UNITED STATES HOUSE OF REPRESENTATIVES	FORM B	Page 1 of 5
FINANCIAL DISCLOSURE STATEMENT	For New Members, Candidates, and New Employees	LEGISLATIVE RESOURCE CENTER
		18 MAY 24 PM 2: 29
Name: DONNA MERCARO KIM	Daytime Telephone:	OFFICE OF THE LLERY
New Member of or Candidate for State: H V.S. House of Representatives District:	TAWAII Check if Amendment	(Office Use Only)
	Staff Filer Type (If Applicable): Period Covered: January 1, to	A \$200 penaity shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	OF 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. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	Yes No Period or in the current calendar year up through the reporting period or in the current calendar year up through the date of filing?	g the reporting gh the date of filing? Yes No 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?	Yes No P. 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?	the current calendar Yes No
D. Did you, your spouse, or your dependent child have any reportable flability (more than \$10,000) at any point during the reporting period?	Yes No J. Did you receive compensation of more than \$5,000 from single source in the current year and two prior years?	\$5,000 from a Yes No No
ATTACH THE CO	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER B	ST INFORMATION - ANSWER BOTH OF THESE QUESTIONS	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?	iffee on Ethics and certain other "excepted trusts" need not be disclosed. I endent child?	lave you excluded Yes No
EXEMPTION – Have you excluded from this report any other assets, "uneamed" income, or liabilities of a spouse or dependent exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	ned* income, or liabilities of a spouse or dependent child because they meet all three tests for ormittee on Ethics.	t all three tests for Yes No

SCHEDULE A -- ASSETS & "UNEARNED INCOME"

	CHEDOLE A - AGGETG & CHEANNED INCOME	Name: DOWN	Name: DONNA MERCADO KIM	Page_2of5
BLOCK A	вгоск в	SLOCK C	вгоск р	
Assets and/or Income Sources	Value of Asset	Type of Income	Amount of Income	
ity (a) each asset held for investment or indicate value of asset at action of income and with a feir market value use a valuation method seding \$1,000 at the end of the reporting period specify the method used, b) any other reportable asset or source of income at a asset was sold during the presented more han \$200 in "unearned" only because it generated outputs.	ity (a) each asset held for investment of indicate value of asset at close of the reporting period. If you Check all columns that apply. For accounts for assets for which you checked "Tax-Delened" in Blaction of income and with a feir market value use a valuation method other than fair market value, please that generate tax-deferred income (such as assets indicate the category of income by checking defin \$1,000 at the end of the reporting period specify the method used. 401(R), IPA, or \$29 accounts, you may check capital gains, even if reinvested, must be disclose b) any other reportable asset or yource of income (such asset was sold during the reporting period and is included that "Tax-Deletered" column. Ovidereds, Check "None" if no income was earned or generated in generated more han \$200 in "unearned" only because it generated income, the value should be reinvested, must be disclosed as theorie. Column XII is for assets held by your spouse or deported to the reinvested, in the value are interested.	u Check all columns that apply. For accounts for assets for who that generate tax-deferred income (such as assets indicate to 401(k), IPA, or 529 accounts), you may check capital gains, et the "Tax-Oelered" column. Oktoberds, Check "None" it inhonest, and capital gains, even it reinvested, must be disclosed as income. Column XII is for the season held in travals accounts.	ify (a) each asset held for investment of indicate value of asset at close of the reporting period. If you Check all columns that apply. For accounts for assets held for investment of indicate value of asset at close of the reporting period. If you Check all columns that apply. For accounts for assets with a fair market value use a valuation method other than fair market value, please that generate tax-deferred income (such as assets which at the reporting period specify the method served. 401(X), IFX, or 529 accounts,) you may check capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts, and capital gains, even if reinvested, must be disclosed as income was earned or generated. 1 Tax-Deferred column. Ovidents Check "None" if no income was earned or generated. 1 The second of the reporting the value should be interest, and capital gains, even if the period of the reporting the peri	y check the "kono" column. For all other le box below. Dividends, inferrest, and effor assets held in taxable accounts, which you have no interest.
de complete names of stocks and mutual funds	de complete names of stocks and mutual funds. "Column M is for assets held by your spouse or dependent None" if the asset generated no income	"None" if the asset generated no income		

CHECKING ACKT	MORGAN STANLEY		Examples:	DC. Mega Corp Stock		For an ownership interest in a privately-held business that is not publicly tracked, 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 lin, or income derived from, a federal retirement program, including the Traffit Savings Plan.	all interest-beering accounts. If the total is over \$5,000, fast every financial instantion where there is more than \$1,000 in Interest-beering accounts. For renulal and other rail property head for invostment, provide a complete address or description, e.g., renulal property, and a city and state.	the account that exceeds the reporting thresholds.	identity (a) each asset held for investment of production of income and with a fair market value exceeding \$1.00 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 sicker symbols). For all IRAs and other redirement plans (such asset held in the provide the value for each asset held in	Assets and/or Income Sources	BLOCK A
×	*	*	Bulgating	×	None \$1.51,000 \$1,001-\$15,000 \$15,001-\$50,000 \$15,001-\$50,000 \$250,001-\$1,000,000 \$250,001-\$1,000,000 \$5,000,001-\$250,000,000 \$5,000,001-\$250,000,000 \$5,000,001-\$250,000,000 \$5,000,001-\$250,000,000 \$5,000,001-\$250,000,000			A B C D E F G H ~ J X L X	Indicate value of asset at close of the reporting period, if you use a valuation method other than fair merket value, please specify the method used. If an easel was sadd 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	BLOCK B
*	×	Partnership	Righties	×	NONE DIVIDENOS RENT INTEREST CAPITAL GAINS EXCEPTED/BUIND TRUST TAX-DEFERRED Other Type of Income (Specify, e.g., Pa	vinership Income or Ferm Income	•	~ ~ ~ ~	Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k), IRA, or 528 accounts), you may check the "Tax-Deferred" column. Dividends, therest, and capital gains, even if reliverested, must be discribed as income for assets held in taxable accounts. Check thore if the esset generated no income during the reporting portod.	Type of Income	BLOCK C
×		×	S X	×	\$1-\$200 \$201-\$1,000 \$1,001-\$2,500 \$2,501-\$5,000 \$5,001-\$15,000 \$50,001-\$100,000 \$100,001-\$1,000,000 \$1,000,001-\$1,000,000 \$1-\$20,000 \$1,000,001-\$1,000,000 \$1,000,001-\$1,000,000 \$1,000,001-\$1,000,000 \$1,000,\$1,000,000 \$1,000,\$1,000,000 \$1,001-\$1,000 \$1,001-\$1,000,000 \$1,001-\$1,000,000 \$1,000,001-\$1,000,000 \$1,000,001-\$1,000,000 \$1,000,001-\$2,000,000 \$1,000,001-\$2,000,000 \$1,000,001-\$2,000,000 \$1,000,001-\$2,000,000 \$1,000,001-\$2,000,000 \$1,000,001-\$2,000,000			Current Year Preceding Year	its For assets for which you checked "Tax-Defened" in Block C, you may check the "None" column. For all other 29 assets indicate the category of income by checking the appropriate box below. Dividends, Inferest, and 14 capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. 15 Check "None" if no income was earned or generated. 16 "Column XII is for assets held by your spouse or dependent child in which you have no interest.	Amount of Income	вгосж в

Name: PONNA MERCADO KIM

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																Spouse/DC Asset over \$1,000,000*					
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												:				Other Type of Income (Specify: e.g., Partnership income or Farm Income)					
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Use additional sheets if more space is required.

SCHEDULE C - EARNED INCOME

Name: DONNA MERCADO KIM 으 n)

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 2017 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,765. The 2018 limit is \$28,050. 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.	income may apply to you after you firmit is \$28,050. In addition, certa or staff.	i are on House payroll. The 2017 in types of income (notably honorar	' limit on outside earned income for ia, director's fees, and payments for
		Am	Amount
Source (include date of receipt for nonoraria)	Туре	Current Year to Filing	Preceding Year
_	Honorarium	\$0	\$500
CXAMPIes: Civi War Roundbabe (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	SO OS	\$1,000 N/A
STATE EC 121 AT. 124 CTIVITE OF HAMAII	SALLES (GELLES)	4000	# 50 100
		# 44	A A I D A
LIFE VANTAGE	COMMISSION	# G88.10	\$ 658.80

SCHEDULE D - LIABILITIES

Name: DONNA MERCARO KIM

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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. 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

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					SP,		
			BMW	Example			
			BANKI FINANCIAL SERVICES	First Bank of Wilmington, DE	Creditor		
			8/16	5/98	Date Liability Incurred MO/YR		
			NOTOR VEHICLE LEASE	Mortgage on Rental Property, Dover, DE	Type of Liability		
					\$10,001- \$15,000	>	
			×		\$15,001- \$50,000	8	
					\$50,001- \$100,000	0	
				×	\$100,001- \$250,000	b	\
					\$250,001- \$500,000	ľη	moun
					\$500,001- \$1,000,000	715	Amount of Liability
					\$1,000,001- \$5,000,000	6	ability
					\$5,000,001- \$25,000,000	3:	
					\$25,060,001- \$50,000,000	-	
:					Over \$50,000,000	٤.,	
;					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.

		Position
		Name of Organization