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UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	FORM B For New Members, Candidates, and New Employees	MAY 02 206 Page 1 of
Name: MAL HYMAN	Daytime Telephone:	2016 MAY -5 PM 12: 32
New Member of or Candidate for State: SC U.S. House of Representatives District: 7 Candidates – Date of Election: 11/1/6	Check if Amendment	U.S. NOUSE OF REPRESENTATIVES (Office Use Only)
New Officer or Employee Employing Office:	Period Covered: January 1,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	F THESE 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 E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	ng the reporting period Yes No
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 F. Did you have any reportable agreements or arrangements with an outside entity during the reporting period or in the current calendar year up through the date of filing?	or arrangements with Yes No No
D. Did you, your spouse, or your dependent child have any reportable Yes liability (more than \$10,000) at any point during the reporting period?	No J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	n \$5,000 from a single Yes No No
ATTACH THE CORR THIS FORM INCLUDES ONLY T	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	S") COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER B	INFORMATION - ANSWER BOTH OF THESE QUESTIONS	E QUESTIONS
TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" ne this report details of such a trust that benefits you, your spouse, or your dependent child?	on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from t child?	ave you excluded from Yes No
EXEMPTION – Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	ncome, transactions, or liabilities of a spouse or dependent child becau Committee on Ethics.	se they meet all three Yes No

SCHEDULE A - ASSETS & "UNEARNED INCOME"

TWW ds	MML ,			71AA-		Examples:	≒ ,	SP,	For bank and other cash accounts, to all imbrest-bearing accounts. If the \$5,000, list every financial institution more than \$1,000 in interest-bearing a more than \$1,000 in interest-bearing a for rental and other real property held provide a complete address or directly and state. For an ownership interest in a private that is not publicly traded, state the business, the nature of its actigeographic location in Block A. Exclude: Your personal residence, inhomes and vacation homes (unless income during the reporting period); cinterest in, or income derived firetimement program, including the Thrift you have a privately-traded fund the investment Fund, please check the "E fyou so choose, you may indicate income source is that of your sidependent child (DC), or jointly held win the optional column on the far left. For a detailed discussion of requirements, please refer to the instruction.	For all IRAs and < 401(k) plans) provide the account that exce	(do not use only ticker symbols).	and the mount of the year.	income which ger	and (b) any other	Identify (a) each production of incom	Assets and		-
CTATE DETINEMENT		SERVICES	MML INDESTRE	CREF YOLK	ABC Hedge Fund X	Simon & Schuster	Mega Corp Stock	EFF	For bank and other cash accounts, total the amount in 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 investment, 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 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 interest in, or income denved 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 jointly held with anyone (JT), in the optional column on the far tert. For a detailed discussion of Schedule A requirements, please erfer to the instruction booklet.	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.	Provide complete names of stocks and mutual funds (do not use only ticker symbols).	uning are year.	which generated more than \$200 in	reportable asset or source of	Identify (a) each asset held for investment or production of income and with a fair market value	Assets and/or Income Sources	BLOCK A	
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			<u> </u>	<u> </u>	<u> </u>	Indefinite	_		\$1,001-\$15,000	_	child in which you have no interest.	should be "None."	included only because it generated income, the value	prease specify the metriod used.	Indicate value of asset at close of the reporting period. If you use a valuation method other than fair market value,			
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					Partnership Income	Royalties			Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		erated no	for assets held in taxable accounts.	even if	the "Tax-Deferred" column. Dividends.	Check all columns that apply. For accounts that generate tax-deferred income (such as			MAL
<u>ሃ</u>			X	×					None –			ÇQ.		a	For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For a other assets indicate the category of income by checking the appropriate box below. Dividends, interest			12
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	SCHEDULE A – ASSETS & "UNEARNED INCOME"	
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SCHEDULE C - EARNED INCOME

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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 both the filer and filer's 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: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2014 limit on outside earned income for Members and employees compensated at or above the *senior staff' rate was \$26,955. The 2015 limit is \$27,225. 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.	ncome may apply to you after yo limit is \$27,225. In addition, cert r staff.	ou are on House payroll. The 201 ain types of income (notably honora	4 limit on outside earned income for ria, director's fees, and payments for
	4	Am	Amount
Source (include date of receipt for nonoraria)	Туре	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
Examples: Civil War Roundlable (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	\$0,000 \$0	\$1,000 \$1,000
		P	-
COKER COLLEGE	SMARY	17,860.84	\$53,582.SI
		THE REPORT OF THE PROPERTY OF	
STATE OF SOUTH CAROLINA DSS (SP)	SALARY SALARY	\$17.658,00	\$ 52,974.00

SCHEDULE D - LIABILITIES

Name:	
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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 your dependent child. Mark the highest amount owed during the reporting period. New 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.		
				Example			
			NOT APPLICABLE	First Bank of Wilmington, DE	Creditor		
			i	5/98	Date Liability Incurred MO/YR		
	,			Mortgage on Rental Property, Dover, DE	Type of Liability		
					\$10,001- \$15,000	>	
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					\$25,000,001- \$50,000,000	_	
					Over \$50,000,000	د	
					Over \$1,000,000* (Spouse/DC Liability)	*	

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, 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. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

				BOARD OF DIRECTORS	Position	
				BOY'S AND GIRL'S CLUB		The second control of the second control of
The state of the s		, ,	(NO COMPENSATION)	HARISHILE, SC 25550	of Organization	me promote journe.

SCHEDULE F - AGREEMENTS

or arrangement that you have with respect to: future employment; a leave of absence during the period of government service;	Name:
to: future en	ne:
nployment; a	MAL
leave of absence during the period or	Human
government service;	Pageof

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
		N.A.	Parties to Agreement
			Terms of Agreement

SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise 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 C.

	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services
	N.A.	
	2022	

MAY 02 2016

CAMPAIGN NOTICE

REGARDING FINANCIAL DISCLOSURE REQUIREMENT

If you have not yet raised (either through contributions or loans from your father -5 Ph 12: 32 others) or spent in excess of \$5,000 for your campaign, or if you have withdrawn your candidacy, please indicate your status and sign and date below.

The Honorable Karen L. Haas, Clerk Office of the Clerk, U.S. House of Representatives Legislative Resource Center 135 Cannon House Office Building Washington, DC 20515-6601

Indicate Your Status: (Select One) Dear Madam Clerk:

Over \$5,000 Threshold No	000 Id Not	This is to notify you that I have not yet raised (either through contributions or loans from myself or others) or spent in excess of \$5,000 for my campaign for the U.S. House of Representatives.
Exceeded		I understand that when I do raise or spend in excess of \$5,000 for my campaign, I must file a
		Financial Disclosure Statement with the Clerk of the House of Representatives according to

	This is to notify you that under the laws of the state of,			
Withdrawal of Candidacy	I withdrew my candidacy for the U.S. House of Representatives on			
of Candidacy	[Note: If your Financial Disclosure Statement was due before the date on which you			
	withdrew from the race, you still must file a Financial Disclosure Statement with the House.]			

copy of which has been provided to me by the Clerk.

Name (Please Print or	: Type):	MAL	HYMAN		
	SOUTH			District:	7	
	4/2al	/,,			,	

the deadlines set out on pages 2 and 3 of the Financial Disclosure Instruction booklet, a

(THIS PAGE WILL BE MADE PUBLICLY AVAILABLE)

RETURN COMPLETED STATEMENT TO:
The Clerk, U.S. House of Representatives
Legislative Resource Center
135 Cannon House Office Building
Washington, DC 20515-6601