PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? Name: Gragory W. Macks 2016 FINANCIAL DISCLOSURE STATEMENT **UNITED STATES HOUSE OF REPRESENTATIVES** 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? IPO - Did you purchase any shares that were allocated as a part of an initial Public Offering during the reporting period? If you answered "yes" to this question, please contact the Committee on Ethics for further guidance. D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction A. Did you, your spouse, or your dependent child: exceeding \$1,000 during the reporting period? REPORT TYPE FILER STATUS Receive more than \$200 in unearned income from any reportable a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or asset during the reporting period? X 2016 Annual (Due: May 15, 2017) House of Representatives Member of the U.S. State: District þ 2v 2 Yes Yes X No ğ Daytime Telephone: みょち・3 ₹ |<u>₹</u> Amendment * * 8 For Use by Members, Officers, and Employees ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" 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? 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? 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? Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the Employee Officer or F Employing Office Termination Date of Termination: A \$200 penalty shall be assessed against any individual who files more than 30 days late. 1 2017 MAY 15 PM 3: 41 E TO LETTE HAND DELIVERED: 1 of 4 Staff Filer Type: (If Applicable) Shared š જ š ř ĕs Xes X Principal Assistant S 8 중 중 <u>Z</u>

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EXEMPTION – Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse or your dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.

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SCHEDULE C - EARNED INCOME

Name Grago M W. Mucks Page 2 or 4

XCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	te source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.	ist 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 a spouse, list	
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the source and amou	the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below. Exercising a side amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.	below.	i i
INCOME LIMITS and In addition, certain to	INCOME LIMITS and PROHIBITED INCOME: The 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,765. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited.	ted at or above the "senior staff" rate was t rry relationship) are totally prohibited.	\$27,495. The 2017 limit is \$27,765.
	Source (include date of receipt for honoraria)	Туре	Amount
1	Keene State State of Manyland	Approved Teaching Fee Legislative Pension	\$6,000 \$18,000
examples:	Civil War Roundtable (Oct. 2) Ontario County Board of Education	Spouse Selary Spouse Salary	\$1,000 WA
h N	NY STATE HOMES AND COMMUNITY RENEWALSPOOR	Spouse Salary	2/4
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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. 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.

	4	4	77		DC Ja		
	Fore	Chase	chase	Example			
	Fore M Investments, 6/10		e	First Bank of Wilmington, DE	Creditor		
	6/10	10/06	10/06	5/98	Date Liability Incurred MO/YR		
	ST ALBANS RESIDAN	ST. ALBANS RESIDENCE	ST. ALBANG RESIDENCE	Mortgage on Rental Property, Dover, DE	Type of Liability		
					\$10,001- \$15,000	>	
	X				\$15,001- \$50,000	В	
		X			\$50,001- \$100,000	C	
				×	\$100,001- \$250,000	0	\
					\$250,001- \$500,000	æ	Amount of Liability
			X		\$500,001- \$1,000,000	m	t of Li
					\$1,000,001- \$5,000,000	6	ability
					\$5,000,001- \$25,000,000	Ŧ	
					\$25,000,001- \$50,000,000	-	
					Over \$50,000,000	_	
					Over \$1,000,000* (Spouse/DC Liability)	*	

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 retinious, social, fraternal, or political entities (such as political parties and comparion organizations); and positions solely of an honorary nature.

Positions neid in any religious, social, tratemal, or political el	Positions held in any religious, social, matemati, or positical entities (such as positical entities (such as positical entities (such as positical entities), and positions socially or an incritionally nature.
Position	Name of Organization
BONED MEMBER	100 BLACK MEN NU CHAPTER
EMB EVE	UN OCCICE FOR PARTHERS ITIP + THE PERMANENT
	MEMORIAL COMMITTES

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

Name:
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W. Meeks
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Identify the source and list travel filnerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$375 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

EXCLUDE: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

Source	Date(a)	City of Departure-Destination-City of Return	Lodging? {Y/N}	Food? (Y/N)	Family Member Included? (Y/N)
Government of China (MECEA)	Aug. 6-11	DC-Beijing, China-DC	*	*	z
Learnples: Habital to Humanity (charity hand sister)	Mar. 3-4	DC-Bookin-DC	γ	γ	٧
Congressional Black Cowers	E) - 04 NOW	NY - MIAMI, EL- NY	Y	٧	ی
Political Evaluation and				-	
Leadership Institute					
-			>		
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