THE PATATES HOUSE OF REPRESENTATIVES	FORM B	UCI 2 2 2013 Page 1 of 8
FINANCIAL DISCLOSURE STATEMENT	For New Members, Candidates, and New Employees	19, 0 BCOCKER INDVISIBLE
Name: Lynn Schott	Daytime Telephone:	2015 OCT 29 PM 12: 39
New Member of or Candidate for State:  U.S. House of Representatives District:  Candidates – Date of Election:	CA CD 416 Check if Amendment	1.S. ĐỘUSỂ ઉԵՐ ĐỂՐ HỆU THẬN WES
New Officer or Employee  Employing Office:	Period Covered: January 1,to	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	OF THESE QUESTIONS	
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?	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?	ng the reporting period 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 reporting period?	Yes No F. Did you have any reportable agreements or arrangements with an outside entity during the reporting period or in the current calendar year up through the date of filing?	or arrangements with Yes No
D. Did you, your spouse, or your dependent child have any reportable liability (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?	n \$5,000 from a single γes Χ No S?
ATTACH THE CO THIS FORM INCLUDES ONL	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	S"  COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER B	ST INFORMATION - ANSWER BOTH OF THESE QUESTIONS	E QUESTIONS
TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" ne this report details of such a trust that benefits you, your spouse, or your dependent child?	s and certain other "excepted trusts" ne	ed not be disclosed. Have you excluded from Yes . No X
<b>EXEMPTION</b> – Have you excluded from this report any other assets, "uneamed" income, transactions, 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.	ad" income, transactions, or liabilities of a spouse or dependent child becan the Committee on Ethics.	use they meet all three Yes . No .

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Vanguard	Vanguard	Voya .	Fidelity	ETrade	ABC Hedge Fund	Examples: Simon & Schuster	Mega Corp Stock		For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.  For rental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and state.  For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.  Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); and any financial interest in, or income derived from, a faderal retirement program, including the Thrift Savings Plan.  If you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box.  If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left.  For a detailed discussion of Schedule A requirements, please erier to the instruction booklet.	For all IRAs and other retirement plans (such as 401(k) 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 ticker symbols).	Identify (a) each asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in unearmed income during the year.	Assets and/or Income Sources	BLOCK A
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--- SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name:

Lynn Schott

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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) 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.

**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 2014 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. The 2015 limit is \$27,225. 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.

		Am	Amount
<b>Source</b> (include date of receipt for nonoraria)	Type	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	₩ν. υς\$ 0\$	\$500
Examples: Civil War foundtable (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	\$0 N/A	\$1,000 N/A
		J CO 1/2/1 01 1 \$	AULO SOS OS
MACOM Engineering	physicalary	7 1 1 1	
Founders Academy	Salary	\$4,284.00	\$12,662.79
Orange County Mosquito + Vector Control District	salary	\$1,200	2/2
CITY OF IRVINES PLANNING COUNTS SIONER	salam	7/4	\$3,300.00
CITY OF IRVINE COUNCILWOULAN	salam	\$17,600.00	7/4
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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 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.

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u.5,	K K K K K K K K K K K K K K K K K K K		Nati	( Cha	Example	7		
of U.S. Bank	17 Texas Bank and Trust	Nation star Mortgage	Nationstar Mortgage	Chase Bank	First Bank of Wilmington, DE	Creditor		
02/13	12/10	05/06	1413	11/20	5/98	Date Liability Incurred MO/YR		
02/13 Mortgage on Primary	Longiter Texas	Mortgage on Rental Portland, Tennessee	Mortgage on Rental Portland, Temesser	Mortgage on Rental	Mortgage on Rental Property, Dover, DE	Type of Liability		
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	_					Over \$50,000,000	-	
						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. First-year candidates and new employees report positions held in the current calendar year and two previous years.

Position	Name of Organization
board member	Exchange Club of Irvine
board member /V, C,	board member /V.C. I Irvine Education Partnership Fund
board member	Green Ribbin Environmental Committee
board member	Irvine Burden Thrathe Board

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	Name: Lynn Schott	Page 6 of 8
ement that you have with I	gement that you have with respect to: future employment; a leave of absence during the period of government service;	of government service;

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.

			Date	
			Parties to Agreement	
			Terms of Agreement	

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

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