MENT MENT District: GA presentatives e of Election: District: MENT DISTRICT DIS	FORM B For New Members, Candidates, and New Employees aytime Telephone: Check if Amendment Period Covered: January 1, to	LEBISLATIVE RESOURCE CEVEL 2017 MAR 31 PM 1: 52 CEFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES (Office Use Only) A \$200 penalty shall be assessed against any individual who files more than 30 days late.
	Period Covered: January 1, to	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE QUESTIONS	JESTIONS	
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?	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	g the reporting period Yes No X
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 reporting period?	F. Do 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?	the current calendar Yes No No
D. Did you, your spouse, or your dependent child have any reportable Yes No	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	1 \$5,000 from a single Yes No No
ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	SCHEDULE IF YOU ANSWER "YES"	COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS	TION - ANSWER BOTH OF THESI	E QUESTIONS
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 that benefits you, your spouse, or dependent child?	in other "excepted trusts" need not be disclosed. Ha	ave you excluded from Yes No X
EXEMPTION – Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	of a spouse or dependent child because they meet all three tests for	all three tests for Yes No X

SCHEDULE A - ASSETS & "UNEARNED INCOME"

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A God A Children Ld	1 Stack R3	Sfock R3	Crd Albran Drad	Ahad Madufud	ABC Hedge Fund X		Mega Corp Stock	asset held for investment or ma and with a fair market value at the end of the reporting period, or reportable asset or source of penerated more than \$200 in during the year. I other retirement plans (such as ker symbols). I other retirement plans (such as tide the value for each asset held in coeds the reporting thresholds. I cash accounts, life the total is over financial institution where there is in interest-bearing accounts. In interest in a privately-held business address or description, s.g., and eity and state. Interest in a privately-held business by traded, state the name of the atture of its activities, and its in lablock A. Interest in a privately-held business by traded, state the name of the atture of the activities, and its in interest in a privately-held business by traded, state the name of the atture of the activities, and its in interest in a privately-held business by traded, state the name of the atture of the activities, and its in interest in a privately-held business by traded fund that is an Excepted please check the "EIF" box. You may indicate that an asset or state of your spouse (SP) or Johnly held with anyone (JT), and only held with anyone (JT), and only held with anyone (JT), and as refer to the instruction booklet.	Assets and/or Income Sources	BLOCK A
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SCHEDULE A – ASSETS & "UNEARNED INCOME"
Name: Richard Keatly
4 Page 2 of 7

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SCHEDULE C - EARNED INCOME

Name:

Page 4 of 4

Proposition of the U.S. government) totaling \$200 or more during the reporting period. For both the filer

INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2015 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,225. The 2016 limit is \$27,495. 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. **EXCLUDE**: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act. 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.

Source (Include date of receipt for honoraria) Examples: International Internation Intern		l :	Am	Amount
Sent Marches (1906) (24) Sente Speech (1906) (1906) (1906) (1907) (1906) (1907) (1906) (1907) (1906) (1907) (1906) (1907) (1906) (1907) (1906) (1907) (1906) (1907) (1906) (1907) (1906) (1907) (1906) (1907)	Source (include date of receipt for honoraria)	Type	Current Year to Filing	Preceding Year
Seminario (R.) Seminario (R.)	_	Honorarium	\$0 \$0	\$500 \$76 000
Salary 15,600 Salary N/A		Spouse Speech Spouse Salary	\$0 N/A	\$1,000 N/A
Salary		Salary	15,600	53,000
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SCHEDULE D - LIABILITIES

	Name:	Page 5 of 7
eporting period by	eporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting	nount owed during the reporting
real property inclu	real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence	tgage on your personal residence
ld furniture, or app	ld furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and	ss you are personally liable); and
Parort a	recurse. Depart a revolution charge account (i.e. credit card) only if the halance at the close of the reporting period is	the close of the reporting period

Report liabilities of over \$10,000 owed to any one creditor at any time during the r period. New Members: Members are required to report all liabilities secured by exceeded \$10,000. (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 *Column K is for liabilities held solely by your spouse or dependent child.

								≱	Amount of Liability	of Lia	bility				
			Date		# # /	0 0	, Q.,	0	· (R) ·	יר	ெ	.	_	٠	*
SP, DC, JT		Creditor	Liability Incurred MO/YR	Type of Liability	\$10,001	\$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- \$50,000,000	Over \$50,000,000	Over \$1,000,000* (Spoune/DC Liability)
	Example	First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE				×					* * > > Y		· ,
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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 held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year and two providers wasts.

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		Asst Pro Danger	Position	the current calendar year. First-year candidates and new e
		Georgia State University	Name of Organization	the current calendar year. First-year candidates and new employees report positions neid in the current calendar year and two previous years.

SCHEDULE F - AGREEMENTS

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Identify the date, parties to, and general terms of any agreement or arrangement that you have 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

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SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise 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 C.

Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services
W/A	

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