	UNITED ST	UNITED STATES HOUSE OF REPRESENTATIVES	TATIVES	FORM A Page 1 of	Page 1 O'HAND DELIVERED	/ERED
I					LEGISI ATIVE RESOURCE CENTE!	МЕ: • • • • • • • • • • • • • • • • • • •
····		Hon. Corrine Brown			2013 MAY 15 PH 4: 58	58 <b>//</b> /(
		(Full Name)		(Daytime Telephone)	(Office Use Only)	<u>X</u> )
	Filer Status	Member of the U.S. State: FL House of Representatives District: 05		Officer Or Employing Office: Employee	A \$200 penalty shall be assessed against	hall
	Report Type	Annual (May 15)	☐ Termination	Termination Date: on	more than 30 days	3
]ער	RELIMINARY	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	OF THESE Q	JESTIONS		
-	Did you or your sp or more from any :	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	Yes No	Old you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$350 and not otherwise	reportable gift in nd not otherwise Yes 🕢 No 🗌	ਰ 
	If yes, complete	If yes, complete and attach Schedule I.		If yes, complete and attach Schedule VI.		
		Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If west complete and attach Schedule II.	Yes No	Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$350 from one source)?  If yes, complete and attach Schedule VII.	reportable travel or nore than \$350 Yes No	₹
<b>=</b>		Did you, your spouse, or a dependent child receive "unearmed" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period?	Yes V No	Did you hold any reportable positions on or before the date of fiting in the VIII. current calendar year?	late of filing in the Yes V No	<b>ŏ</b>
	If yes, complete	if yes, complete and attach Schedule III.		If yes, complete and attach Schedule VIII.		
7		Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting restor?	¥8 □ No □	Did you have any reportable agreement or arrangement with an outside IX. entity?	¥8	<b>S</b>
	If yes, complete	if yes, complete and attach Schedule IV.		If yes, complete and attach Schedule IX.		
<u>.&lt;</u>		Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	¥8 ≪ 	Each question in this part must be ans	in this part must be answered and the appropriate	<u>ਵੱ</u>
	If yes, complete	If yes, complete and attach Schedule V.		_	onse.	
<del>   </del>	IPO and EXCL	EXCLUSION OF SPOUSE, DEPENDENT, OR	OR TRUST IN	TRUST INFORMATION - ANSWER EACH OF	ANSWER EACH OF THESE QUESTIONS	
	IPO-	Did you purchase any shares that were allocated as a part of an initial Public Offering?	as a part of an initi	I Public Offering?	Øon □ seA	
,	Trusts-	Details regarding "Qualified Blind Trusts" approx disclosed. Have you excluded from this report d	/ed by the Committe etails of such a trus	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 benefiting you, your spouse, or dependent child?	Inot be Yes 🗆 No 🗹	<b>S</b>
	Exemptions-	Have you excluded from this report any other assets, "uneamed" income, transactions, or it because they meet all three tests for exemption? Do not answer "yee" unless you have first	ets, "unearned" inc Do not answer "ye	ome, transactions, or liabilities of a spouse or dependent child "unless you have first consulted with the Committee on Ethics.	ident child We on Ethics. Yes 🗌 No 🗹	5

SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	IE Name Hon. Corrine Brown	ine Brown		Page 2 of 6
	BLOCK A	BLOCK B	вгоск с	BLOCK D	BLOCK €
ASS(	Asset and/or income Source	Year-End	Type of Income	Amount of Income	Transaction
identify (a) each value exceeding reportable asses "unearned" inc	identity (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearmed" income during the year.	Value of Asset Indicate value of asset at close of reporting year. If	Check all columns that apply. For refirement accounts that do not allow you to choose specific investments or that	For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets, indicate the	indicate if asset had purchases (P), sales (S), or exchanges (E)
Provide comple	Provide complete names of stocks and mutual funds (do not use ticker symbols.)	method other than fair	(such as 401(k) plans or RAs),	the appropriate box below.  Dividends interest and control	reporting year.
For all IRAs and each asset held	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.	specify the method used.	column. Dividends, interest, and capital gains, even if	gains, even if reinvested, must be disclosed as income. Check	
For rental or other description, e	For rental or other real property held for Investment, provide a complete address or a description, e.g., "rental property," and a city and state.	the reporting year and is included only because it	as income. Check "None" if the asset generated no income during the reporting period.	or generated.  * This column is for income	
For an ownership in state the name of the location in Block A.	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.	value should be "None." This column is for assets		generated by assets held solely by your spouse or dependent child.	
Exclude: Your p (unless there w \$5,000 or less ir in, or income di Savinge Plan.	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	or dependent child.			
If you so choose, you may indispose (SP) or dependent chill optional column on the far left.	If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left.				
For a detailed di booklet.	For a detailed discussion of Schedule iil requirements, please refer to the instruction booklet.				
	Bank of America	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
	Wright Patman Congressional Federal Credit Union	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	

## **SCHEDULE V - LIABILITIES**

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. 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 it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances; for liabilities held solely by your spouse or dependent child. liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. "This column is

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SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
	Wright Patman Congressional Federal Credit Union	December 1995	Personal - Loan	\$10,001 - \$15,000
	Bank of America	January 1995	Mortgage on 611 Appian Way, Jacksonville, FL	\$100,001 - \$250,000
	Wright Patman Congressional Federal Credit Union	September 2009	Mortgage on Jacksonville Beach, FL	\$100,001 - \$250,000
	Bank of America	October 1998	Mortgage on 715 Norfolk Lane, Alexandria, VA	\$250,001 - \$500,000

## **SCHEDULE VI - GIFTS**

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Report the source, a brief description, and the value of all gifts totaling more than \$350 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of 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 \$134 or less need not be added towards the \$350 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
East Coast Foods, 1514 H. Grower Street, Hollywood, CA 90026	Legal Expense Trust Donation	\$5,000
American Association of Railroads, 425 3rd Street SW, Suite 100, Washington, DC 20024	Legal Expense Trust Donation	\$5,000
Alexander Rovt, 950 3rd Avenue, 25th floor, New York, NY 10022	Legal Expense Trust Donation	\$5,000
Community Leadership PAC, 2111 Wison Blvd, 8th floor, Arlington, VA 22201	Legal Expense Trust Donation	\$5,000
Hans Frisch Living Trust, 9252 San Jose Blvd, Suite 4401, Jacksonville, FL 32257	Legal Expense Trust Donation	\$5,000
Michael and Kim Ward, 1908 River Road, Jacksonville, FL 32207	Legal Expense Trust Donation	\$5,000
Edward Baker, 501 Riverside Avenue, Suite 500, Jacksonville, FL 32202	Legal Expense Trust Donation	\$2,500
John D. Baker, 501 Riverside Avenue, Suite 500, Jacksonville, FL 32202	Legal Expense Trust Donation	\$2,500
Holland America, 1750 P Street NW, Washington, DC 20036	Legal Expense Trust Donation	<b>\$</b> 5,000
Princess Cruise Lines, 24844 Rockefeller Avenue, Santa Clarita, CA 91355	Legal Expense Trust Donation	\$5,000
United Transportation Union, 24950 Country Club Blvd, Suite 340, North Olmsted, OH 44070-5333	Legal Expense Trust Donation	\$2,500

## **SCHEDULE VIII - POSITIONS**

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honorary nature; and positions listed on Schedule I. educational or other institution other than the United States. Exclude: Positions held in any religious, social, fratemal, or political entities; positions solely of an representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor,

Position	Name of Organization
Board Member (unpaid)	Communities in Schools of Jacksonville

## **SCHEDULE IX - AGREEMENTS**

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Identify the date, parties to, and general terms of any agreement or arrangement 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	Terms of Agreement
September 2008	er State of Florida	Pension for service in Florida State Legislature