HAND DELIVERED

neet all Yes No X	int child because they meet all	r liabilities of a spouse or your dependent chi	rned" income, transactions, cuted with the Committee on E	EXEMPTION – Have you excluded from this report any other assets, 'unearned' income, transactions, or liabilities of a spouse or your depende three tests for exemption? Do not answer 'yes' unless you have first consulted with the Committee on Ethics.
led from Yes No No	Have you excluded from	osed.	mittee on Ethics and certain c ant child?	TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be discithis report details of such a trust that benefits you, your spouse, or dependent child?
contact Yes No No	to this question, please contact		al Public Offering during the r	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" the Committee on Ethics for further guidance.
E QUESTIONS	H OF THESE	ORMATION - ANSWER EACH OF	NT, OR TRUST INFORMATION -	IPO AND EXCLUSION OF SPOUSE, DEPENDENT,
NDING SCHEDULE IF YOU ANSWER "YES"	NG SCHEDU	E CORRESPO	Yes No	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?
g the Yes No	make a donation to charity in earance, or article during the	I. Did any individual or organization make a lieu of paying you for a speech, appearance reporting period?	Yes No	D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?
ny Yes No No	endent child receive any for travel totaling more than uring the reporting period?	100	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?
ny Yes No	pendent child receive any \$375 in value from a single	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$375 in value from a singl source during the reporting period?	Yes No	B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period?
with an Yes No	or arrangement w	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?	Yes No	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?
			THESE QUESTIONS	PRELIMINARY INFORMATION - ANSWER EACH OF T
	rmination te of Termination:	Termination Date of Termination	Amendment	REPORT 2015 Annual (Due: May 16, 2016)
	ice:	Officer or Employing Officer Employee	NV	FILER Member of or Candidate for State: \(\square\) STATUS U.S. House of Representatives District:
(Unice Use Only) U.S. HOUSE OF REPRESENTED A \$200 penalty shall be assessed against any individual who files more than 30 days late.	A \$200 penal individual wt	Daytime Telephone: <u>Wン-</u> 275-2子い	Daytime Telep	Name: Alex X. MOOREY
2016 MAY 16 AM 10: 02	701	Form A For Use by Members, Officers, and Employees		UNITED STATES HOUSE OF REPRESENTATIVES 2015 FINANCIAL DISCLOSURE STATEMENT
֭֡֝֝֝֝֜֜֜֝֝֓֜֜֝֓֓֓֓֓֓֓֓֓֓֓֓֡֓֜֜֜֓֓֓֓֡֓֜֜֡֓֡֓֡֡֡֡֡֓֜֡֡֡֡֡֡	J			

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Alex X. Moorey Page 2

Ledmiscs Lacas	ifid Puritain	L Ambads For o Pack GRED	LAmfeds for Foldam Rb	LAmicent East Inst	mo supp. Retirement	ABC Hedge Fund X	Examples:	SP Mega Corp. Stock EF	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 left. For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	If you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box.	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income duning the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	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 and other real property held for investment, provide a complete address or description, e.g., rental property, and a city and state.	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 all IRAs and other retirement plans (such as 401(x) 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).	production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income that generated more than \$200 in "unearned" income during the year.	Identify (a) each asset held for investment or	BLOCK A BLOCK A
		14 1	*	×			Indefinite	x	None \$1-\$1,000 \$1,001-\$15,000 \$15,001-\$50,000 \$50,001-\$100,000 \$250,001-\$250,000 \$500,001-\$1,000,000 \$1,000,001-\$25,000,000 \$25,000,001-\$50,000,000 \$25,000,001-\$25,000,000 \$25,000,001-\$25,000,000 \$25,000,001-\$25,000,000	000.000*				> 00 C C C C C C C C C C C C C C C C C C		you have no interest.	valuation method other than fair market value, please specify the method used. used. If an asset was sold during the reporting period and is included only because it generated income, the value should be "None." *Column Mais for assets hold however services or dependent which in which	Indicate value of asset at close of the reporting period. If you use a	BLOCK B
4	4	4	*	~		Partnership income	Royaltes	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUS TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership		arm Income)					if the asset generated no income during the reporting period.	generate tax-deferred income (such as 40') 529 accounts), you may check the Ta column. Dividends, interest, and cap even if reinvested, must be disclosed for assets held in taxable accounts. Ch	Check all columns that apply. For ac	BLOCK C
4	7	7	4	-		×	×	×	\$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-\$5,000,000 Cver \$5,000,000	orne over \$1	,000,000*				In which you have in meres.			All For assets for which you checked "Tax-Deferred" in Block C, you	BLOCK D
								S(part)	P, S, S(part), or E					Leave this column blank if there are no transactions that exceeded \$1,000.	an asset was sold, please indicate as follows: (S (part)).	period. If only a portion of		Indicate if the	BLOCKE

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	Lyngramstrakinstra LyngramaCapirdy Inst Pis Lyngra SmCapirdy Inst TIAA Cref Annuity TIAA Traditional	TROUNDANAGEN AND SEA		BLOCK A Asset and/or Income Source	SCHEDULE A - ASSETS & "UNEARNED INCOME"
			None >		Σο
			\$1-\$1,000 œ		Ş
- - - - - - - - - -		4 ×	\$1,001-\$15,000		Ē
	XX	11	\$15,001-\$50,000		Ź
 			\$50,001-\$100,000 m	_{<}	Ē
 			\$199,001-\$250,000 m	BLOCK B) =
† 			\$250,001-\$500,000 @	BLOCK B	NC.
1 1 1 1 1			\$500,001-\$1,000,000 ±	(B	Ş
			\$1,000,001-\$5,000,000		μ
			\$5,000,001-\$25,000,000		-
			\$25,000,001-\$50,000,000		
			Over \$50,000,000	1	
			Spouse/DC Asset over \$1,000,000°		
			NONE		Z
			DIVIDENDS		Name:
			RENT		
			INTEREST	BLOCK C	Alex Y.
			CAPITAL GAINS	at CC	%
		<u> </u>	EXCEPTED/BLIND TRUST	BLOCK C	
	* X X X X X X X X X	└'^ 	TAX-DEFERRED	Ð.	3
			Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		NOONCU
	XX X X7	44	None		36
		_	\$1-\$200 =		•
┝╼╄╼┼┼┼┼			\$201-\$1,000 =		
	1-		\$1,001-\$2,500 <	A _m	
╂┈┼┈┼	 			BLOCK D Amount of Income	
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+++++	+		\$1,000,001-\$5,000,000 × Over \$5,000,000 ×		
++++	╂╌╂╌╂╌╂╌╀	1	Spouse/DC Asset with Income over \$1,000,000°		
		1 1			약
			S, S(part), or E	BLOCK E Transaction	ا م

SCHEDULE B - TRANSACTIONS

Name: Alex + Mouncy Page A of

														Sp Example Mega Corp. Stock	SP, DC, JT Asset	Capital Gains: If a sales transaction resulted in a capital gain in excess of \$200, check the 'capital gains' box, unless it was an asset in a tax-deferred account, and disclose the capital gain income on Schedule A. *Column K is for assets solely held by your spouse or dependent child.	dependent child for investment or the production of income. Include transactions that resulted in a capital loss. Provide a binet description of an exchange transaction. Exclude transactions between you, your spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated rental income, if only a portion of an essel is sout, please choose 'partial sales' as the type of transaction.	Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the reporting period of any security or real property held by you, your spouse, or your
				-								_				Purchase		_
												 				Sale		Type of Transaction
														×	_	Partial Side		ransact
				-					 			 -				Exchange		ğ
									 					×		Check Box if Cap Exceeded \$200	ital Gain	
														3/5/15		Monthly, or Bi- weekly, if applicable	(MO/DAYR) or Quarterly,	Date
Г							_									\$1,001- \$15,000	>	
														×		\$15,001- \$50,000	60	
																\$50,001- \$100,000	a	
																\$100,001- \$250,000	0	Ą
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	 											 				\$5,000,001- \$25,000,000	I	╛
		 <u> </u>			<u> </u>	-										\$25,000,001- \$50,000,000	_	
		 						_								Over \$50,000,000) _	
																Over \$1,000,000* (Spouse/DC Asse	, (회) 주	

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 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.	
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INCOME LIMITS and PROHIBITED INCOME: The 2015 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,225. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were totally prohibited.

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

								Examples:			
							Ontario County Board of Education	Civil War Roundlable (Oct. 2)	Keene State	Source (include date of receipt for honoraria)	The state of the s
					22222222		Spouse Salary	Spouse Speech	Approved Teaching Fee	Туре	
							N/A	\$1,000	\$6,000 \$18,000	Amount	

SCHEDULE D - LIABILITIES

Name: AYEX +. NOOKUY
Page 6 of 0

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 yours pouse. 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, DC, JT	•	
5	Calib	Example			
Creative Control of the Control of t	Caliber Home Loans L primary residence	First Bank of Wilmington, DE	Creditor		
	वामाड	5/98	Date Liability Incurred MO/YR		
	alialis mortopaje	Mortgage on Rental Property, Dover, DE	Type of Liability		
			\$10,001- \$15,000	>	
			\$15,001- \$50,000	œ	
			\$50,001- \$100,000	C	
		×	\$100,001- \$250,000	O	
			\$250,001- \$500,000	m	moun
			\$500,001- \$1,000,000	71	t of Li
			\$1,000,001- \$5,000,000	စ	Amount of Liability
			\$5,000,001- \$25,000,000	I	
			\$25,000,001- \$50,000,000	_	
			Over \$50,000,000	۲	
			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 religious, social, fratemal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

			Position Name of Organization
			Name of Organization

SCHEDULE F - AGREEMENTS

Name: Alex X. Mooney Page_ 9

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	Parties to Agreement	Terms of Agreement
vested 2006	myself a state of Norryland	Legislative Pension Plan Porticipoint
:		

SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$375 received by you, your spouse, or your dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality from 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 \$150 or less need not be added towards the \$375 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

TOTAL TOTAL TOTAL CONTROL CONT	now the active complete the for a monthly trace. The girt and a property of profitting acceptance of girt and a property of the companies of t	
Source	Description	Value
Example: Mr. Joseph Smith, Arlington, VA	Silver Platter (determination of personal friendship received from the Ethics Committee)	\$400
		,

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

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Identify the source and list travel itinerary, 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 filler.

•						
	Government of China (MECEA)	Aug. 6-11	DC-Bejing, China-DC	۲	~	z
Examples:	Habitat for Humanity (charity fundralser)	Mar. 3-4	DC-Booken-DC	Υ	4	γ
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SCHEDULE I – PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

Name: ALEX Y. MOORLY
Page A of A

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of paying an honorarium to you. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics. Examples: Association of American Associations, Washington, DC XYZ Magazine Source Activity Speech Article Feb, 2, 2015 Aug. 13, 2015 Date Amount \$2,000 \$500