₹ X	Yes	spendent child	lities of a spouse or de Committee on Ethics.	, transactions, or liabil	arned" income, ss vou have firs	r assets, "une ver "ves" unle:	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 "ves" unless you have first consulted with the Committee on Ethics.
× X	Yes 🔲	ot be	"excepted trusts" need not be	and certain other "exspouse, or a depende	nittee on Ethics	by the Comn a trust benefi	TRUSTS —Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependence of the committee of the
S	QUESTION	OF THESE	NSWER EACH OF THESE QUESTIONS	 	T INFORM	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
	response.	each "Yes"	edule attached for each "Yes" response.	ppropriate sched	and the ap	answered	Each question in this part must be answered and the appropriate sch
No	Yes X	\$5,000 from	compensation of more than \$5,000 from the two prior years? d attach Schedule VI.	VI. Did you receive cor a single source in the the things of the transfer of t	<u>§</u>	Yes	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.
No	Yes 🔲	rrangement	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	V. Did you have any reportable agreemer with an outside entity? If yes, complete and attach Schedule V	<u>s</u>	S	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.
N _S	Yes X	before the date or two years?	IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.	IV. Did you hold any reportable positions o of filing in the current calendar year or in the figure, complete and attach Schedule IV.	₹	Yes	I. 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 I.
			•	EACH OF THESE QUESTIONS	OF THES		th all sections, please type or print clearly in blue or black ink. PRELIMINARY INFORMATION — ANSWER
assessed who files	A \$200 penalty shall be assessed against any individual who files more than 30 days late.	A \$200 per against an more than	Check if Amendment) NOC	Date of Election:	Mice:	Status Candidate for the State: House of Representatives District: New officer or Employing Office:
ATIVES	U.S. HOUSE OF REPRESENTATIVES (Office Use Only)	U.S. HÖUS		Daytime Telephone:	Daytime	low	hack
Page 1 of 6 E CENTER 2: 4 J	Page 1 of LEGISLATIVE RESOURCE CENTER 2014 MAY 15 PM 12: 41	LEGISL 2014 F)RM B tes and new employees	FORM B For use by candidates and new employees		TIVES	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT Period covered: January 1, 2004.
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SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name Michael Mactorlane

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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) 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 benefits received under the Social Security Act.

			•
Course of the date of the course of the cour	Time	Amount	unt
Source (include date of receipt for frontialia)	- y p c	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
_	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
Lindosa Case us Commille 14	Salar	20,769	60,000
, , ,			`

DC, Examples: SP, please refer to the instruction booklet. For a detailed discussion of Schedule II requirements in the optional column on the far left income source is that of your spouse (SP) or dependent child (DC) or is jointly held with your spouse (JT), If you so choose, you may indicate that an asset or the Thrift Savings Plan. derived from, a federal retirement program, including ing \$5,000 or income during the reporting period); any deposits totallocation in Block A. that is not publicly traded, state the name of the busiprovide a complete address or For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the (do not use ticker symbols). the end of the reporting period, and (b) any other of income with a fair market value exceeding \$1,000 at accounts; and any financial interest in, or income homes and vacation homes (unless there was rental Exclude: Your personal residence, including second ness, the nature of its activities, and its geographic For an ownership interest in a privately-held business For rental or other real property held for investment, account that exceeds the reporting thresholds. Provide complete names of stocks and mutual funds more than \$200 in "unearned" income during the year. reportable asset or sources of income which rental property," and the city and state. dentify (a) each asset held for investment or production Asset and/or Income Source HC Banc less in personal checking or savings SP Simon & Schuster Mega Corp. Stock 1st Bank of Paducah, KY accounts **BLOCK A** a description, generated e.g., None Þ If an asset was sold during the reportby your spouse or dependent child. it generated income, the value should be "None." ing year and is included only because please specify the method used. method other than fair market value. reporting year. If you use a valuation *This column is for assets solely held Indicate value of asset at close of \$1 - \$1,000 W o × Indefinite \$1,001 - \$15,000 O \$15,001 - \$50,000 Value of Asset ш \$50,001 - \$100,000 BLOCK B × m \$100,001 - \$250,000 \$250,001 - \$500,000 Q I \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 ~ \$5,000,001 - \$25,000,000 太 \$25,000,001 - \$50,000,000 -Over \$50,000,000 Ζ Spouse/DC Asset over \$1,000,000* × NONE during the reporting period. if the asset generated no income closed as income. Check "None" if reinvested, must be allow you to choose specific retirement accounts that do not Check all columns that apply. For interest, and capital gains, even "Tax-Deferred" column Dividends plans or IRAs), you may check the deferred income (such as 401(k) investments or that generate tax-**DIVIDENDS** Type of Income RENT INTEREST BLOCK C CAPITAL GAINS **EXCEPTED/BLIND TRUST** TAX-DEFERRED Other Type of Income dis-(Specify: e.g., Partnership Income or Farm Income) None * This column is for income derived from assets solely held by your spouse or dependent child. income by checking the appropriate box below. Dividends, interest, income. Check "None" if no income was earned or generated. and capital gains, even if reinvested, must be disclosed check the "None" column. For all other assets, indicate the category of For assets for which you checked "Tax-Deferred" in Block C, you may \$1 - \$200 = ъ \$201 - \$1,000 ≢ \$1,001 - \$2,500 7 Current Year < \$2,501 - \$5,000 ≤ \$5,001 - \$15,000 <u>≦</u> \$15,001 - \$50,000 \$50,001 - \$100,000 × \$100,001 -- \$1,000,000 Amount of Income × \$1,000,001 - \$5,000,000 × Over \$5,000,000 BLOCK D × Spouse/DC Income over \$1,000,000 None _ 8 \$1 - \$200 = X \$201 - \$1,000 = Preceding Year 7 \$1,001 - \$2,500 $\times \times$ \$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

SCHEDULE II-
- ASSETS AND
"UNEARNED"
INCOME

Continuation Sheet (if needed)

Name Michael Macfartans Page 4 of 6

	•								5		SP, DC			
				map accom	India Carro	かったる	Walter Klower	Investment Contex	American Rund	Amorica Funda			Asset and/or Income Source	BLOCK A
	``				*	*	*	*	-6	4	\$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 - \$25,000,000 \$25,000,001 - \$25,000,000	A B C D E F G H I J K L M	Value of Asset	вгоск в
					*	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	вгоск с
						***	×				None		Amount of Income	вгоск в
					*	*	X				None	:	of Income	ЖD

SCHEDULE III — LIABILITIES

Name Michael Macfatore

3ge S %

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 sibowed 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.

				JT DC,	
			Example: First Bank of Wilmington, DE	Creditor	
			May 1998	Date Liability Incurred mo/year	
			Mortgage on 123 Main Street, Dover, DE	Type of Liability	=
		,		\$10,001— \$15,000 >	
				\$50,000 w \$50,001— \$100,000 Q	
				\$100,001— \$250,000	
 ,				\$250,001 \$500,000 m	į
				\$500,001— \$1,000,000	
				\$5,000,000 Ω \$5,000,000 Ω	Amount of Lishilitu
				\$25,000,000 = \$ \$25,000,001— \$50,000,000 =	₹
	 			Over	1
				\$50,000,000	

SCHEDULE IV — POSITIONS

cer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. 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-

Exclude: Positions listed on Schedule 1; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization);

and positions solely of an nonotary nature.	idure.
A Position	Name of Organization
trest dent	Undon Pine le
	Or Co. 1

SCHEDULE V — AGREEMENTS

Name Michael Macfarlane

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Date	Identify the date, parties to, and general te service; continuation or deferral of paymen efit plan maintained by a former employer.
Parties To	erms of any agreement or arrangement with rents by a former or current employer other tha
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.
	Parties To

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.

-	
Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
Theology Con us Consulte Kt	1459pm