N 	Yes	pendent child	ilities of a spouse or de Committee on Ethics.		arned" income is you have fi		s report any othe tion? Do not ans	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabecause they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the	PTION—Have they meet	EXEM becaus
<u>₹</u>	Yes 🔲	ot be	cepted trusts" need no	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 benefiting you, your spouse, or a dependent child?	iittee on Ethic ing you, your	d by the Comma a trust benefit	Trusts" approved	egarding "Qualified Bling excluded from this repo	S—Details re	TRUST disclos
S	QUESTIONS)F THESE	ISWER EACH OF THESE	- A1	T INFOR	OR TRUS	PENDENT,	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	USION C	EXCL
	esponse.	each "Yes" ı	ule attached for	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response	and the a	answered	part must be	ch question in this	Eac	
No	Yes 🔲	\$5,000 from	ompensation of more than \$5,000 from two prior years?	VI. Did you receive com a single source in the two if yes, complete and at	<u>8</u>	Yes	ave any report- ting period?	III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule III.	you, your spou vility (more than omplete and a	III. Did able liab If yes, c
No	Yes 🔲	rangement	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	V. Did you have any rep with an outside entity? If yes, complete and at	№	%s □	ceive "unearned" or hold any nd of the period?	II. Did you, your spouse, or a dependent child receive "unearned" 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? If yes, complete and attach Schedule II.	ou, your spous of more than \$ ble asset worth omplete and a	II. Did y income reportat
No No	Yes 🔽	efore the date ir two years?	IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.	IV. Did you hold any rep of filing in the current ca If yes, complete and at	No U	Yes 🖸	(e.g., salaries or orting period?	i. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	ou or your spou \$200 or more to complete and a	i. Did yo fees) of if yes, c
				EACH OF THESE QUESTIONS	OF THES		lue or black ink. - ANSWER	In all sections, please type or print clearly in blue or black ink PRELIMINARY INFORMATION — ANSW	ctions, please	In all se
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assessed who files	A \$200 penalty shall be a	A \$200 per	Check if Amendment	1 116/12	Date of Election:	OF NY	State: District: _	Candidate for the House of Representatives		Filer
r.	Office Use Only)	5.S.112.4								
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012	SEP 2 4 - 2012	,	RM B s and new employees	FORM B For use by candidates and new employees	20,2012	nber 201	EPRESENTATIVES TEMENT September	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2011 - September	ED STATI	UNIT FINA Period

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SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name Grace Meng

Page 2 on

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. 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.

Exclude: Military pay (such as inalignal guald of meserve pay), receign remember programs, and perfems received under the operationary from	enent programs, and benene re	Amount	unt
Source (include date of receipt for honoraria)	Type	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
;	Director's Fee	\$400	\$3,200
XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
NYS Assembly	Salary		\$79,500
New York University	spouse salary	N/A	NIA
Wayne Kye DOS	Spouse salary	NA	NA
Second District Dental Society	Honoranium (spoke)	С	\$ 1,750.00
	200000		

Name Grace Meng

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SCHEDOLE II — ASSETS AND "UNEAKNED" INCOME

Name Grace Meng

Page 6 of

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SUTERULE II — ASSE IS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

95 19 Ę SP 8 TIAA CREF RAWMENT Amin's THA CECT Group Supplements Petron Asset and/or Income Source . TIAN FOR ESTA THAT BOR MAIL. THATEF Library 2040 For Midgo Start Index partition Agricur Gunt With My Coff look Soldie Affective franch forther रूष घर BLOCK A (1) (1) (DC2) (DCI) 2) (2 None - X В \$1 - \$1,000 \$1,001 - \$15,000 C \$15,001 - \$50,000 a Value of Asset \$50,001 - \$100,000 BLOCK B \$100,001 - \$250,000 \$250,001 - \$500,000 Ω \$500,001 -- \$1,000,000 I \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 ے \$25,000,001 - \$50,000,000 ᄌ ľ Over \$50,000,000 NONE **DIVIDENDS** RENT Type of Income INTEREST BLOCK C **CAPITAL GAINS** EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income) \$1 - \$200 \$201 - \$1,000 = **Current Year** \$1,001 - \$2,500 XI IIIVIIIV IX \$2,501 - \$5,000 \$5,001 -- \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 Amount of Income \$100,001 - \$1,000,000 × \$1,000,001 - \$5,000,000 BLOCK D × Over \$5,000,000 None \$1 - \$200 Preceding Year \$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

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SCHEDULE III — LIABILITIES

Name Grace Meng

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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 reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furnitively. ling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000. ture, or appliances; 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 sib-

		SP	77		SP.
		Sallie Mae, PA	JT bank of America, NA.	Example: First Bank of Wilmington, DE	Creditor
		NOV 2004	Oct 2006	May 1998	Date Liability Incurred mo/year
		Nov 2004 Student Loan	Oct 2006 Montgage on 36-02 212 street	Mortgage on 123 Main Street, Dover, DE	Type of Liability
					\$10,001— \$15,000
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SCHEDULE IV — POSITIONS

any nonprofit organization, any labor organization, or any educational or other institution other than the United States cer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise, Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an offi-

and positions solely of an honorary nature **Exclude:** Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization);

Position	Name of Organization
of counsel Attorney	Youn + Kim LLP (law firm) - uncompensated

SCHEDULE V — AGREEMENTS

2

Grace Meng

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identify the date service; continue efit plan mainta	identify the date, parties to, and general terms of any agreement or arrangement with service; continuation or deferral of payments by a former or current employer other the efft plan maintained by a former employer.	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

CHEDULE VI - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

2

Report sources of such control by you or your business affiliation for services provided directly by you during the two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization 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 1.

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	*Example:			- - - -			
Source (I	Example: Doe Jones & Smith, Hometown, Homestate						
Source (Name and Address)	Hometown, Homestate		•				
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Brief Description of Duties						÷	
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