TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and centain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child? 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.	D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "1) THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED	C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes No No reporting period?	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?	PRELIMINARY INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS	New Officer or Employee Employing Office:	U.S. House of Representatives District: 224 Candidates – Date of Election: 2-7-14	Name: Sason C Zachary Daytime Telephone:	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT For New Memb
ION - ANSWER <u>BOTH</u> OF THESE QUESTIONS nother "excepted trusts" need not be disclosed. Have you excluded from Yes No Very No Illabilities of a spouse or dependent child because they meet all three Yes No Very No Very No	J. Did you receive compensation of more than \$5,000 from a single Yes Vos Source in the current year and two prior years? SCHEDULE IF YOU ANSWER "YES" LES THAT YOU ARE REQUIRED TO COMPLETE	F. Do you have any reportable agreements or arrangements with Yes No	E. Did you hold any reportable positions during the reporting period Yes No or in the current calendar year up through the date of filing?	ESTIONS	Period Covered: Jenuary 1, <u>1017</u> A \$200 penalty shall be assessed against any to <u>10-3019</u> individual who files more than 30 days late.	Check if Amendment (Office Use Only)	U.	FORM B LEGISLATIVE RESOURCE CENTER FOR New Members, Candidates, and New Employees 2014 MAY 21 PM 1: 48

SCHEDULE A -- ASSETS & "UNEARNED INCOME"

' '		_		Z		5	8.4	ą o	m the	T you	otion	Exedu Com	Geogra	#For #	provid		#5,000 #1	F G	or Or	(do no	5	and (b)	producti	_			SC	
	· Alew world	- Growth Fact of Am	401 K	American Fund 5	ABC Hedge Fund X	Simon & Schuster	Mass Com Stock	 detailed discussion of Schedule A ements, please refer to the instruction booklet. 	you so choose, you may indicate that an esset or your source is that of your spouse (SP) or pendent child (DC), or jointly held with anyone (JT), the optional column on the far left.	ou have a privately-traded fund that is an Excepted setment Fund, please check the "EIF" box.	_5* • ₹	clude: Your personal residence, including second thes and vacation homes (unless there was rental one during the reporting period); and any financial one during the reporting period); and any financial one during the reporting period); and any financial one during the period of the	the mate	n ownership interest in a privately-held business a not publicly traded, state the name of the	wide a complete address or description, e.g., mal property," and a city and state.		ng accounts. If the total it y financial institution where to in interest bearing accounts.	venk and other cash accounts, total the amount in	I RAs and other retirement plans (such as plans) provide the value for each esset held in	do not use only ticker symbols).	e during the year.	 b) any other reportable asset or source of e-which generated more than \$200 in 	caseding \$1,000 at the end of the reporting period.		BLOCK A		SCHEDULE A ASSETS &	
					100			None				3.7	Post.	a de la de	i S		A S.	>		child in which you have no interest.	should be None	* 25 E	de estado An moderno				& "UNEARNED INCOME"	;
14.0	メ			100		ndelmie	<u>-</u>	\$1,001-\$1	5,000		4	i.	P os		r Els	Đ.		ဂ (4)		hich you	7	ed only he	ocify the		i		NE A	
	4	メ		7			×	\$60,001-\$			12-14-73	38 B.	vere.		1		W # 75	m		have no		acid during	on method method us	Value Value	m		Z	
3 5	***		282		×			\$250,001							ros.	er is		0		interest		aring the rep	E 6. 0		BLOCK B		Ö	
				026					1-\$5,000,000	7 (5)			25.45	Arit e	- Care	4368		_					2 3		-		NCC	,
2	李林	(<u>\$</u>	. 43					\$25,000,0	01-\$50,000,0	v v		2.5	e Chai		302			.		S Cape		reporting period	fair mark				Ž	
Ž.			23					Spouse/D	C Asset over	\$1,000,00	00°						***			200		od and a	ket value,				3	
100			7 112			ğ	9. +	DIVIDENC		475			10	£.	0	'n,	t y	÷		LOOM		ā	401(k)					
			5 ° E	4		2	×	DIVIDEN				(§ 2).	40 J.	15.	p. 34.		() - (2) () () () () () () () () () () () () () ()			during t			merata tau	_		١.		_
						7 100	ري وال	NTERES	r ora	Com.	息查:	de de	iks.		e io		(4)	4.4		he repor	3	100		Type of Income	BLOCK C		Name:	l
7.58	32		eran ye	E36:3			34.42	EXCEPTE TAXABLE	D/BLIND TRI	JST		# G . # C		9.695	7. N	,30	(g. 1 d. 2)	-8.50		ting perio	aciosed taxasis	gan.	deferred inconcounts), you	псоп	ô		7	ı
R.L.		2 4		28 1.0	Parlment Incor	e e	at n		e of Income (Concilir e	a. Perine	rahio inco	me or Fa	rm Inco	me)	- A	7. ř. ř. ř.			A).	as moom	DIVIDE	me (such	•			\mathcal{K}_{I}	ı
E			313		1		(A) (A)	286.000	1 245	ir t	3 A.F	7.3		87		ryisa	60.34	E C	┢	Š	~;		4 1 1 9 7		-		ras	ı
3.18	3			52.5		(a)	×	\$1-\$200 \$280-\$1.					2.3			araze Sala		III			Column XII is	*	casets for				5	l
	7.33		EA S					\$1,001-\$2	,500			2.3				4	Z	-			te for se	Check N	ndicate				01	l
ľ	ろ	A Sec	C. C.		×	e fire	医	\$5,001-\$1						nio 274 si Organia		eteni rezor	≤	719			for assets held	done" If no	the categ				مدا	
	B.	Ż	100		Y-T	3		\$50,001-1				5. A			# 34	10177 Trans	<u> </u>				•		agary of				\$	
								\$1,000,00	1-\$5,000.000	<i>(</i>		arerali Meritir	esser (pri		TK.		-	4			r spous	ncome was e	Tax-Def	¥		(خ	
	á s		de la		a	¥,	A.B	Canada Spoussi	C Income ove		400000		g #	SF 45				_			t or depa	earned or generated.	by chec	Amount of Income	BEC			
3 ?	276	Pater Silver		Territ	3.5		Caron Caron	-	erume			(*) o 50		29 C	GARLES S	* (*) * (*)	_	Č	1		andent c	general	Block C	of Inc	BLOCK D			
	1.0e		ું પ્યુક્		- 3	្ឋ	`*			Š.Š.	1.00	ger e	e lina	'cj."	ere i	, 759 1		Š.			hilled in w	į.	approp	OM			P	┨
	133		7. Š		al de la companya de Companya de la companya de la compa	ş.		\$1,001-\$2			¥ , 42.			7 (4)	y ye		ح د دند د	Preci			hich you		nay chec niate box income				Page	
	>	্টে		N.	: # 8.*	×	1	\$5,001-\$1 \$16,000-1				a kangg				3		3			y your spouse or dependent chilid in which you have no		sked Tax-Deferred' in Block C., you may check the "None" column, For all ony of income by checking the appropriate box below. Devidends, interest, wherested, must be disclosed as income for asserts field in taxable				Y	
	E.		#T.at	****	75%	3		\$50,001-	100,000			iv. E.	ur z upcz	7549			≦	Ĭ			Interest		on one one one one one one one one one o				으 . 	
		- 24							1-\$5,000,000							\$ - L	×				1-						 	•
_	6 X	9 %	1999 S	w. <u>*</u>	5. <i>?</i>		¥2€. ¥		C Income ove	5,77		A.F.		C136	I	 	-	_					For a				' 	1

Use additional sheets if more space is required.

SCHEDULE A – ASSETS	SCHEDULE A – ASSETS & "UNEARNED INCOME"		Name:
BLOCK A	вгоск в		вгоск с
Assets and/or Income Sources	Value of Asset	Туре с	Type of Income
	None > \$1,001-\$15,000 C S \$50,001-\$100,000 C S \$50,001-\$100,000 C S \$50,001-\$50,000,000 C S \$5,000,001-\$5,000,000 C S	DIVIDENOS	EXCEPTED/BLIND TRUST Other Type of Income (Specify: e.g., Partneship Income or Farm Income)
89, 0C, ASSET NAME E			
How than the			
1 untin Merillio			
eshort Term Bond			
•			
5T510Hade			
TUN			
DE CO. 12 00 200		A de	
′		1.5	
A MIT Grand &			
Puct'			
x 1/000 good 500			
X Personce			
J Payions	7		

Use additional sheets if more space is required.

SCHEDULE C - EARNED INCOME

_		
	Name:	
	Sam K	
	Zachary	
	Page 4 of	
	12	

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 both the filer and filer's 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.

INCOME LIMITS and PROHIBITED INCOME: The 2013 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. It is unchanged in 2014. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

A PART III SAMMANI, VANAMI SPARTIN (NAMAN) KANAMISISI, MIRAKA SINDA PARTINDIN DI PROSPANTSI SERVADO HINDENIN SI MANAMI PRIMINISHI PI	ONE B CHILDREN CON 198 IBNOVES		are comey profitment of maritipers and serior start.
Source (include date of repeipt for honoraria)	Tuna		Amount
come (include date of receipt for noticitalia)	lype	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MO (July 15) Evannalise: State of Maryland	Honorarium Seisry	\$0 \$20,000	\$500 \$78,000
	Spouse Selary	N/A	\$1,000 N/A
Americann	makening)/m.log	٦	236,759
	71	()*	• •

SCHEDULE D - LIABILITIES

refine andred by the train	***************************************	Name:
the model have a series of the dependent that the blokest amount quiet the reporting		Sason Paches M
Mark the birthard amount	<u>d</u>	
awad during the magnetics		Page 5 of 5

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. New 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.

				7		8P. DC, JT	
					Example	**	
				MA	First Bank of Wilmington, DE	Creditor	
					5/98	Date Liability Incurred MO/YR	
				No liabilities	Mortgage on Rental Property, Dover, DE	Type of Liability	
7 39.7 7 3 3 4 7 1 3 4		erege. A					*
<u></u>	***	<u>[.; </u>	5-2 <u> </u>		r ving i	\$15,001_	
						\$50,00% \$406,000	6 (
					×	\$100,001- \$250,000	- \ \
) 	333	\$250,001- \$600,000	Amount of Liability
						\$500,001- \$1,000,000	T of L
	7				,	\$1,000,001- \$5,000,000	ability
•		-				\$5,000,001- \$25,000,000	Ξ
						\$25,000,001- \$80,000,000	-
		* .		-	_		_
						Over \$50,000,000	_

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, 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 leted in Schedule C; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an inonorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

Position	Name of Organization
4N	Americann
Sparc	Western Heights appliest Center
150asC	International Sports Consulting
Beacon	First Baptast Congret 0