed Fed	ıga	ASSET NAME		<u> </u>	BLOCK A
						1			lash	i	un a	မြို့	[a	hin LL	0 E 2	ra	ž		20	욳
									ial Rental (Washington	Properties	Č	帮	짱	وده! (۲۰۰۱	Niagara Certifi- Deposit	Ę	m		ğ	
	i						ŀ		ta] gtc	"	Į e		魺	1, E	ert	>			So	ı
				ĺ					Þ			1	ᆲ	č tio	if	3)			Ē	
				L_		<u> </u>	ļ		R C				듸	Ľ	1-				Ř	
																	E			
				$L_{-}$														None >>		
				<u> </u>			<u> </u>											\$1-\$1,000 œ		
				<u> </u>				L_			×	,	۷	×				\$1,001-\$15,000 G		
				<u> </u>				<u> </u>							×			\$15,001-\$50,000		- 1
													_					\$50,001-\$100,000 m	S	ı
					L		<u> </u>				<u> </u>	_	1					\$109,001-\$250,000	臣	멸
					<u> </u>		<u> </u>	<u> </u>	×	<u> </u>		L	_ļ					\$250,001-\$500,000 ග	Value of Asset	BLOCK B
				L	<u> </u>	ļ	ļ						_					\$500,001-\$1,000,000 ±	SS	₩
				L_	<u> </u>	<u> </u>		<u></u> '	<u> </u>	<u> </u>	<u> </u>	_	1					\$1,000,001-\$5,000,000 —	ğ	1
				<u>L</u>	<u> </u>					<u> </u>	<u> </u>	1	_					\$5,000,001-\$25,000,000		
				Ĺ								_	4					\$25,000,001-\$50,000,000		
<u> </u>				L_					<u> </u>		Ĺ	_	_					Over \$50,000,000 -		
				_	L							<u> </u>	4					Spouse/DC Asset over \$1,000,000° ≥		
				[_						<u> </u>				×				NOME		
				Γ														DIVIDENDS		
									×									RENT	اد	
											×	,	₹					INTEREST	ğ	
				-	$\vdash$			<u> </u>		$\Box$		T	7	_				CAPITAL GAINS	Type of Income	BLOCK C
				├─			<del>                                     </del>				<del>                                     </del>	+						EXCEPTED/BLIND TRUST	mc	Ö
		_	_		├	<del> </del>				-		+	+		×			TAX-DEFERRED	ğ	ŀ
L				├—	$\vdash$			<b></b>		-		╁	+					MAGEL CARED	•	
																		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		
						,			_	<u> </u>		Ļ	4							_
				<u> </u>	ļ			ļ			<u> </u>	-	1	×	×			None		
				<u> </u>	<u> </u>		ļ		<u> </u>	<u> </u>	×	*	<u> </u>					\$1-\$200 =		
	L			<u> </u>				_			_	+-	$\dashv$					\$201-\$1,000 ==		
				<u> </u>	-		<del>                                     </del>	<u> </u>	<u> </u>	ļ		╄	-	_				\$1,001-\$2,500 <		
				<u> </u>			-	ļ	<u> </u>			+	+					\$2,501-\$5,000 < 2		
		<b></b>	<u> </u>	<u> </u>	ļ		<del> </del>	<u> </u>	<u> </u>		-	╀	+					\$2,501.455,000 < C C C C C C C C C C C C C C C C C		
				<u> </u>	<del>                                     </del>	-	$\vdash$	<u> </u>	×	-	-	$\vdash$	+					\$15,001-\$20,000 \(\sigma\) \(\sigma\) \(\sigma\)		
-		_		├	-		<del> </del>		-	$\vdash$		+-	+					후 200,001-\$-100,000 모 200,000,1\$-100,001		
				<u></u>		<del> </del>	<del> </del>				$\vdash$	+	$\dashv$					\$1,000,001-\$5,000,000 ×	>	
	$\vdash$	_	<del></del>	├一		$\vdash$	-			$\vdash$	$\vdash$	╁	+					0ver \$5,000,000 ≥	ğ	
				├	-	-		ļ <u>.</u>	ļ	<del> </del>		╁	+					Spouse/DC Income over \$1,000,000*	Amount of Income	<u>B</u>
		-	-	├─	-		-	<del> </del>	-	$\vdash$		╆	+		×	_		None –	잌	BLOCK D
-				├一			$\vdash$	<u> </u>	ļ	<del> </del>	×	١,	<del>.</del>	×				\$1-\$200 ==	ਨੂ	D
				├─		$\vdash$	<del>                                     </del>	-	-	$\vdash$	۱	۲	╁	_				\$201-\$1,000 <b>=</b>	ş	
				├─			$\vdash$					+	+	$\dashv$				\$1,001 \$2,500	Φ	
-				Η-				<b>-</b>		$\vdash$	$\vdash$	T	$\dashv$					\$501-\$5,000		1
		<del> </del>		<del> </del>		<del>                                     </del>	<del>                                     </del>			<del>                                     </del>	<b>-</b>	+-	+			<b></b>		\$5,001-\$15,000 ≤ G		ł
		-	<del> </del>	<del> </del>			<del>                                     </del>	<u> </u>	×	$\vdash$	$\vdash$	$\dagger$	$\dashv$					\$15,001-\$50,000 ≦ C		
<u> </u>		<b></b>			<u> </u>		<u> </u>		_			$\vdash$	+					\$50,001-\$100,000 ≦ o		
<b> </b>		$\vdash$	<del>                                     </del>	_	$\vdash$	$\vdash$	$\vdash$		<del>                                     </del>		<b></b>	+	+					\$100,001-\$1,000,000		
<u> </u>		$\vdash$				t					<del>                                     </del>	$\dagger$	7					\$1,000,001-\$5,000,000 ×		
		<del>                                     </del>	<u> </u>	<del>                                     </del>	1		<b></b>		<del>                                     </del>	$\vdash$		Τ	$\dashv$					Over \$5,000,000 🔀		
···				_	T	$\Box$	$\vdash$	-	<del>                                     </del>		<b>-</b>	1	_					Spouse/DC Income over \$1,000,000*		
					Ц.							1						, =		

Use additional sheets if more space is required.

Name: Elise Stefanik Page 3 of 7

#### SCHEDULE C - EARNED INCOME

Name:	
Elise Stefanik	
Stefani	
*	
Page_	
4	
7	
I	

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.

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

INCOME LIMITS and PROHIBITED INCOME: The 2013 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. It is unchanged in 2014. 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 honoraria)	Туре	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
Examples: State of Maryland	Salary	\$20,000	\$76,000
Ontario County Board of Education	Spouse Salary	N/A	N/A
Premium Plywood Products-Guilderland, NY	Salary	\$24,000	\$61,200
American Maggie LLC-Washington, DC	Consulting Fees	0	\$24,500

#### SCHEDULE D - LIABILITIES

Name: Elise Stefanik
Page5 of7

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, JT		
First N	Example			
First Niagara Bank	First Bank of Wilmington, DE	Creditor		
Aug 2010	5/98	Date Liability Incurred MO/YR		
Business loan to EMS DC Properties (Personally Liable)	Mortgage on Rental Property, Dover, DE	Type of Liability		
		\$10,001- \$15,000	>	
		\$4E 004	8	
		\$15,001- \$50,000	•	1
		\$50,000 \$50,001- \$100,000	°	
×	×			4
×	×	\$50,001- \$100,000 \$100,001-	c	Amoun
×	×	\$50,001- \$100,000 \$100,001- \$250,000 \$250,001-	C D	Amount of Li
×	×	\$50,001- \$100,000 \$100,001- \$250,000 \$250,001- \$500,001-	C	Amount of Liability
×	×	\$50,001- \$100,000 \$100,001- \$250,000 \$250,001- \$500,001- \$1,000,000 \$1,000,001-	C) m	Amount of Liability
×	×	\$50,001- \$100,000 \$100,001- \$250,000 \$250,001- \$500,001- \$1,000,000 \$1,000,001- \$5,000,001- \$5,000,001-	C O m	Amount of Liability
*	×	\$50,001- \$100,000 \$100,001- \$250,001- \$500,000 \$500,001- \$1,000,001- \$5,000,001- \$5,000,001- \$25,000,000	C O m	Amount of 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 listed in Schedule C; 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

Position	Position Name of Organization
	(No reportable positions)

#### SCHEDULE F - AGREEMENTS

Name: Elise Stefanik
Page_6of7

ontinuation 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 maintaine	dentify 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 goven	
benefit plan maintained by a former employer.	ing the period of government service;	

Date	Parties to Agreement	Terms of Agreement
	(No reportable agreements)	

# 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.

	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services
Republican	Republican National Committee, Washington, DC	Policy Consulting (Client of American Maggie LLC)

							NOTE NUMBER
						:	
							NOTES
		:					