mination:		15		
-	Amendment 2007	X	2015 Annual (Due: May 16, 2016)	REPORT
, se	Officer or Employing Office:	State: NC District: 3	Member of or Candidate for U.S. House of Representatives	FILER STATUS
U.S. HUUSE WE KERKESENTATIVES  A \$200 penalty shall be assessed against any individual who files more than 30 days late.	Daytime Telephone: <u> </u>	_ 	Name: Walter B. Jones	Name:
(Office Use Only)				
LEGISLATIVE RESTURCE OFFICE  2016 AUG 12 PM 4: 22	Form A For Use by Members, Officers, and Employees	ITATIVES	UNITED STATES HOUSE OF REPRESENTATIVES	ONITED :
HAND				

# PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

Yes No X	ther "excepted trusts" need not be disclosed. Have you excluded from	mittee on Ethics and certain of ent child?	TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be this report details of such a trust that benefits you, your spouse, or dependent child?
Yes No X	sporting period? If you answered "yes" to this question, please contact	al Public Offering during the re	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.
ESTIONS	ORMATION - ANSWER EACH OF THESE QUESTIONS	NT, OR TRUST INF	IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWE
YOU ANSWER "YES"	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	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?
Yes No X	I. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the 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?
Yes No X	<ul> <li>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?</li> </ul>	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?
Yes No X	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?	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?
Yes No X	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: <ul> <li>a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or</li> <li>b. Make more than \$200 in unearned income from any reportable asset during the reporting period?</li> </ul>

**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.

Yes

₹ |X

## SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Walter B. Jones

Page 2

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Medico Health Solutions Study	Bis key Stack	Investore Title Co. Stock	Solvenheak Stock ("L'Stock")	Nucor Stock	BB ST Stock	ABC Hedge Fund X	Examples: Simon & Schuster	SP, Mega Corp. Stock Elf	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 rental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and state.  For an ownership interest in a privately-held business that is not publicly traded, state the name of the geographic location in Block A.  Exclude: Your personal residence, including second homes and vacation homes (urless there was rental income during the reporting period); and any financial interest in, or income derived from, a federal refirement program, including the Thrift Savings Plan.  If you have a privately-traded fund that is an Excepted Investment Fund, please check the "EIF" box.  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.	BLOCK A  Asset and/or income Source  Identify (a) each asset held for investment or 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 'unearmed' income during the year.  Provide complete names of stocks and mutual funds (do not use only ticker symbols).  For all IRAs and other retirement thans (such as 401(ft) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.
<b>X</b>		×	*	*	*	×	Indefinite	×	None \$1-\$1,000	BLOCK B  Value of Asset  I you use a did.  d.  an asset was sold during the reporting period and is included only cause it generated income, the value should be "None."  Jumn M is for assets held by your spouse or dependent child in which have no interest.
	<b>X</b>	*	<b>X</b>	×	<b>X</b>	Partnership Income	Royanes	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	BLOCK C  Type of Income  Check all columns that apply. For accounts that generate tax-deferred income (such as 401(4), IRA, or 529 accounts), you may check the Tax-Deferred column. Dividends, Interest, and capital gains even if reinvested, must be disclosed as income for assets held in taxable accounts. Check None if the asset generated no income during the reporting period.
×		*	<b>X</b>	X	×	×	×	×	None       -         \$1-\$200       =         \$201-\$1,000       =         \$1,001-\$2,500          \$2,501-\$5,000          \$6,001-\$15,000       ≤         \$15,001-\$60,000       ≤         \$10,001-\$100,000       ≤         \$1000,001-\$1,000,000       ×         \$1,000,001-\$5,000,000       ×         Spouse/DC Asset with Income over \$1,000,000*       ×	Amount of Income  Amount of Income  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, and capital gains, even if reinvested, Dividends, interest, and capital gains, even if reinvested must be disclosed as income for assets held in taxable accounts. Check "None" if no income was earned or generated.  "Column XII is for assets held by your spouse or dependent child in which you have no interest.
								S(part)	Leave this column blank if there are no transactions that exceeded \$1,000.	BLOCK E  Transaction Indicate if the asset had purchases (P), sales (S), or exchanges (E), exceeding \$1,000 in the reporting period. If only a portion of an asset was sold, please indicate as follows: (S (part)).

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		of mythal funds	"Mover)can Fuels" family	done are part of the	Note: All funds listed		Whishington Muchael Inches Fan	Jovestowst Ca of America Fad	Jacobs Fuel of Amelica	Growth Treed of Pression	Turning States Tours	Europacitie Grant Fund	Capital Second Builds Fund	Bond Fund of America	American Balances Fugo	ASSET NAME EF			BLOCK A Asset and/or Income Source	SCHEDOLE A - ASSETS & "UNEARNED INCOME"
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												m	m		P, S, S(part), or E		BLOCK E Transaction	8

SCHEDULE B - TRANSACTIONS Name: Walter B. Jones

								shares in Kraft Tools stock	existing Altria stock holders received	new company - Kraft boods - and	Altria Stock: Altria span off a	+ Reinventon of Copin Gain	Growth Fund of America	Visteon Stock	Pythan New Opportunities Fund	SP Example Mega Corp. Stock	SP, DC, JT Asset	*Column K is for assets solely held by your spouse or dependent child.	Capital Gains: It 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.	Exclude transactions between you, your spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated rental incorne. If only a portion of an asset is sold, please choose "partial sale" as the type of transaction.	dependent child for investment or the production of income. Include transactions that resulted in a capital loss. Provide a brief description of an exchange 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
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											412/07		Japlo7	W 3007	11367	3/5/15			weekly, if applicable	(MO/DA/YR) or Quarterly,		Date
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### SCHEDULE C ~ EARNED INCOME

Name: Walter B. Jones Page 6 of

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) total the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.
--

#3,18a.94	Legislative Pension	State of NC
\$1,000 N/A	Spouse Seech Spouse Salary	Examples: Civil War foundtable (Oct. 2) Onlario County Board of Education
\$8,000	Approved Teaching Fee	
Amount	Туре	Source (include date of receipt for honoraria)
totaling \$200 or more during the reporting period. For a spouse, list Security Act. at or above the "senior staff" rate was \$27,225. In addition, certain prohibited.	rnment) totaling \$200 or more during the below. Social Security Act. risated at or above the "senior staff" rate totally prohibited.	List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) 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 S  INCOME LIMITS and PROHIBITED INCOME: The 2015 limit on outside earned income for Members and employees compensated types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were totally

#### SCHEDULE D - LIABILITIES

Name: Walter B. Jones

Page 7 of 8

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.

			SP, DC, JT		
		Example			
		First Bank of Wilmington, DE	Creditor		
		5/98	Date Liability Incurred MO/YR		
		Mortgage on Rental Property, Dover, DE	Type of Liability		
			\$10,001- \$15,000	>	
			\$15,001- \$50,000	<b>w</b>	
			\$50,001- \$100,000	C	
		х	\$100,001- \$250,000	D	
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			\$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

Position Name of Organization		Name of Organization
Board of Directors	East Carolina Vocational Center	(enter

Name: Walter B. Joines

Page\_8\_ of 8

							_	NOTE NUMBER
						option was not available to be selected.	On Schedule B, sale of Visheon stock was actually for less than \$1,000, but that	NOTES