	No <	Y 9\$	Have you excluded from this report any other assets, "unearned" 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.	s, "unearned" income, to not answer "yes" uni	rom this report any other asset I three tests for exemption? D	ŀ	Exemptions	
	8 ₹	*	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 dependent child?	I by the Committee on I	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse	Details regarding "Qu disclosed. Have you	Trusts	
	No 🗸	Yes	iic Offering?	a part of an initial Pub	Did you purchase any shares that were allocated as a part of an initial Public Offering?	Old you purchase any	IPO-	
	SNOI	QUEST	RMATION - ANSWER EACH OF THESE QUESTIONS	R TRUST INFO	IPO and EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	USION OF SPOU	PO and EXCL	
			ached	to		If yes, complete and attach Schedule V.	If yes, complete	_
	ropriate	d the app	Each question in this part must be answered and the appropriate	Y2	any reportable flability	Did you, your spouse, or a dependent child have any reportable (tability (more than \$10,000) during the reporting period?	V. (more than \$10,00)	
	franciscompro por 12 de escondos que estados	The state of the s	If yes, complete and attach Schedule IX.		Common designations in the common section of the common of the comm	if yes, complete and attach Schedule IV.	if yes, complete	
	Yes V No		Did you have any reportable agreement or arrangement with an outside antity?	8 √	chase, sell, or exchange any (.)000 during the reporting Yes	Did you, your spouse, or dependent child purchase, set, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting	Did you, your apor IV. reportable asset in	
			If yes, complete and attach Schedule VIII.	-		If yes, complete and attach Schedule III.	If yes, complete	,
	Yes V No	-	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Yes V No VIII. CI		Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable esset worth more than \$4 on a state and of the particle?	III. more than \$200 in	
			If yes, complete and attach Schedule VII.	=:		If yes, complete and attach Schedule II.	If yes, complete	
	₹ <	yel or 350 Yes	Did you, your spouse, or a departdent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 from one source)?	No <	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?	Did any individual or organization make a donation to charity in you for a speech, appearance, or article in the reporting period?	II. you for a speech, a	
			If yes, complete and attach Schedule VI.			If yes, complete and attach Schedule I.	ff yes, complete	_
	₹	tin 1985	Did you, your spouse, or a dependent child receive say reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt?	Yes V No Vi. at	g _v salaries or fees) of \$200	Did you or your spouse have "earned" income (e. or more from any source in the reporting period?	Did you or your sp	
			TIONS	F THESE QUES	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	INFORMATION .	PRELIMINARY	· _ ·
	do dayo			Termination	Amendment	Annual (May 15)	Type (*	
	of see	more than 30 days	Termination Date:					-
	be assessed against	be assessed agai	Sensity Tay New Property and September 1980, a	Employee	Italives District: 25	House of Representatives	Status	
;	A \$200 penalty shall	\$200 pena	Employing Office:	Officer Or	State: FL	1	Filer	
'n	(Office Use Only)	(Office U	(Daytime Telephone)		(Full Name)	(i		
	013 MAY 15 AM 10: 43	IMAY 15	2013		Mario Diaz-Balart	Mario		_
Z C	LEDISLATIVE RESOURCE CENTER	ATIVE RE	TEB:ST					
J	DELIVERED	DEL	FORM A Page 1 of 7 For use by Members, officers, and employees	IVES	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT	ATES HOUSE AR 2012 FINANCIAL	UNITED ST.	
	[>]							7

SCHEDULE I - EARNED INCOME

Name Mario Diaz-Balart

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during the preceding calendar year. For a spouse, list \$1,000.	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.	source for other spouse earned income exceeding
Source	Туре	Amount
SEED Foundation, Miami, Florida	Spouse Salary	N/A
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	BLOCK A	BLOCK B	вгоск с	BLOCK D	BLOCKE
Ass	Asset and/or income Source	Year-End	Type of Income	Amount of Income	Transaction
identify (a) each value exceeding reportable asso	identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in	Value of Asset	Check all columns that apply. For retirement accounts that do not allow you to choose	For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column.	Indicate If asset had purchases (P), sales (5), or
Provide compie	Provide complete names of stocks and mutual funds (do not use ticker symbols.)	you use a valuation method other than fair	generate tax-deferred income (such as 401(k) plans or IRAs).	category of income by checking the appropriate box below.	exceeding \$1,000 in reporting year.
Row all IDA-	cather restrement plane (such as Andri) plane) remaids the value for	market value, please	you may check the "None"	Dividends, interest, and capital	
each asset held	For all lifus and case reprenent pans (auch as 401(s) parts) provide the value by each asset held in the account that exceeds the reporting thresholds.	specify the method used.	and capital gains, even if	disclosed as income. Check	
For rental or oti a description, a	For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and a city and state.	the reporting year and is included only because it	se income. Check "None" if the asset generated no income during the reporting period	or generated. * This column is for income	
For an ownership in state the name of the location in Block A.	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.	* This column is for assets		generated by assets held solely by your spouse or dependent child.	
Exclude: Your p (unless there we \$5,000 or less in in, or income de Savings Plan.	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	or dependent child.			
If you so choose, you may indi- spouse (SP) or dependent chik optional column on the far left.	If you so choose, you may indicate that an asset or income source is that of your aposes (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left.				
For a detailed discu instruction booklet.	For a detailed discussion of Schedule fil requirements, please refer to the instruction booklet.				
SP	Roth IRA-Fidelity Cash Reserves Fidelity Magellan	\$1,001 - \$15,000	TAX-DEFERRED	\$1,001 - \$2,500	N/A
	State of Florida Pension(not self directed)	unknown	None	NONE	N/A

SCHEDULE V - LIABILITIES

Name Mario Diaz-Balart

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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 sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. 'This column is 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 year. 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 it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances; for liabilities held solely by your spouse or dependent child.

SP,		Date Liability		
7	Creditor	Incurred	Type of Liability	Amount of Liability
	Greentree	August 2005	Mortgage on personal residence, Miami, Fl.	\$250,001 - \$500,000
	Bank of America-Paid off	July 2004	Mortgage on personal residence, Washington DC	\$100,001 - \$250,000
	Credit Union Mortgage Association	August 2012	Mortgage on personal residence, Washington DC	\$100,001 - \$250,000
	Bank of America	May 2006	Line of credit	\$15,001 - \$50,000

SCHEDULE VI - GIFTS

Name Mario Diaz-Balart

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Report the source, a brief description, and the value of all gifts totaling more than \$350 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$134 or less need not be added towards the \$350 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Mario Diaz-Balart for Congress, Miami, Florida	House Ethics Committee approved Legal Defense fund donation	\$5,000

SCHEDULE VIII - POSITIONS

Name Mario Diaz-Balart

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Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board member(unpaid)	Congressional Hispanic Leadership Institute
Vice President(unpaid)	124 D Street Condominium Association
Board member(unpaid)	National Association of Latino Elected & Appointed Officials

SCHEDULE IX - AGREEMENTS

November 2002

State of Florida

Name Mario Diaz-Balart

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Pension for service in State Legislature