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UNITED :	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	For New Members, (	FORM B For New Members, Candidates, and New Employees	LEGISLATIVE RECTURED OF THE
Name:	Jamin B. Raskin	Daytime Telephone:	<b>16:</b>	2016 SEP 15 PM 1: 25
FLER	New Member of or Candidate for State: M&I  X U.S. House of Representatives District:	Maryland 8	Check If Amendment	U.S. HÖUSE OF REFIEESENIALIYES & (Office Use Only)
STATUS	New Officer or Employee Employing Office:		Period Covered: January 1, 2015	A \$200 penalty shall be assessed against any godividual who files more than 30 days late.
PRELIMI	PRELIMINARY INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS	F THESE QUESTI	ONS	
A. Did you, yo a. Own any end of the b. Make mo asset dur	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? gr b. Make more than \$200 in unearned income from any reportable asset during the reporting period?	X No C	E. Did you hold any reportable positions duri or in the current calendar year up through the	positions during the reporting period $_{\mbox{Yes}}$ No $\mbox{\begin{tabular}{ c c c c c c c c c c c c c c c c c c c$
C. Did you or you honoraria, or pen reporting period?	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?	X No F	F. Do you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current catendar year up through the date of filing?	r arrangement with an Yes No X
D. Did you, you liability (more t	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?	× ×	Did you receive compensation of more than source in the current year and two prior years?	on of more than \$5,000 from a single Yes No X
	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	RESPONDING SCHI	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" I INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO (	S"
EXCLUSI	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>BOTH</u>	T INFORMATION -		OF THESE QUESTIONS
TRUSTS - De	TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be this report details of such a trust that benefits you, your spouse, or dependent child?	on Ethics and certain other ' id?	excepted trusts" need not be disclosed. H	e disclosed. Have you excluded from Yes No X
EXEMPTION - exemption? D	EXEMPTION - Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child beca exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	income, or liabilities of a spo tree on Ethics.		use they meet all three tests for Yes No X

## SCHEDULE A -- ASSETS & "UNEARNED INCOME"

Jamin B. Raskin

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Use additional sheets if more space is required.

Jamin B. Raskin

Financial Disclosure Statement - Form B

Schedule A - Assets & "Unearned Income"

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BARBARA RASKIN DEFINED BENEFIT PLAN ACCT #1485	TOUCHSTONE FOCUSED FUND CLASS Y	JANUS GLOBAL RESEARCH FUND D, UTWA	ABERDEEN INTERNATIONAL EQUITY FUND, UTMA	FIDELITY MONEY MARKET FUND		FIDE ITY MAGE: I AN	NISOURCE STOCK FUND	MD SRP, T. ROWE PRICE MID CAP VALUE FUND	MD SRP, T. ROWE PRICE SMALL CAP STOCK FUND	MD SRP, AMERICAN GROWTH FUND OF AMERICA	MD SRP, AMERICAN EURO PACIFIC GROWTH	AGENTRICS, LLC 401K PLAN, ROYCE VALUE PLUS	AGENTRICS, LLC 401K PLAN, ROYCE OPPORTUNITY INV	VANGUARD VARIABLE ANNUITY (DVA) MID-CAP INDEX	VANGUARD VARIABLE ANNUITY (DVA) EQUITY INDEX	BARON ASSET FUND (MUTUAL FUND), UTMA	VANGUARD MID-CAP GROWTH FUND	JP MORGAN SMALL CAP GROWTH FD	FIDELITY CONTRAFUND	INVESCO CHARTER FUND A	TUCHSTONE INTL SMALL CAP - Y	WELLS FARGO ADVANTAGE MONEY MARKET	IBM COMMON	WELLS FARGO SWEEP ACCOUNT	MARYLAND 529	MARYLAND 529	SOURCE CAPITAL INC	CONNECTICUT HIGHER EDUCATION TRUST	OTHER	FID PACIFIC BASIN	FID EUROPE	FID LOW PRICE STK K	FID MAGELLAN K	FID GROWTH CO K	FIDELITY AMERICAN UNIVERSITY DEFINED CONTRIBUTION RETIREMENT PLAN	CREF SOCIAL CHOICE R2
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NONE	\$50,001 - \$100,000	\$100,001 - \$250,000	\$1,001 - \$15,000	\$1,001 - \$15,000	+	\$15,001 - \$50,000	\$1,001 - \$15,000	\$50,001 - \$100,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$15,001 - \$50,000	\$50,001 - \$100,000	#N/A	\$100,001 - \$250,000	\$50,001 - \$100,000	\$100,001 - \$250,000	NONE	NONE	NONE	NONE	NONE	\$1,001 - \$15,000	\$1,001 - \$15,000	\$50,001 - \$100,000	\$50,001 - \$100,000	\$50,001 - \$100,000	\$1,001 - \$15,000	\$15,001 - \$50,000		\$1,001 - \$15,000	\$1,001 - \$15,000	\$1.\$1,000	\$1,001 - \$15,000	\$1,001 - \$15,000	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$1,001 - \$15,000
OTHER	DIVIDENDS	DIVIDENDS	DIVIDENDS	DIVIDENDS		DIVIDENDS	DIVIDENDS	TAX-DEFERRED	TAX-DEFERRED	TAX-DEFERRED	TAX-DEFERRED	TAX-DEFERRED	TAX-DEFERRED	DIVIDENDS	DIVIDENDS	DIVIDENDS	CAPITAL GAINS	CAPITAL GAINS	CAPITAL GAINS	CAPITAL GAINS	CAPITAL GAINS	NONE	DIVIDENDS	INTEREST	OTHER	OTHER	DIVIDENDS	OTHER		DIVIDENDS	DIVIDENDS	DIVIDENDS	DIVIDENDS	DIVIDENDS		TAX-DEFERRED
\$5,001 - \$15,000	NONE	\$201 - \$1,000	\$201 - \$1,000	\$1,001 - \$2,500	\$1,001 \$1,000 \$1,001 \$1,000	\$1,001 - \$2,500	\$201 - \$1,000	\$2,501 - \$5,000	\$1,001 - \$2,500	\$1,001 - \$2,500	NONE	\$2,501 - \$5,000	\$2,501 - \$5,000	\$1 - \$200	\$1 - \$200	\$5,001 - \$15,000	\$5,001 - \$15,000	\$5,001 - \$15,000	\$50,001 - \$100,000	\$5,001 - \$15,000	\$5,001 - \$15,000	\$1-\$200	\$1,001 - \$2,500	\$1,001 - \$2,500	\$201 - \$1,000	\$201 - \$1,000	\$1 - \$200	NONE		\$5,001 - \$15,000	\$2,501 - \$5,000	\$1,001 - \$2,500	\$1 - \$200	\$5,001 - \$15,000		NONE
\$5,001 - \$15,000	\$2,501 - \$5,000	NONE	\$201 - \$1,000	\$1,001 - \$2,500	***************************************	\$1.001 - \$2.500	NONE	\$1,001 - \$2,500	\$2,501 - \$5,000	\$1,001 - \$2,500	NONE	\$2,501 - \$5,000	\$2,501 - \$5,000	NONE	NONE	\$5,001 - \$15,000	NONE	\$2,501 - \$5,000	NONE	NONE	NONE	NONE	NONE	\$1,001 - \$2,500	\$201 - \$1,000	\$201 - \$1,000	NONE	\$201 - \$1,000		#N/A	#N/A	#N/A	#N/A	#N/A	1	NONE

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### SCHEDULE C - EARNED INCOME

Name: Jamin B. Raskin Page 7 of 9

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: Miliary 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 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.

Source (include date of receipt for honoraria)		Am	Amount
Coming (marke date of tecept to troite and)	i ype	Current Year to Filing	Preceding Year
	Hogoratum	8	\$500
Examples: CM Reproducte (Oct. 2)	Spouse Speech	\$20,000	\$78,000 \$1,000
Department of the Treasury	Salary-Spouse	175,363.48	N/A
American University	Salary	237,362.66	276,825.46
State of Maryland	Salary	42,069.36	40,816.50
Sage Publication	1099-MISC	642.06	2,831.95
People for the American Way	109-MISC	20,773.00	36,000.00
	2 9 9 2		

#### SCHEDULE D - LIABILITIES

	Name:	
	Jamin B.	
	n B.	
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	Raskin	
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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 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, perent, 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.

									TROUB!	Amount of Liability					1
20. J		Creditor	Date Liability Incurred MO/YR	Type of Liability	\$10,001- \$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- \$50,000,000	Over \$50,000,000	Over \$1,000,000°
	Exemple	First Bank of Wilmington, DE	5/98	Mortgego on Rontal Property, Dovor, DE				×							1
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#### SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, pertner, 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 increasing nature. New Members and second-year candidates report positions held in the reporting period and

the current calendar year. First-year candidates and new o	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

			Date	Identify the date continuation or	SCHEDUL
			Parties to Agreement	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; confinuation or defense 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.	SCHEDULE F - AGREEMENTS
			Terms of Agreement	e with respect to: future employment; a leave of absence during the period minent; or continuing participation in an employee welfare or benefit plan r	Name: Jamin B. Raskin
				of absence during the period of government service; loyee welfare or benefit plan maintained by a former employer.	Page 9 of 9

# 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 type 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 fished on Schedule C.

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