इं	Yes	pendent child	ties of a spouse or dependent child ommittee on Ethics.	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or obscause they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics	arned" income, t	ner assets, "une swer "yes" unles	report any oth on? Do not and	ded from this s for exemptic	EXEMPTION —Have you excluded from this report any other assets, because they meet all three tests for exemption? Do not answer "yes"	EXEMPTION- because they r
S	Yes 🖸	ot be	epted trusts" need no	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 a dependent child?	nittee on Ethics a	ed by the Comn th a trust benefit	rusts" approved	alified Blind Tom this report	ails regarding "Qu e you excluded fro	TRUSTS - Det
S	QUESTIONS)F THESE (ANSWER EACH OF THESE QUESTIONS	1	T INFORM	OR TRUS	ENDENT,	ISE, DEP	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	EXCLUSIO
	esponse.	each "Yes" re	ule attached for each "Yes" response.	sched	and the appropriate	part must be answered	oart must b	n in this p	Each question in this	
8	Yes 🗸	\$5,000 from	pensation of more than so prior years? ach Schedule VI.	VI. Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, complete and attach Schedule VI.	No S	Yes	e any report- ng period?	ident child have ing the reportin ule III.	III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule III.	III. Did you, your able liability (mor If yes, complete
S S	Š Q	rangement	ortable agreement or arrangement tach Schedule V.	V. Did you have any reportable agreemen with an outside entity? If yes, complete and attach Schedule V.	No S	Yes	ive "unearned" r hold any of the period?	dent child recei orting period or 000 at the end ule II.	II. 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 II.	II. Did you, your income of more t reportable asset if yes, complete
□ No.	Yes 🖸	x two years?	ortable positions on or before the dallendar year or in the prior two years?	Did you hold any rep filing in the current ca /es, complete and at	No IV.	Yes 🖸	g., salaries or ing period?	led" income (e. led" in the report	 Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule 1. 	I. Did you or you fees) of \$200 or r
				QUESTIONS	EACH OF THESE		- ANSWER	MATION	PRELIMINARY INFORMATION — ANSW	PRELIMINA
							S on blook int		leman tump of order	li all applicant
who files	· – e	A \$200 penalty shall be against any individua more than 30 days late	Check if Amendment	h132/20/11	Date of Election:	Office:	State: 7417 District: 7	Candidate for the House of Representatives New officer or	Candidate for the House of Repression New officer or employee	Filer Status
ATIVES	T9 ±±	M.S. HOWSE		elephone	Daytime Telephone			masman	Adam Kiwa	Name: A
Page 1 of 6	SOURCE	LEGISLATIVE RE	B Ind new employees	FORM E	For	ATIVES	PRESENTATIVEMENT	E OF REI	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 20/2 - 15, 20/4"	UNITED ST FINANCIAI Period cover

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name ADAM KWASMAN

Page 2 of 5

ist 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 nore 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.	
ore 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 xceeding \$1,000. See examples below.	t 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
xceeding \$1,000. See examples below.	are 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
	xceeding \$1,000. See examples below.

ore 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 seeding \$1,000. See examples below. Seeding \$1,000. See examples below.	t 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
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Exclude: Military pay (such as National Guard or Heserve pay), federal retirement programs, and benefits received under the social Security Act. Amount	T	S received under the oodial oed	eculity Act.
Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
STATE & ARIZONA PHOENIS, AZ	Silver	\$ 17.37	\$ 38,141,24

		MA		DC, Examples: Simon & Schuster	SP Mega Corp. Stock	For an ownership interest in a privately-held 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); any deposits totaling \$5,000 or less in personal checking or savings accounts; and any financial interest in, or income derived from, 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 II requirements, please refer to the instruction booklet.	BLOCK A Asset and/or Income Source Identity (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. Provide complete names of stocks and mutual funds (do not use ticker symbols). 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. For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and the city and state.
			×	Indefinite	×	\$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 - \$5,000,000 \$26,000,001 - \$50,000,000 \$26,000,001 - \$50,000,000 \$26,000,001 - \$50,000,000 \$26,000,001 - \$50,000,000 \$26,000,001 - \$50,000,000 \$26,000,001 - \$50,000,000	Indicate value of Asset 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. If an asset was sold during the reporting year and is included only because it generated income, the value should be "None." *This column is for assets solely held by your spouse or dependent child. A B C D F F G H I J K L M
			×	Royalties	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	Type of Income 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 IRAs), you may check the "Tax-Deferred" column. Dividends, interest, and capital gains, even if reinvested, must be distolated as income. Check "None" if the asset generated no income during the reporting period.
				×	×	None	Amount of Incc For assets for which you checked "Tax-Decheck the "None" column. For all other ass income by checking the appropriate box and capital gains, even if reinvested income. Check "None" if no income was: * This column is for income derived from spouse or dependent child.

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name ASAM KW

KWASMAN

Page 4 of 6

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SCHEDULE III — LIABILITIES

Name ADAM KWASMAN

Page S of 6

owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); 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 sib-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 ling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000.

		;	
			\
		NA	
×	Mortgage on 123 Main Street, Dover, DE	Example: First Bank of Wilmington, DE May 1998	Example:
\$15,001— \$50,001— \$100,000 C \$100,001— \$250,000 m \$250,000 m \$500,000 m \$5,000,000 C \$1,000,000 C \$5,000,000 C \$25,000,000 C \$25,000 C \$25	Type of Liability	Date Liability Incurred mo/year	SP, DC, JT
Amount of Liability			

SCHEDULE IV — POSITIONS

Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an offiany nonprofit organization, any labor organization, or any educational or other institution other than the United States cer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise,

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

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Position	Name of Organization
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SCHEDULE V -- AGREEMENTS

Name ADAM XWISHAN

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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.
7 🖺

City Picti	Constitution of the second of	
Date	Parties To	Terms of Agreement
ام م	LEGEND ERMILES CORP.	FUTURE CARROYANT + CERT OF ADMINE

SCHEDULE VI — COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the *two* prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. Government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule I.

COORTINATE OF THE PROPERTY OF	
Source (Name and Address)	Brief Description of Dutles
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services