

UNITED STATES HOUSE OF REPRESENTATIVES 2014 FINANCIAL DISCLOSURE STATEMENT	Form A  For Use by Members, Officers, and Employees	2015 DET 21 DM T. IT
Name: Bradley Roberts Byrne Day	Daytime Telephone: 202-225-4931	(Office Use Only)
FILER X U.S. House of Representatives District: One	Officer or Employing Office:	
REPORT X 2014 Annual (Due: May 15, 2015)	Amendment Termination  Date of Termination:	nination:
PRELIMINARY INFORMATION - ANSWER EACH OF THESE Q	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 unearned income from any reportable asset 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?	r arrangement with an Yes No X
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?	No 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?	child receive any Yes No X
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 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?	child receive any totaling more than Yes No X
D. Did you, your spouse, or your dependent child have any reportable Yes X liability (more than \$10,000) at any point during the reporting period?	No 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?	or article during the Yes No X
E. Did you hold any reportable positions during the reporting period or in Yes X	No ATTACH THE CORRESPONDING	CORRESPONDING SCHEDULE IF YOU ANSWER "YES"
IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR 1	TRUST INFORMATION - ANSWER EACH OF	OF THESE QUESTIONS
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.	ring during the reporting period? If you answered "yes" to this qu	uestion, please contact Yes No X
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need this report details of such a trust that benefits you, your spouse, or your dependent child?	s and certain other "excepted trusts" need	not be disclosed. Have you excluded from Yes
<b>EXEMPTION</b> – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or you three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	ilities of a spouse or yo	ur dependent child because they meet all Yes No X

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	EDULE A – ASSETS & "UNEARNED INCOME"	
Name: Bradley Roberts Byrne		
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			ļ	Ď	ফ		Examples:		bank bank bank bank bank bank bank bank	Asset and/or Income Source 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 that generated more than \$200 in "uneamed" income duning the year.  Provide complete names of stocks and mutual funds (do not use only ticker symbols).  For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.
				Pages	Statements attached	L	bes:	La	and other cash accounterest-bearing accounts of every financial instit every financial instit every financial instit every financial instit every financial institution of the complete address aperty, and a city and a complete address aperty, and a city and a city and a perty publicly traded, stathe nature of its c location in Block A.  Your personal residend vacación in Block A.  Your personal residende de vacación in Block A.	Asset and/or Income Source y (a) each asset held for investme tion of income and with a fair market ding \$1,000 at the end of the reporting r ) any other reportable asset or sou that generated more than \$200 in "une during the year. e complete names of stocks and mutual tuse only ticker symbols). I RAs and other retirement plans (su plans) provide the value for each asset i plans) provide the value for each asset;
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				7	Sa	ABC Hedge Fund	Simon & Schuster	Corp.	poperty operty of the state of	ned with nd of able e than of stock ooks).
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							_	×	\$50,001-\$100,000	Value than than the come come
	<u> </u>	<u> </u>							\$100,001-\$250,000	Value of Asset  Value of Asset  Indicate value of asset at close 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 it generated income, the value should be 'Nono.'  *Column M is for assets held by your spouse or dependent child in which you have no interest.
				<u> </u>		×			\$250,001-\$500,000	ue of Asses of the committee of the committee two your spou
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		١.,					,	,	RENT	Type of Income Check all columns that apply. For acc generate tax-deferred income (such as 401) 529 accounts), you may check the 'Tay column. Dividends, interest, and capi even if reinvested, must be disclosed a for assets held in taxable accounts. Ch if the asset generated no income during th period.
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		<u>L.</u>							EXCEPTED/BLIND TRUST	of Inc.  at apply, income (s income (s interest, interest, cable acc. no income no inc
					٠,				TAX-DEFERRED	Type of Income columns that apply. For acc ax-deferred income (such as 401) unts), you may check the "Tay Dividends, interest, and cap) invested, must be disclosed a held in taxable accounts. Ch st generated no income during th
			Ė			Partr Incor	₽ Q		Other Type of Income	s 4010 s 4010 s Tay ing th
						nershaip me	alties		(Specify: e.g., Partnership Income or Farm Income)	Type of Income  Check all columns that apply. For accounts that generate tax-deferred income (such as 401(8), IRA, or 529 accounts), you may check the "fax-Deferred" column. Dividends, interest, and capital gains, even if relivested, must be disclosed as throme for assets held in taxable accounts. Check "None" if the asset generated no income during the reporting period.
	i					١				(k), IRA, or (k), IRA, or k-Deferred; Ital gains, as income eck "None" e reporting
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						_			\$1-\$200	For assets may check category o Dividends, must be a mountable decounts. generaled. *Column X in which yo
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								×	\$1,001-\$2,500	Amount For assets for which you check may check the "None" column category of income by check Dividends, interest, and ca must be disclosed as inco- accounts. Check "None" generated.  "Column XII is for assets held in which you have no interest.
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			:					, `	Over \$5,000,000	Amount of 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 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.
								_]	Spouse/DC Asset with Income over \$1,000,000*	
								S(part)	blank if ho trant that exc \$1,000.	Tran Indicate asset h purcha sales () exchan in the remainder of the remai
								٣	Leave this columbiant if there are no transactions that exceeded \$1,000.	BLOCK E  Transactit  Iransactit  Iransacti
				}					Leave this column blank if there are no transactions that exceeded \$1,000.	BLOCK E  Transaction indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in the reporting period. If only a portion of an asset was solid please indicate as follows: (S (park)).
									m	~ इंदर ठ इं

### SCHEDULE B - TRANSACTIONS

Name: Bradley Roberts Byrne Page 3 of 20\_\_\_

																Pages 13-20	Statements Attached	SP Example Mega Corp. Stock	SP, DC, JT Asset	Capital Gains: If a sales transaction resulted in a capital gain in excess of \$200, check the 'capital gains' box, unless it was an asset in a tax-deferred account, and disclose the capital gain income on Schedule A.  *Column K is for assets solely held by your spouse or dependent child.	dependent child for investment or the production of income, include transactions that resulted in a capital toss. Provide a brief description of an exchange transaction. Exclude transactions between you, your spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please choose 'partial sale' as the type of transaction.	Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the
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																		3/5/14		Monthly, or Bi- weekly, If applicable	(IMO/DAYR) or Quarterly,	Date
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### SCHEDULE C -- EARNED INCOME

	Name:	
	Bradley Roberts Byrne	
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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 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 2014 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were totally prohibited.

ypes or income (modaly monoraria, director's rees, and payments or professional services involving a noticiary relationship) were total	e iolally promiblied.	
Source (include date of receipt for honoraria)	Туре	Amount
Keene State State of Maryland	Approved Teaching Fee	\$6,000 \$18,000
Civil War Roundtable (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	\$1,000 N/A
United Way of Baldwin County, Inc., Foley, AL	Spouse salary	\$15,543
Coastal HR, Inc., Mobile, AL	Spouse salary	\$106,750
HOUSE OF REP -MEMBERS SERVICES, Washington DC	Salary	\$166,267
White-Spunner Realty, Inc., Mobile, AL	Spouse earnings	\$1,891

#### SCHEDULE D - LIABILITIES

Name: Bradley Roberts Byrne Page\_5\_ of \_20\_\_

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. 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	ΤĽ		SP. DC, JT
				S		Example	
			-	Southeast Toyota Finance	Capital One Bank	First Bank of Wilmington, DE	Creditor
				05/15	12/14	5/98	Date Liability Incurred MO/YR
			-	Vehicle Loan	Credit card Balance	Mortgage on Rental Property, Dover, DE	Type of Liability
	:	,	33				\$10,001- \$15,000
				×	×		\$15,001- \$50,000
	, , ,					·	\$50,001- \$100,000
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3							\$500,001- \$1,000,000
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							Over \$50,000,000 -
	X.			`	;	, ,	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, 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 of an honorary nature.

	- Parallel Prince
Reform Alabama	Board Member (Prior Year)
South Baldwin Chamber of Commerce	Board Member (Prior Year)
Eastern Shore Chamber of Commerce	Board Member (Prior Year)
Name of Organization	Position

#### SCHEDULE F - AGREEMENTS

Name:
Bradley Roberts Byrne
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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 employer.

Date	Parties to Agreement	Terms of Agreement
	N/A	

#### SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$375 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 \$150 or less need not be added towards the \$375 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph Smith, Arlington, VA	Silver Platter (determination of personal friendship received from the Ethics Committee)	<b>\$</b> 400
N/A		
		7. 17.10

# SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENT

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Name:	
Bradley Roberts Byrne	
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Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$375 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

							Heritage Foundation	Examples: Habitat for Humanity (charity fundraiser)	Government of China (MECEA)		
							ion	charity fundraiser)	(MECEA)	Source	
							Feb. 06-08	Mar. 3-4	Aug. 6-11	Date(s)	
			-		-		Mobile - DC - Birmingham	DC-Baskon-DC	DC-Beijing, China - DC	City of Departure – Destination — City of Raturn	
							Υ	۲	٧	Lodging? (Y/N)	
							۲	*	٧	Food? (Y/N)	
							Z	~	z	Family Member Included? (Y/N)	

Name:	
Bradley Roberts Byrne	
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LIEU OF HONORARIA  Name:	List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics.	Source	Examples: Association of American Associations, Washington, DC		N/A						
. Bradley Roberts Byrne	f an event to a charitable organ	Activity	Speech	Article						·	
	ization in lieu of payi	Date	Feb, 2, 2014	Aug. 13, 2014							
Page_8 of20	a charitable organization in lieu of paying an honorarium to you. A	Amount	\$2,000								

FILER NOTES (Optional)

Name: Bradley Roberts Byrne

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ㅋ	LIFESTYLE BALANCED PORTFOLIO C - Received From You				×		3/28/2014		×									
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