UNITED STATES HOUSE OF REPRESENTATIVES For New Memb	FORM B For New Members, Candidates, and New Employees	Page 1 of
Name: ANTONIA ELIASON Daytime Telephone	phone	2020 MAR -9 PH 1:34
New Member of or Candidate for State: MISSVSSIPPI U.S. House of Representatives District: 01 Candidates – Date of Election: Moscch 10, 2020	Check if Amendment	U.S. HOUSE OF REPRESENTATIVES (Office Use Only)
STATUS New Officer or Employee Staff Filer Type (If Applicable): Employing Office: Shared Principal Assistant): Int to	A \$200 penaity shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS	STIONS	
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 Period	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	g the reporting yes No X
C. Did you or your spouse have "samed" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes No 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?	arrangement with an Yes No K
D. Did you, your spouse, or your dependent child have any reportable Yes No No	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	years? Yes No
ATTACH THE CORRESPONDING SCHEDULE IF YOU THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE	CHEDULE IF YOU ANSWER "YES"	3" COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BO	ON - ANSWER <u>BOTH</u> OF THESE QUESTIONS	E 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?	n other "excepted trusts" need not be disclosed. I	lave you excluded Yes No X
EXEMPTION – Have you excluded from this report any other assets, "uneamed" income, or liabilities of a spouse or dependent clearmould be not answer "yes" unless you have first consulted with the Committee on Ethics.	of a spouse or dependent child because they meet all three tests for	st all three tests for Yes Ne Ne

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Use additional sheets if more space is required	Fidelity HOLK	or Revasant Bonk	of Mississippi Fed Crodition	ABC Hedge Fund	Egmplet	BP, Mega Corp Stock	For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$6,000, list every financial institution where there is more than \$1,000 in Interest-bearing accounts. For rental and other real property had for anyestisters, provide a complete address of description, e.g., 'tental property,' and a city and state. For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); and any financial investing the reporting period); and any financial investing in criticalle that the Thrift Savings Plan. If you report a privately-traded fund that is an Excepted investment Fund, please check the 'Elif' box. If you ac choose, you may indicate that an asset or income source is that of your spouse (SP) or jointly held with anyone (JT), in the optional column on the far left. For a defailed discussion of Schedule A For a detailed discussion of Schedule A	For all IRAs and other retirement plans (such as 401(t) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	production of income and with a fair market value acceeding \$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. Provide complete names of stocks and mutual funds (do not use only ticker symbols).	Assets and/or income Sources	BLOCK A
ž		×	×		Indefinite	×	None > \$1.41,000				
				×			\$100.001-\$250,000		use a valuation method other than fair market value, please specify the method used. If an issert was sold during the reporting period and is included only because it generated income, the value should be "None." "Column M is for assets held by your spouse or dependent child in which you have no interest.	Value of Asset Let al close of the reporting period. It	вгосх в
						×	Spouse/DC Asset over \$1,000,000* NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED			Type of Income from Check all columns that apply. For accounts that	вгоск с
				Partnership Income	Rojethes	×	Other Type of Income (Specify: e.g., Partnership Income or Farm Income) None — \$1-\$200 = \$201-\$1,000 =		Charles and a second		
				×	×		\$1,001-\$2,500		cut assess in wind, you concern to recommend it sections assess indicates the category of income by Checking the category of income was earned or generated. Check "None" if no income was earned or generated. "Column XII is for assets held by your spouse or depend "Column XII is for assets held by your spouse or depend	Amour	8
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Name: ANTONIA ELIADN

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Spouse/DC Income over \$1,000,000*

Name: ANTONIA ELIASON)
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SCHEDULE A -- ASSETS & "UNEARNED INCOME"

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: ANTONIA ELIASON

Page 4

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SCHEDULE C - EARNED INCOME

Name: ANTONIA ELIASON Page 5 of 5

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 speuse, 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: Be advised that the outside earned income limit and prohibitions on types of income may apply to you after you are on House payroll. The 2018 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$28,050. The 2019 limit is \$28,440. 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.	and prohibitions on types of Incone was \$28,050. The 2019 limit is \$ d for Members and senior staff.	e may apply to you after you are o 28,440. In addition, certain types of	n House payroll. The 2018 limit on income (notably honoraria, director's
		Am	Amount
Source (include date of receipt for nonorana)	Туре	Current Year to Filing	Preceding Year
ABC Trade Association, Beltimore, MD (July 15)	Honoradum	\$0	\$500
EXAMPLES: Civil War Roundable (Oct. 2) Ontario Courny Seard of Education	Spouse Speach	\$0 N/A	\$1,000 N/A
This I Historia		71 547 61\$	\$175 948 S 7
Chinary 10 Chinary		1.1000.10	1
Carelogic	Spouse salary	\$10,000.00	\$28,807.00