Yes No X	liabilities of a spouse or your dependent child because they meet all hics.	ned" income, transactions, or ted with the Committee on Et	EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.
Yes No X	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from details of such a trust that benefits you, your spouse, or dependent child?	ittee on Ethics and certain off it child?	TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on this report details of such a trust that benefits you, your spouse, or dependent child?
Yes No X	porting period? If you answered "yes" to this question, please contact	Public Offering during the rep	IPO – Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you the Committee on Ethics for further guidance.
JESTIONS	DRMATION - ANSWER EACH OF THESE QUESTIONS	DEPENDENT, OR TRUST INFORMATION -	IPO AND EXCLUSION OF SPOUSE, DEPENDEN
YOU ANSWER "YES"	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	Yes No X	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?
Yes No X	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?	Yes X No	D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?
Yes No X	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?	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?
Yes No X	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?	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?
Yes No X	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?	Yes X No	 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?
		THESE QUESTIONS	PRELIMINARY INFORMATION - ANSWER EACH OF T
	Termination Date of Termination:	Amendment	REPORT X 2015 Annual (Due: May 16, 2016)
	Officer or Employing Office: Employee		FILER X Member of or Candidate for State:NY STATUS
(Office Ose Offiy)	4-1/4 HODGE OF R	Daytime Telephone: (518) 42	Name: Elise Marie Stefanik
AND DELIVE Rease 1 of 4 SCURCE CENTS: PM 3: 27	Form A Form A For Use by Members, Officers, and Employees 2016 MAY 13 PM 3: 27		UNITED STATES HOUSE OF REPRESENTATIVES 2015 FINANCIAL DISCLOSURE STATEMENT

SCHEDULE A - ASSETS & "UNEARNED INCOME" Name: Elise Stefanik Page 2 of 4

	Deposit	First Niagara IRA (2) -First Niagara Certificate of	-Hrst Niagara Certificate of Deposit	First Niagara IRA (1)	ABC Hedge Fund X	J1 Examples: Simon & Schuster	SP Mega Corp. Stock EIF	find 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 rental and other real property held for invastment, provide a complete address or description, e.g., rental property, and a city and state. For an ownership interest in a privately-held business that is not publicity traded, state the name of the business of 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 pentol); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or jointy held with anyone (JT), in the optional column on the farleft. For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	For bank and other cash accounts, total the amount in all interset having apparents.	(do not use only ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset hold in the account that expected the reporting thresholds in the account thresholds.	for investment or a fair market value the reporting period, asset or source of a \$200 in "unearned" ke and mutual funds	Asset and/or Income Source	BLOCK A
	Ī							None	>				٦
								\$1-\$1,000	В		ation / ation / ! ! asse iuse it umn N		
	×	<	X			Indefinite		\$1,001-\$15,000	5		Indicate value of as valuation method oth used. If an asset was solbecause it generated *Column M is for ass you have no interest.		
		\top				ਛੋ		\$15,001-\$50,000	D		of ass d other sold sted i asset		
\vdash							×	\$50,001-\$100,000	m		et at r than durin ncome ts held	_	
	+	+-					\vdash	\$100,001-\$250,000	71		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 "None." *Column M is for assets held by your spouse or dependent child in which you have no interest.	Value of Asset	g
	+	+-			×	L		\$250,001-\$500,000	G		of th zarket repor value : vur spo	of t	BLOCK B
	\top	1						\$500,001-\$1,000,000			e rep value ting p should	Sse	Φ.
				_				\$1,000,001-\$5,000,000	-		orting plea eriod be "I or dep	Ä	
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								\$25,000,001-\$50,000,000	~		ecify the is indicated at child		
								Over \$50,000,000	٦		he maded		
								Spouse/DC Asset over \$1,000,000*	₹.		se a sthod only nich		
								NONE		-	Check agenerate generate 529 acc column. even if for asset if the as period.		٦
							×	DIVIDENDS			k all rate the account min. If ne assets assets d.		
								RENT			colur ex-def ax-def Ints). Divid inves held t gen		
		44						INTEREST			nns tened ferred you ends, ted, in ta	Ϋ́	
		<u> </u>						CAPITAL GAINS			Check all columns that apply. Figenerate tax-deferred income (such 529 accounts), you may check the column. Dividends, interest, an even if reinvested, must be discifor assets held in taxable account if the asset generated no income duperiod.	Type of Income	BLOCK C
	\perp							EXCEPTED/BLIND TRUST			pply. ne (su check rest, be di acco	Jac	χ̈́
	\succ	<	×					TAX-DEFERRED			For ch as the and and sclos	me	ľ
					Partnership Income	Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)			Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k), IRA, or 529 accounts), you may check the "Tax-Deferred" column. Dividends, interest, and capital gallis, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if the asset generated no income during the reporting period.		
	>	<	×					None	-	in wh	For a may categ Divid must acco		
		\bot			L			\$1-\$200	=	*Column XII is for assets held in which you have no interest.	For assets for which may check the "None category of income Dividends, Interest, must be disclosed accounts. Check generated.		
					<u> </u>	×	$oxed{oxed}$	\$201-\$1,000	=	il is fo or have	for withe 1 inct interval is clo		J
	_ -	44					×	\$1,001-\$2,500	₹	e no ii	whone the sect a	₽	
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	_				lacksquare			\$5,001-\$15,000	≤ .	d by y	which you checked "Ta: " None" column. For a " None" column. For a nome by checking th iterest, and capital g closed as income for Check "None" if no	Amount of Income	BLOCK D
	_	4-4	_					\$15,001-\$50,000		our s	Taxiorall or all for a for a in	E I	ô
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$\vdash \vdash$		+						\$1,000,001-\$5,000,000	×	or de	ed" in asset ppriate ren if hek was		
$\vdash \vdash$			_		\vdash			Over \$5,000,000	×	pende	Block s indic box reinv d in d earr		ł
		+-		_	\vdash			Spouse/DC Asset with Income over \$1,000,000*	<u>×</u>	Column XII is for assets held by your spouse or dependent child in which you have no interest.	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.		
+	\dashv	+-			_		S(part)	7. 31.1					ヿ
				i			ä	no transaction transaction that exceeded \$1,000.	ive thi	nlya, asset ase ini	Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,0 in the reporting period.	rans	ВО
1								no transactions that exceeded \$1,000.	Leave this column blank if there are	If only a portion of an asset was sold please indicate as follows: (S (part)).	Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in the reporting period.	Transaction	BLOCK E
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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	BLOCK A Asset and/or Income Source						<u>s</u> _	BLOCK B Value of Asset	¥ 위	B									₹	Pe c	BLOCK C	BLOCK C Type of Income					>	, E	BLOCK D Amount of Income	풀兒	con U	<u>ه</u>				BLOCK E Transaction
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									-				7	-	*		-		-	·	·		or Farm Income)									· · · · · · · · · · · · · · · · · · ·			r \$1,000,000*	
		None	\$1-\$1,000		\$1,601-\$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	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	TAX-DEFERRED	Other Type of Income (Specify: e.g., Partnership Income or Fai	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-\$1,000,000	\$1,000,001-\$5,000,000	Over \$5,000,000	Spouse/DC Asset with Income over \$1,0	P, S, S(part), or E
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SCHEDULE D - LIABILITIES

Name: Elise Stefanik Page 4 of 4

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. 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 *Column K is for liabilities held solely by your spouse or dependent child.

T			
		DC, 57	
	First N		
	First Niagara Bank	Creditor	
	8/10	Date Liability Incurred MO/YR	
	Mortgage on Rental Property, Dover, DE Business Loan to EMS DC Properties (Personally Liable)	Type of Liability	
		\$10,001- \$15,000	
-		\$15,001- \$50,000	
		\$50,001- \$100,000	
	××	\$100,001- \$250,000	$\Big]_{lacktriangle}$
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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, fratemal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

Position	Name of Organization
(NONE)	