<u>₹</u>	Yes	pendent child	st consulted with the Committee on Ethics.	arned" income ss you have fire	er assets, "unea swer "yes" unles	<b>EXEMPTION</b> —Have you excluded from this report any other assets, "unearned" 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.	EXEMPTI because the
<b>№</b>	Yes 🔲	ot be	s and certain other "excepted trusts" need no spouse, or a dependent child?	nittee on Ethics ting you, your s	ed by the Comment of the heat trust benefit	<b>TRUSTS</b> —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 benefiting you, your spouse, or a dependent child?	TRUSTS- disclosed.
Ø	QUESTION	)F THESE	MATION — ANSWER EACH OF THESE QUESTIONS	T INFORM	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	EXCLU
	response.	each "Yes"	ppropriate schedule attached for each "Yes" response	and the a	e answered	Each question in this part must be answered and the appropriate sched	
<b>₹</b>	Yes	\$5,000 from	VI. Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, complete and attach Schedule VI.	<b>№</b>	ĕg ⊠	Iit. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?  If yes, complete and attach Schedule III.	III. Did you able liability <b>If yes, com</b>
8	Yes	angement	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	§	Yes	II. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule II.	II. Did you, income of n reportable a If yes, com
S <sub>o</sub>	Yes X	efore the date or two years?	IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.	No U	Yes	t. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?  If yes, complete and attach Schedule I.	t. Did you c fees) of \$20 If yes, com
			ANSWER EACH OF THESE QUESTIONS	OF THES	ER EACH	PRELIMINARY INFORMATION — ANSW	PRELIM
		5				no missos timo or print alsortir in bline or black ink	in all coatio
assessed who files	A <i>\$200 penalty</i> shall be a against any individual w more than 30 days late.	A <i>\$200 per</i> against an more than	Check if Amendment	Date of Election:	ng Office:	Candidate for the House of Representatives District: New officer or employee Employing Office:	Filer Status
	(Office Use Only)	(,					
		> > \	Daytime Telephone:	Daytime		Jeth W. Moultar	Name:
TIVES	OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES	U.S. HOUSE					
<u>S</u>	2013 NOV 22 PM 12: 31	2013 NC	For use by candidates and new employees		c 15, 2013	Period covered: January 1, 2012 - November	Period c
Page 1 of SCENTER	Page 1 c LEGISLATIVE RESOURCE CENTER	LEGISLAT	FORM B		ATIVES	UNITED STATES HOUSE OF REPRESENTATIVES	FINANCE
i.							

## SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name
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Page .
2 of 2

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a 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	rement programs, and benefits re	benefits received under the Social Security Act.	Security Act.
Source (include date of receipt for honoraria)	Type	Amount	unt
Course (include date of revelot for inclinitial	1 )	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
	Director's Fee	\$400	\$3,200
XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
Harris County, Texas Public Schools	Spouse Salary	NA	NA
New Marchen Venture (Texas Central Pailmen).	Salary	0	8166.625
Washington, DC	•		
	5 5 5 5 5 1		
	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		

Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,00 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.

Asset and/or Income Source **BLOCK A** 

Provide complete names of stocks and mutual funds

If an asset was sold during the report-

please specify the method used. method other than fair market value, reporting year. If you use a valuation Indicate value of asset at close of Value of Asset BLOCK B

allow you to choose specific

Check all columns that apply. For

Type of Income BLOCK C

plans or IRAs), you may check the

"Tax-Deferred" column. Dividends, deferred income (such as 401(k) investments or that generate taxretirement accounts that do not

Eastern Halthan Stock	Janus Flex Bond C	Janus Balanced C	BILAL CIOLA AII. C	GS Midago Value C	NMV/TCA 401 k		Examples:	SP Mega Corp. Stock		Exclude: Your personal residence, including second	y-held business me of the busi- its geographic	For rental or other real property held for investment, provide a complete address or a description, e.g., the "rental property," and the city and state.	ment plans (such as 401(k) or each asset held in the porting thresholds.	(do not use ticker symbols).
×	*	*	*	×		×	Indefinite	X	None \$1 - \$1,000 \$1,001 - \$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		B C D E T G H	This column is for assets solely neighby your spouse or dependent child.	It generated income, the value should be "None."	ing year and is included only because
×						×		×	\$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 Over \$50,000,000 Spouse/DC Asset over \$1,000,000* NONE DIVIDENDS RENT		Z	ā		
	×	×	×	×			Royaties		INTEREST CAPITAL GAINS  EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Inco	ome)		during the reporting period.	if reinvested, must be dis- closed as income. Check "None" if the asset generated no income	"fax-Deferred" column. Dividends,
						×	×	×	\$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000*		Current Year		<ul> <li>This column is for income derive spouse or dependent child.</li> </ul>	
×	×	×	×	×		×	×		None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000*		ding Year		column is for income derived from assets solely held by your e or dependent child.	

## Amount of Income

BLOCK D

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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 and capital gains, even if reinvested, must be disclosed as income by checking the appropriate box below. Dividends, interest, income. Check "None" if no income was earned or generated.

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Name Seth W. Moulton

Continuation Sheet (if needed)	
BLOCK A	вгоск в
Asset and/or Income Source	e Value of Asset
S.P.	A B C D E F G
JT,	15,000
	\$100,001
Roth INA	
Mindspaced Technolyius	<b>*</b>
Iridium	×
USAA Manoy Mks-(UXAAX)	×

This page may be copied if more space is required.

## SCHEDULE III - LIABILITIES

Name Seth W. Moulton

Page S of S

owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furni-Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount ling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000. ture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sib-

						F, S, F	
	Great Lakes (Stafford)	ACS (college loan)	Charc MC	Citibale Amex	Example: First Bank of Wilmington, DE	Creditor	
	~ 2000	×2000	2013	2013	May 1998	Liability Incurred mo/year	Date
	college lows	college loan	revoluing charge accur	revolving charge acut	Mortgage on 123 Main Street, Dover, DE	Type of Liability	
	×	×				\$10,001— \$15,000	
			×	×		\$15,001— \$50,000	
_		ļ			ļ	\$50,001— \$100,000 O	
		-			-	\$100,001— \$250,000 □ \$250,001—	1
F					┞	\$500,000 TT \$500,001—	夏
-						\$1,000,000 TS1,000,001	nt of □
$\vdash$						\$5,000,000 \$5,000,001— \$25,000,000 <b>±</b>	iability
						\$25,000,001 \$50,000,000	
						Over \$50,000,000	1
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## **SCHEDULE IV — POSITIONS**

Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

**Exclude: P**ositions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization); and positions solely of an honorary nature.

and positions solely of all horiorary flature.	iature:
Position	Name of Organization
Vice Chairman, President	Vice Chairman, President Eastern Healtheare Partners
Director	Millerial Trains Project
Board Member	Salen YMCA
Vice President	Phillips Academy Andore Alumni Council
Chairman	Andorer and the Military Committee

Use additional sheets if more space is required.