assessed who files		A \$200 pen against any more than 3 more than 3 more than 3 more than 3 s,000 from \$5,000 f	Filer    Candidate by the Status   Candidate by the   Candidate by Shall be assigned for property   Candidate by   Candi		Yes Ves Ves Ves Ves Ves Ves Ves Ves Ves V	Filer Status  Candidate for the District	Candidate for the Status  Status  New officer or Employing In all sections, please type or print clearly in blue or black ink.  In all sections, please type or print clearly in blue or black ink.  I. Did you or your spouse have "earned" income (e.g., salaries or frees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.  II. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 at the end of the period? If yes, complete and attach Schedule II.  III. Did you, your spouse, or a dependent child have any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule 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.  Each question in this part must Each Question in this part must Each Ave you excluded from this report details of su EXEMPTION—Have you excluded from this report any of because they meet all three tests for exemption? Do not a	Filer Status In all sections, p  PRELIMIN  1. Did you or you fees) of \$200 or if yes, complete II. Did you, your income of more treportable asset if yes, complete liability (moi tryes, complete liability (moi tryes)).
ERK VIATIVES	U.S. HOUSE OF REPRESENTATIVES	U.S. HOUS		Daytime Telephone:	ENTHY D	SALSTEPHEN ROS LILIENTAN	AL STEPH	Name:
Page 1 of C	OCT 25 2013 Page 1 of LEGISLATIVE RESOURCE CENTER 2013 OCT 30 AM 11: 51	2013 C	FORM B didates and new employees	FOR use by candidate	ATIVES 30 2013		UNITED STATES HOUSE OF REPRESE FINANCIAL DISCLOSURE STATEMENT Period covered: January 1,2012-1 SPP	UNITED ST FINANCIAI Period cover

## SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name Name
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Acres
TICKN THAC

Page 2 of 6

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	rement programs, and benefits re	benefits received under the Social Security Act.	Security Act.
Source (include date of receipt for honoraria)	Type	Amount	unt
לימוס ממים עו ימיפוליו עו ועיומים מוש)	, y po	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
Examples: First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
ADVENTURE TOURS INTI/USA, LLC	BEFORE EXPENSES	54,147,93	74,631

				Examples:	SP, SP Mega Corp. Stock	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.	Exclude: Your personal residence, including second	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	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.	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
			×	Indefinite	×	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 - \$5,000,000 \$5,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$5,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 Spouse/DC Asset over \$1,000,000*		A BB C C D FF G H	*This column is for assets solely held by your spouse or dependent child.	it generated income, the value should be "None."	if an asset was sold during the report- ing year and is included only because	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	BLOCK B
			×	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	ome)		during the reporting period.	if reinvested, must be dis- closed as Income. Check "None" if the asset generated no income	plans or IRAs), you may check the "Tax-Deferred" column. Dividends, interest and control cains, even	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))	Type of Income	вгоск с
			×		×	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*	II III IV V VI VIII VIII X X XI XII II	Current Year		spouse or dependent child.	income. Check "None" if no income was earned or generated	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. <b>Dividends, Interest, and capital gains, even if reinvested, must be disclosed as</b>	Amount of Income	вгоск р
			×	×	×	\$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000*		Preceding Year		HOIII ASSEIS SOIEIY HEID DY YOU!	was earned or generated.	ked "Tax-Deferred" in Block C, you may all other assets, indicate the category of priate box below. Dividends, Interest, reinvested, must be disclosed as	ncome	D

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Name STEPHEN ROSS LILIENTHAL Page 4 of 6

None   Source   Sou	None   St - \$1,000   St - \$1,001 - \$15,000   C	None   Source   Source   Source   Source   Source   Source   St - \$1,000   St - \$1,000   St - \$1,000   St - \$50,000   St - \$50,000,000   S	None   Standard   Source   Source   Source   Source   Standard	None   >	None   >	Continu	Continuation Sheet (if needed)
None	None > \$1 - \$1,000	None	None   >	None   >	None   >		BLOCK A  BLOCK A  Source
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 - \$5,000,000 \$25,000,001 - \$50,000,000 Over \$50,000,000 Spouse/DC Asset over \$1,000,000 NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income(Specif Partnership Income or Farm Inco	None   \$1 - \$1,000   \$1,001 - \$15,000   \$15,001 - \$15,000   \$50,001 - \$100,000   \$100,001 - \$250,000   \$250,001 - \$500,000   \$250,001 - \$500,000   \$1,000,001 - \$5,000,000   \$1,000,001 - \$5,000,000   \$25,000,001 - \$25,000,000   \$25,000,001 - \$50,000,000   \$25,000,001 - \$50,000,000   \$25,000,000	None   \$1 - \$1,000   \$1,001 - \$15,000   \$15,001 - \$15,000   \$15,001 - \$50,000   \$150,001 - \$250,000   \$250,001 - \$250,000   \$250,001 - \$250,000   \$250,001 - \$500,000   \$1,000,001 - \$5,000,000   \$5,000,001 - \$5,000,000   \$25,000,001 - \$25,000,000   \$25,000,001 - \$25,000,000   \$25,000,001 - \$25,000,000   \$25,000,001 - \$25,000,000   \$25,	None   \$1 - \$1,000   \$1,001 - \$15,000   \$15,001 - \$50,000   \$50,001 - \$100,000   \$100,001 - \$250,000   \$250,001 - \$500,000   \$250,001 - \$500,000   \$100,001 - \$5,000,000   \$1,000,001 - \$5,000,000   \$1,000,001 - \$5,000,000   \$25,000,001 - \$50,000,000   \$25,000,001 - \$50,000,000   \$25,000,001 - \$50,000,000   \$25,000,001 - \$50,000,000   \$25,000,001 - \$50,000,000   \$100,000	None   \$1 - \$1,000   \$1,001 - \$15,000   \$1,001 - \$15,000   \$15,001 - \$15,000   \$15,001 - \$100,000   \$15,001 - \$100,000   \$100,001 - \$250,000   \$250,001 - \$100,000   \$250,001 - \$1,000,000   \$500,001 - \$1,000,000   \$5,000,001 - \$5,000,000   \$25,000,001 - \$25,000,000   \$25,000,000	None   \$1 - \$1,000   \$1,001 - \$15,000   \$15,001 - \$15,000   \$15,001 - \$15,000   \$15,001 - \$10,000   \$15,001 - \$10,000   \$100,001 - \$250,000   \$250,001 - \$250,000   \$250,001 - \$250,000   \$1,000,001 - \$5,000,000   \$1,000,001 - \$5,000,000   \$1,000,001 - \$5,000,000   \$25,000,001 - \$25,000,000   \$25,000,001 - \$25,000,000   \$1,000,0	SP.	
						JT,	
							<b>X</b>

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#### SCHEDULE III — LIABILITIES

Name STEPHEN NOW LICIENTHAL

Page 5 of 6

owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income), loans secured by automobiles, household furni-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. ture, 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-

						SP, DC,
		-	MASTERCARY	AMERICAN EXPRESS	Example: First Bank of Wilmington, DE	Creditor
			San Zoos	SAY 2008	May 1998	Date Liability Incurred mo/year
			CREDIT DARD	CRENT CARD	Mortgage on 123 Main Street, Dover, DE	Type of Liability
						\$10,001— \$15,000
			X	X		\$15,001— \$50,000
						\$50,001— \$100,000 <b>O</b>
					×	\$100,001— \$250,000
						\$250,001— m \$3500,000 m
	:					\$500,001— \$1,000,000 TI
						\$500,000 M S500,000 T \$1,000,000 T \$5,000,000 G \$5,000,000 H \$25,000,000
<u> </u>					-	\$25,000,000 <b>I ₹</b>
					-	\$50,000,000 — Over
-			-		$\vdash$	\$50,000,000 Spouse/DC
	<u> </u>	<u> </u>	<u> </u>	<u></u>	<u>t_</u>	\$1,000,000

#### SCHEDULE IV — POSITIONS

any 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, 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 offi-

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

Docision	
100% OWNER	ADVENTURE TOURS INTO /USA, LLC

### SCHEDULE V — AGREEMENTS

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Page 6 of 6

		_		Date	Identify the date, parties to, and general to service; continuation or deferral of paymer efft plan maintained by a former employer.
			١		parties to, aution or defendation at form
				Parties To	nd general terms of any agreement or arrangement with all of payments by a former or current employer other the er employer.
				Terms of Agreement	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.

# 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; then 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.

_	•			
		Source (I	lame and Address)	Brief Description of Dutles
Exa	Example: [	Doe Jones & Smith, H	Doe Jones & Smith, Hometown, Homestate	Accounting services
			-	
	·			
		/		

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