UNITED STATES HOUSE OF REPRESENTATIVES	FORM B For New Members, Candidates, and N	FORM B andidates, and New Employees		Page 1 of 3
Name: Michael A. Gilmore	Daytime Telephone	æ.	17 &U6 -7 FG 1: 20	1 : 20
New Member of or Candidate for State: M.J.  U.S. House of Representatives District: 1.3  Candidates – Date of Election: Av. 2.01	8	Check if Amendment	$\mathcal{M}$ (Office	(Office Use Only)
New Officer or Employee  Employing Office:		Period Covered: January 1, 1017 to 2017.	A \$200 penaity shall I individual who files n	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	THESE QUESTION	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? or b. Make more than \$200 in unearmed income from any reportable asset during the reporting period?	No St.	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 atte of filing?	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 reporting period?	No F	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?	arrangement with an the current calendar	Yes 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?	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	J. Did you receive compensation of more than source in the current year and two prior years?	pensation of more than \$5,000 from a single sar and two prior years?	Yes No
ATTACH THE CORRESPONDING SCHEDULE IF YOU THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE	ESPONDING SCHE	EDULE IF YOU ANSWER "YES" HAT YOU ARE REQUIRED TO COMPLETE	S"  COMPLETE	
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS	INFORMATION -	ANSWER BOTH OF THES	E QUESTIONS	
TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need this report details of such a trust that benefits you, your spouse, or dependent child?	n Ethics and certain other " ?	excepted trusts" need not be disclosed. H	d not be disclosed. Have you excluded from	Yes No
<b>EXEMPTION</b> – Have you excluded from this report any other assets, "uneamed" income, or liabilities of a spouse or dependent chi exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	come, or liabilities of a spor	use or dependent child because they meet all three tests for	all three tests for	Yes No X

## SCHEDULE C - EARNED INCOME

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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 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 **EXCLUDE**: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act. professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff,

	ı	Am	Amount
Source (include date of receipt for honoraria)	Type	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
Examples: Civil War Roundtable (Oct. 2)	Spouse Speech	\$20,000 \$0	\$1,000
,	0 -	\$1 503 15	R.
State of Michigan UI	Insurance	\$4,912	d
GCA Services	Salary	\$ 3967 Ø	\$3,967
Democratic State Central Connittee	Salary	R	4,377,700
	Consulting Fee	B	\$ 2,080
Synergy Cegal Staff; mg	Salary	Ø.	88188
U.S. Senate	Salares	Ø	\$2833

## SCHEDULE D - LIABILITIES

	Name:	Page 3 of 3	[3
reporting period by	reporting 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	virgal property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence.	toage on your personal	residence

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

\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$100,001-	\$100,001- \$250,000	100,001- 250,000 250,001- 1,000,000 1,000,000 5,000,001-	00,001- 50,000 50,001- 00,001- ,000,000
\$15,001- \$50,000	\$15,001- \$50,000	\$15,001- \$50,000 \$100,000- \$100,000 \$250,000 \$500,001-	15,001- 50,000  100,001- 250,000  250,001  1,000,001  1,000,000  1,000,001  1,000,001	50,001- 0,000  00,001- 50,001- 00,001- 000,001- 000,000- 50,000  000,001- 50,000  000,001- 50,000,000  000,001- 50,000,000
·   450,000	\$50,001 \$100,000 \$100,001-	\$60,001 \$100,000 \$100,001- \$250,000	100,000 100,000 100,001 250,000 500,000 1,000,001 1,000,000 5,000,001	00,001- 50,000  00,001- 00,001- 000,000  000,001- 5,000,000  000,001- 5,000,000

## 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 organizational 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 calculator year. First year candidates and new approximate period in the current calculator year and the current partners and the current calculator.

•	_	_	_	_	-
				Position	the current calendar year. First-year candidates and new e
				Name of Organization	the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.