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| EXEMPTION —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. | 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 dependent child? | IPO—Did you purchase any shares that were allocated as a part of an Initial Public Offering? | EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION | V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? No If yes, complete and attach Schedule V. | IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV. | III. 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 III. | II. 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? If yes, complete and attach Schedule II. | 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? Yes No If yes, complete and attach Schedule I. | PRELIMINARY INFORMATION — ANSWER EACH OF THESE | Status Member of the U.S. State: V.Y. House of Representatives District: 10 En Report Type Annual (May 15, 2013) Amendment | Could Lewis IN WALLET | | UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT |
| a, transactions, or liabilities of a spouse or dependent child because Yes No X | cs and certain other "excepted trusts" need not be disclosed. Have you Yes No | ring? Yes No X | ORMATION — ANSWER EACH OF THESE QUESTIONS | Each question in this part must be answered and the appropriate schedule attached for each "Yes" response. | IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX. No X | VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII. Ves No | | VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)? If yes, complete and attach Schedule VI. | HESE QUESTIONS | Officer or Employing Office: A \$200 penalty shall be assessed against anyone who files more than Termination | (Office Use Only) | , - | Form A For use by Members, officers, and employees |

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SCHEDULE I—EARNED INCOME

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.

| | | | | | | | | New York State Employee Retirement System | Ontario County Board of Education | Examples. Civil War Roundtable (Oct. 2nd) | | Keene State | Source |) [[] [] [] [] [] [] [] [] [] |
|--|--|--|--|--|--|-----------------------|----------------|---|-----------------------------------|---|---------------------|-----------------------|--------|---|
| | | | | | | Spouse Consulting Fee | Spouse Pension | Pension | Spouse Salary | Spouse Speech | Legislative Pension | Approved Teaching Fee | Туре | |
| | | | | | | 3000 | NA | 20,383 | NA | \$1,000 | \$9,000 | \$6,000 | Amount | 1 |

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| SP JP Morgan Chase | HSBC Bank | · | Examples: | SP SP Mega Corp. Stock | 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 room, a federal retirement program, including the Thrift Savings Plan. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet. | 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. | 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. | 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 ticker symbols.) | 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 "unearned" income during the year. | Asset and/or Income Source | BLOCK A |
|--------------------|-----------|---|------------|------------------------|---|---|--|---|--|--|----------------------------|---------|
| > | X | × | Indefinite | × | None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$25,000,000 Over \$50,000,000 Spouse/DC Asset over \$1,000,000* | P B C C C C C C C C C C C C C C C C C C | | * This column is for assets held solely by your spouse or dependent child. | If an asset was sold during the reporting year and is included only because it generated income, the value should be "None." | Indicate value of asset at close of reporting year if you use a valuation method other than fair market value, please specify the method used. | Value of Asset | вгоск в |
| × | X | × | | × | NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income) | come) | reporting period. | vested, must be disclosed as income. Check "None" if the asset generated no income during the | IRAs), you may check the "Tax- Deferred" column. Dividends, inter- est, and capital gains, even if rein- | Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or | Type of Income | BLOCK C |
| | X | × | | × | None \$1 - \$200 \$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 Spouse/DC Income over \$1,000,000* | - = = = = = = = = = = = = = = = = = = = | ent child. | * This column is for income generated by assets held solely by your spouse or | | For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest . | Amount of Income | BLOCK D |
| | | | | S (partial) | Nollows: (S) (partial) See below for example. P, S, E | portion of an asset is sold, please indicate as | If only a | | \$1,000 in reporting | asset had purchases (P), sales (S), or exchanges (E) exceeding | Transaction | BLOCK E |

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SCHEDULE V— LIABILITIES

residence (unless it is rented out or you 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 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 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 close of the preceding calendar year exceeded \$10,000. *This column is for liabilities held solely by your spouse or dependent child.

| | | _ | | | | _ | | | |
|---|---------------------|--------|--|---------------------------------------|----------------------------|--------------------|---------|------------------------------------|---|
| | | K | Spouse/DC Liability Over \$1,000,000" | | | | | - | |
| | | 7 | Over \$50,000,000 | ٠ | | | | | |
| | | - | \$25,000,000 \$50,000,000 | | | | | | |
| | | Ξ | -100,000,22 \$5,000,000 | | | | | | |
| | Amount of Liability | Ø | -100,000,1\$ -000,000,2\$ | | | | | | |
| | t of L | ш | -100,000,1\$ | | | | | | |
| | mom | ш | \$520'001- | | X | | | | |
| | ۷ | ٥ | \$100,001- \$250,000 | × | | | | - | |
| | | ပ | \$20,001- | | | | | | |
| | | 8 | -100,81\$ 000,03\$ | | | | | X | |
| ١ | | ٧ | \$10,001- | | | | | | |
| | | | Type of Liability | Mortgage on 123 Main St., Dover, DE | Martiege or 315 W, 70 St., | Now York N.Y 10023 | ast, 30 | Revoluing Credit Card | |
| | 200 | i pare | Incurred Mo/Year | May 1998 | 105 mg/ | | | Dec 2010 | * |
| | | | Creditor | Example: First Bank of Wilmington, DE | IT Wells Favor Bank | | | Chase Credit and Services Decisors | |
| | | | S. C.C. | | 77 | , | | 35 | |

SCHEDULE VI— GIFTS

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 \$140 or less need not be added towards the \$350 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

| | Description | Value | |
|---|---|-------|--|
| Example: Mr. Joseph H. Smith, Anytown, Anystate | Silver Platter (determination on personal friendship received from Committee on Ethics) | \$375 | |
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SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$350 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly 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 (5 U.S.C. §7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a or were paid by you and reimbursed by the sponsor.

spouse or dependent child that is totally independent of his or her relationship to you

| Source | Date(s) | City of Departure—Destination— City of Return | (Y/N) | Food? (Y/N) | Was a Family Member Included? (Y/N) | Number of days not at sponsor's expense |
|---|-----------|--|-------|----------------|---|---|
| Examples: Chicago Chamber of Commerce | Mar. 2 | DC—Chicago—DC | z | z | Z | None |
| Roycroft Corporation | Aug. 6–11 | DC—Los Angeles—Cleveland | Υ | Y | Υ | 2 Days |
| Jewish Community Relations Council of New York (J.C.R.C.) | Feb 18-26 | Newark, NJ-Tel Aviv Nework | ٧ | ٧ | Y | 3 days |
| | Aug 11-20 | NY-Brussels-Paris-NY | ~ | Y | Ϋ́ | 3 days |
| | Sept 8-11 | NY-Tel Aviv - NY | Y | ~ | Z | None |
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SCHEDULE VIII—POSITIONS

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organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

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

| Member, N.Y Bd. of Dir. | National Vice President Brai Zion Foundation Chair East of Hudson Rail | Position |
|-------------------------|---|----------------------|
| Anti-Defamation League | Busi Zion Foundation East of Hudson Rail Freight Task Force | Name of Organization |
| (ancompensated) | (uncompensated) | 3 |

SCHEDULE IX—AGREEMENTS

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 | | | | | |
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| Parties To | i | | | i | |
| s To | | · | | | |
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| Terms of | * 0. | i | | | |
| Terms of Agreement | | |] | | |
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