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UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	FORM B For New Members, Candidates, and Ne	FORM B Pandidates, and New Employees,	Page 1 of 5
Name: SAM ABED	Daytime Telephone:_		2013 SEP 16 PM 1: 10
New Member of or Candidate for State: CA U.S. House of Representatives District: CA Candidates – Date of Election: Many 3	2019 (PRIMAR)	Check if Amendment	(Office Use Only)
New Officer or Employee Staff File  Employing Office: Shared	Staff Filer Type (If Applicable): Shared Principal Assistant	Period Covered: January 1, 2019 to Tury 22, 2019	A \$200 penaity shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER EACH OF THESE	THESE QUESTIONS	ONS	
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? OI  b. Receive more than \$200 in unsamed income from any reportable asset during the reporting period?	No Der	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	ng the reporting ugh the date of filing? 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 Yes reporting period?	No F. C	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?	arrangement with an Yes No No
D. Did you, your spouse, or your dependent child have any reportable Yes liability (more than \$10,000) at any point during the reporting period?	No	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	in \$5,000 from a Yes X No
ATTACH THE CORRESPONDING SCHEDULE IF YOU AI	ESPONDING SCHE		NSWER "YES" EQUIRED TO COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOT	INFORMATION -	ANSWER <u>BOTH</u> OF THESE	H OF THESE QUESTIONS
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need from this report details of such a trust that benefits you, your spouse, or dependent child?	on Ethics and certain other nt child?		not be disclosed. Have you excluded Yes 🔲 No 📉
<b>EXEMPTION</b> – Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	income, or liabilities of a spo ittee on Ethics.		because they meet all three tests for Yes No X

# SCHEDULE A - ASSETS & "UNEARNED INCOME"

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1 2 Can Bay Sand 401(k) plans) For For bank and other cash accounts, total the amoun in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is (do not use only ticker symbols) production of income and with a fair market value succeeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of noome which generated more than \$200 in JT), in the optional column on the Exclude: Your personal residence, including second tomes and vacation homes (unless there was rantal noome during the reporting period); and any inarcial interest in, or income derived from, a federal strement program, including the Thrift Savings nore than \$1,000 in interest-bearing accounts uneamed" income during the year or an ownership interest in a privately-held usiness that is not publicly traded, state the name the business, the nature of its activities, and its or all IRAs and other retirement plans (such as 01(k) plans) provide the value for each asset held the ecount that exceeds the reporting thresholds you so choose, you may indicate that an come source is that of your spouse spendent child (DC), or jointly held with scription, rovide complete names of stocks and mutual fund ş ographic location in Block A. Trace to a so so of the sold was the sold was the sold with the sold with the sold was the sold with rental Assets and/or income Sources report a **e** detailed port a privately-traded fund it investment Fund, please check 줊 and other real property held provide a complete address t.g., "rental property," and a city Simon & Schuste discussion Hoga Corp Stock BLOCK A refer to the instruction 좒 ₫ 및 investment Schedule A ruction booklet. 숙 (SP) 型 型 数 畢 g 5 8 × If an easet was sold during the reporting period and included only because it generated income, the value should be "None." Indicate value of asset at close of the reporting period. If you use a valuation method other than fair market value, please specify the method used. > \*Column M is for assets held be child in which you have no interest σ \$1-\$1,000 C \$1,001-\$15,000 \$15,001-\$50,000 ø m Value of Asset × \$50,001-\$100,000 \*\*\* \$100,001-\$250,000 BLOCK B × \$250,001-\$500,000 Θ by your spouse or depende x \$500,001-\$1,000,000 × \_ \$1,000,001-\$5,000,000 ٠. \$5,000,001-\$25,000,000 \$25,000,001-\$50,000,000 \* -Over \$50,000,000 ≰ Spouse/DC Asset over \$1,000,000\* se generate tax-deferred income (such as 401(k)) as IRA, or 529 accounts), you may check the "Tax-c. Deferred" column. Dividends, interest, and go capital gains, even if reinvested, must be desclosed as income for assets held in capatal saccounts. Check "None" if the asset Example accounts. Check "None" generated no income during the Check all columns that apply. For accounts the oenerate tax-deferred income (such as 401(k NONE × DIVIDENDS RENT Type of Income INTEREST BLOCK C **CAPITAL GAINS** EXCEPTED/BLIND TRUST TAX-DEFERRED NOVE DES Other Type of Income (Specify: e.g., Partnership Income or Farm 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 galine, 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 \$1-\$200 = × \$201-\$1,000 ≡ ₹ \$1,001-\$2,500 **Current Year** < \$2,501-\$5,000 ≤ × × \$5,001-\$15,000 ≦ \$15,001-\$50,000 ≦ \$50,001-\$100,000 \$100,001-\$1,000,000 × ソ × Amount of income \$1,000,001-\$5,000,000 × Over \$5,000,000 BLOCK D ≚ Spouse/DC income over \$1,000,000 None \$1-\$200 = × \$201-\$1,000 = \$1,001-\$2,500 ₹ Preceding < \$2,501-\$5,000 ≤ \$5,001-\$15,000 ≦ \$15,001-\$50,000 × Year ≦ \$50,001-\$100,000  $\overline{\mathbf{x}}$ \$100,001-\$1,000,000 \$1,000,001-\$5,000,000 × × Over \$5,000,000 ¥ Spouse/DC Income over \$1,000,000\*

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name:

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## SCHEDULE C - EARNED INCOME

Name: m Aged Page W 잋 IJ

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: Be advised that the outside earned income limit and prohibitions on types of income may apply to you after you are on House payroll. The 2018 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$28,050. The 2019 limit is \$28,440. In addition, certain types of income (notably honoraria, director's ises, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff

Social Samily California semion Examples: Trial Sunity Source (include date of receipt for honoraria) ABC Trade Association, Battimore, MD (July 15)
State of Maryland
Civil War Roundfable (Oct. 2)
Ontario County Board of Education aciecusus Activement Honorarium Salary Spouse Speech Spouse Salary Type ement **Current Year to Filing** # 17,024/11 # 22,053/14 # 10,632/xR **Amount** #20,502 やお Preceding Year

#### SCHEDULE D - LIABILITIES

Name: SAM ABED

Page 4 of 5

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. 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

	TT	JI		SP, DC, JT		
	Merce	3651	Example			
	Mercatabane of Escontes	365 w Count, Esterates, CASELL	First Bank of Wilmington, DE	Creditor		:
	3//9		5/16	Date Liability Incurred MO/YR		
	Com loan	Mospage	Mortgage on Rental Property, Dover, DE	Type of Liability		(m)
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	1			Over \$1,000,000* (Spouse/DC Liability)	*	

#### 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 previous years.

penog and the current calendar year. First-year candidate	period and the current year. Firstryear candidates and here employees report positions have in our careful year and they previous years.
Position	Name of Organization

### SCHEDULE F - AGREEMENTS

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Name: Page\_ D 힟

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

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Date	Parties to Agreement	Terms of Agreement
1/19	Myself and state of Colifornia-	Pension-
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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
Bens	l Raph Estate (Esondito ca)	Bench Raph Estate (Escondito ca) Real Estate Commission