1 5010	ATIVE RESOURCE CENTER
UNITED STATES HOUSE OF REPRESENTATIVES FOR New Members, Candidates, and New Employees 18	18 JAN 25 PM 1: 15
Name: KENNETH CUFFEED COPE SE Daytime Telephone	Colliner of Active and Allves
New Member of or Carndidate for State: 1/2/2/25 U.S. House of Representatives District: 6 Candidates - Date of Election: Amendment	POSTIWATE, Voc. Prov. ECIBLE
New Officer or Employee Staff Filer Type (If Applicable): Period Covered: January 1, to	A \$200 penalty shall be assessed against any individual who files more than 30 days (ate.
PRELIMINARY INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS	
A. Did you, your spouse, or your dependent child: a. Own any reportable seet that was worth more than \$1,000 at the end of the reporting period? If the end of the reporting period? b. Receive more than \$200 in unearmed income from any reportable asset during the reporting period? Yes Yes No E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? Yes No Period or in the current calendar year up through the date of filing? Yes No No Period or in the current calendar year up through the date of filing? Yes No No Period or in the current calendar year up through the date of filing? No No No No No Period or in the current calendar year up through the date of filing?	ing? Yes X No
C. Did you or your spouse here "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period? 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?	nder Yes No
D. Did you, your spouse, or your dependent child have any reportable Hability (more than \$10,000) at any point during the reporting period? Yes No J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	Yes X No
ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	m
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>BOTH</u> OF THESE QUESTIONS	NS
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?	*
EXEMPTION - Have you excluded from this report any other assets, "unearned" income, 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.	or

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: KEANETH C. COPE TO

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Course jurist cumo i com	3	Orth the TX	Openharyer Fund	Fine Manit	Ē	Examples: Streen & Schuster	Magas Corps Black	For bank and other costs accounts, total the amount in all interest-baseing accounts. If the total is over 50,000, let every financial institution where there is more than \$1,000 in interest-baseing accounts. For rend and 51,000 is interest-baseing accounts. For rend and other red property hald for investment, provides a complete address or description, e.g. rents property, and a city and exist. For an ownerebly interest in a privately-hald businesses in an ownerebly interest in a privately-hald businesses in an ownerebly interest in a privately-hald businesses. The nature of its activities, and its geographic location in Block A. Tassishesi: Your personal residence, including second homes and vacation homes (unless there was rents thereast in, or income defined from, a factor interest in, or income defined from, a factor interest in, or income defined from, a factor interest program, including the Thrift Bavings Plan. If you have a privately-traded fund that is an Ecospisic investment program, including the Thrift Bavings (SP) or dependent child (DO), or jointly-hald with anyone (JT), in the optional column on the far let. For a desired discussion of Schedule A requirements, present rate to the instruction bookled.	For all \$10.0 and other reference plans (such as 401(R) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not use only foliar symbols).	tentify (a) each asset hald for investment or roduction of income and with a feir market value roduction of income and with a feir market value (a) admy 51,000 to the end of the reported particular (a) admy other reportable seed for a reported income the reported income which generated more than \$200 in "unearmed" norms during the year.	Assets and/or income Sources	BLOCK A
	GMINE TERMINED	X	×	×	×		×	None None		"Column M is for essets held by your apouse or depends child in which you have no interest.	or indicate value of sesset at close of the reporting period. If you che uses a valuation method other than tair market value, please the discussion of the rest value of the poorly the method used. Or many are sees these sold during the reporting period and is in a sees the sold during the reporting period and is included only because it generated income, the value should be "hone."	Value of Asset	BLOCK B
	Sac Saladade C Parston	X	X	X Section 1	Partnerito	Royaline	×	SpouseDC Asset over \$1,000,000° NONE DIVIDENDS RENT INTERREST CAPITAL GAMS EXCEPTEDBLIND TRUST TAX-DEFENSED Other Type of Income (Specify: e.g., Perinership Income or Farm Income)		3	solt all columns that apply. For accounts t generate ton-deferred income (such as (ft), IRA, or 529 accounts), you may check (ft), IRA, or 529 accounts). You may check the column option of the column option option gates, even the description of the column option option option option.	Type of Income	BLOCK C
	St. State of the St.	Sec Shelmer C	X	×	×	×	×	Numb \$1,4200 = \$2,91-\$1,000			For assets for which you checked "Tau-Deferred" in Slock C, you may check the "Norse" column. For all other seeds indicate the category of income by checking the appropriate box below. Dividends, interest, an capital gains, even if reinvested, must be disclosed as income for assets held in totalite account Check, "Norse" 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.	Amount of Income	BLOCK D
	SaladakaCa	Shala to			×	×		\$1,001-\$2,500			ny check the "None" column. For all other he box balow. Dividentia, internet, and to for assets held in totable accounts. which you have no internet.		

SCHEDULE C - EARNED INCOME

Name: KENDETH C. COPE, IR Page 3 of 5

INCOME LIMITS and PROMIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,785. 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. List the source, type, and amount of semed 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.

Source (include date of receipt for honoraria) ABC Trade Association, Business, ND (AMY 18) Social New Remarks (Oct. 2) Order o County Beard of Education Order of County Beard of Parameters Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of Education Order of County Beard of	Honoratum Bouss Speech Spouss Street Consubting Consubting Consubting	8 8 8 7 to Filling	Amount Freeding Year \$500 \$15,000 \$15,000 ## ## ## ## ## ## ## ## ##
Chase (TRIMAPH Group Rousson)	Pension	\$ 4,000	4,000

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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 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 liabile); 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 hald solely by your spouse or dependent child.

		计		DC, JT		
		\vdash	Example			
		Texas Trust-Credit Union	First Bank of Wilmington, DE	Creditor		
		12/57	5/90	Date Liability Incurred MO/YR		
		Change Carol	Montgage on Rental Property, Dover, DE	Type of Liability		
				\$10,001- \$15,000	>	
		×		\$15,001- \$50,000	•	
				\$50,001- \$100,000	C	
			×	\$100,001- \$250,000	0	
				\$250,001- \$600,000	cia.	moun
				\$500,001- \$1,000,000	7	t of LI
				\$1,000,001- \$6,000,000	6	Amount of Liability
				\$5,000,001- \$25,000,000	I	
				\$25,000,001- \$60,000,000	-	
				Over \$50,000,000	٠.	
				Over \$1,000,000° (Spouse/DC Lisbility)	*	

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 positions entitles (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. First-year candidates and new employees report positions held in the current calendar year and two provious years.

		DIRECTOR / PRESIDENT	Position	Parky and the Children Campings year. They year cantachage
	. 0 '	Socomon's Baldye, (nc., Onlington, TX (S-Corp)	Name of Organization	pendu and unionis desiration from the commentee and here employees report positions here in a current case and the previous years.

SCHEDULE F - AGREEMENTS

Name: KENNETH C. CODE TR Page 5 of 5

identify the date, parties to, and general terms of any agreement or array continuation or deferral of payments by a former or current employer oth employer.	Identify the data, 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.
Date Parties to Agreement	Terms of Agreement
NONE	
SCHEDULE J — COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE)F \$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 customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat info	ation for services provided directly by you during the current year and the prior years. This includes the names of clients and prise if you directly provided the services generating a fee or psyment of more than \$5,000. Exclude: Payments by the U.S. 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
Thumpy Geoup, Berwyn, PA 19312	CONSULTING THOUGH Solomonia Bridge Inc. (Syp)
0	