	F THESE QUESTIONS	PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS
Period Covered: January 1, 2014 A \$200 penalty shall be assessed against any to 12-31-1114 individual who files more than 30 days late.	to 12-31-111A	New Officer or Employee Employing Office:
(Office Use Only)	Check if Amendment	New Member of or Candidate for State: WV U.S. House of Representatives District: 0 > FILER Candidates – Date of Election:
U.S. HOUSE OF THE CLERK	Daytime Telephone: 307-775-27/	Name: Alexander X. Mooney
LEGISLATIVE RUSSUAGE CENT	FORM B For New Members, Candidates, and New Employees	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT
DELIVERED		

Name: Alexander X. Mooney	Daytime Telephor	Daytime Telephone: 30 >- 7 よう・27/(2015 MAY 15 AM 9: 40
New Member of or Candidate for State: U.S. House of Representatives District: Candidates – Date of Election:	160 AM	Check if Amendment	(Office Use Only)
New Officer or Employee Employing Office:		Period Covered: January 1, 2014 to 12-31-11)A	A \$200 penaity shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE QUESTIONS	H OF THESE QUESTI	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 unearned income from any reportable asset during the reporting period?	Yes No E.	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 X
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.	F. Did you have any reportable agreements or arrangement an outside entity during the reporting period or in the current calendar year up through the date of filing?	agreements or arrangements with ring period or in the current te of filing?
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 So	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 No S
ATTACH THE O	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSW	EDULE IF YOU ANSWER "YES"	\$"
THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQU	NLY THE SCHEDULES T	HAT YOU ARE REQUIRED TO	JIRED TO COMPLETE

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS

ā	L	Yes _	this report details of such a trust that benefits you, your spouse, or your dependent child?
		· -	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
			TO THE PARTY OF TH

EXEMPTION – Have you excluded from this report any other assets, "unearmed" 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. Yes

₹ |X|

SCHEDULE A - A

	ASSETS &
BLOCK B	ASSETS & "UNEARNED INCOME"
BLOCK C	Name: Alexa
U ACO IB	Name: Alexander X. Mooney
	Page 2 of 6

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o Pacific	Amilant Eq br	monyland supplemental	LTIAA traditional	TIAR CREF Annuity	ABC Hedge Fund X	Examples. Simon & Schuster	Mege Corp Stock	For a detailed discussion of Schedule A equirements, please refer to the instruction booklet.	If you so choose, you may indicate that an asset of 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.	If you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box.	scalude: Your personal residence, including second tomes and vacation homes (unless there was rental nome during the reporting betiod); and any financial niterest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	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.	For rental and other real property held for investment, provide a complete address or description, e.g., rental property," and a city and state.	all interest-bearing accounts. If the lotal is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.	and executing their each according total the amount in	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that aveneds the reporting thresholds.	(do not use only ticker symbols).	Identify (a) each asset held for investment or production of noome 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 'unearned' income during the year. Provide complete agence of stocks and mutual functions.	Assets and/or Income Sources	BLOCK A
								None							>	Ī				
- -	*	×	*			Indefinite	×	\$1-\$1,001-5 \$1,001-5 \$15,001 \$50,001	15,000						B C D		child in which you have no interest.	Indicate value of asset at dose of the reporting period. If you use a valuation method other than fair market value, blease specify the method used. If an asset was sold during the reporting period and is included only because it generated income, the value should be "None."	5	
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 				ļ	×	-	_		1-\$500,000						<u>၈</u>	1	teres	dose dothe sed.	of A	BLOCK B
				<u> </u>	 	-	_	+	01-\$5,000,000							1	- 10	of the ar than a report	Value of Asset	w
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				<u> </u>		-		4	001-\$50,000,00)					~	1	9	ment period		
								Over \$5	000,000,0						_]	9	ng a sa s		
					<u> </u>	L		Spouse/	DC Asset over \$	1,000,00	0,				Ξ.	<u> </u>	-	riod If value.		
lacksquare	_		*		ļ	_	<u></u>	NONE								1	income during t	Check all col that generate 401(k), IRA, the "Fax-De knterest, ar reinvestet, ir		
	_				-	-	×	DIVIDEN	IDS							-	E 5	Tax-C		
	4					-		RENT								_		call columns to enerate tax-ob.) IRA, 528 ac. Tax-Deferred cast, and casted, must be seek held.	춯	
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\vdash							-	CAPITA	······································							-	oning	hat apply ferred in counts), column pital ge e discle in taxe	Ž	BLOCK C
*	~							TAX-DE	ED/BLIND TRUS	3 1							income during the reporting period.	ne that apply. For ix-deferred income a accounts), you a accounts), you capital gains, at the discloseds, at the discloseds.	Type of Income	•
					Partnership Income	Royaltes		1		pecify: e.ç	g , Partnership Inc	ome or Farm Inco	ome)				re reporting period.	Check all columns that apply. For accounts that generate tax-deferred income (such as 401(s), IRA, 528 accounts), you may check the "Tax-Deferred" column. Dividends, Irax-Deferred" column. Dividends, Irax-Deferred" column. Dividends, Irax-Deferred column. Dividends, Irax-Deferred column. Dividends, Irax-Deferred, and Capital gains, even if reinvested, must be disclosed as income for assetts held in taxable acceptants.	_	
₹ ¥	Z		X					None						-	Π		Ť	ဂို ကို ခြောင်		
							×	\$1-\$200					<u> </u>	=	1			For assets for which the ressets indicated gain and capital gain accounts. Check accounts XII is for		
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<u> </u>						×		\$1,001-\$							۱,			which dicate palms, for as		
$\vdash \vdash$	\dashv				×	Ĥ		\$5,001-1	-					 ≤	Current Year			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 income by checking the appropriate box below. Dividencts, interest, and capital gains, even if reinvested, must be dieclosed as income for assets held in taxable accounts. Check "None" 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.		
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								\$50,001	\$100,000						ĮŠ.			cked gory o reliev incom		
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								Spouse/	C Income over	\$1,000,00	90*			¥				rest.		

Name: Alexander X
1. Mooney

SCHEDULE A - ASSETS & "UNEARNED INCOME"

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	 	+ + + -		_	None >	
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	7	メメメ	**	<u>~ </u>	\$1,001-\$15,000	
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		 	 		\$25,000,001-\$50,000,000	
	ļi	ļ	ļ ļ	4	Over \$50,000,000	
				-	Spouse/DC Asset over \$1,000,000°	
	メメ				NONE	
					DIVIDENDS	
					RENT	7
	'				INTEREST	7
	 	1 1			CAPITAL GAINS	BLOCK C
	 	!			EXCEPTED/BLIND TRUST	a ĉ
	 ! , ,	4 * *	**	×	TAX-DEFERRED	3
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		-			Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	
	メメナ	/ / / /	大イベ	<u> </u>	None	
					\$1-\$200 =	
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					Spouse/DC Income over \$1,000,000° ≧	7 5
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			1 1 1			

SCHEDULE C - EARNED INCOME

Name: Alexander X. Mooney Page.

Page 4 of 6

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: Military 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 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.

The second section of the			
	7	Am	Amount
Source (iliciade date of receipt for horiorana)	Type	Current Year to Filing	Preceding Year
	Honorarium	\$0	\$500
Examples: Civil War Roundtable (Oct. 2)	Spouse Speech	\$20,000	\$/6,000 \$1,000
Children County States of Characterin	Spurse Seedly	7	Ž
AXM consulting, LLC	Salary	\$0	\$ 81,452

SCHEDULE D - LIABILITIES

Name: Alexander X. Mouney

Page 5 of

exceeded \$10,000. 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 personally liable); and (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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					SP. DC, JT		
				Ехатрів			
				First Bank of Wilmington, DE	Creditor		
				5/98	Date Liability Incurred MOYR		
				Mortgage 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- \$500,000	m	INOUT
					\$500,001- \$1,000,000	71	Amount of Liability
		:			\$1,000,001- \$5,000,000	ဓ	ability
			1		\$5,000,001- \$25,000,000	=	
					\$25,000,001- \$50,000,000	-	
					Over \$50,000,000	۴.	
					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

SCHEDULE F - AGREEMENTS

Name: Alexander X. Mooncy |

Page 6 of 6

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
viested 1000	visited and Muyself in State of Michaelland	regislative Pension Plan Participation

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.

government and any mornished common action as a result of a privileged rejationship recognized by teat. The repeat inter-	privileges rejationally recognizes by ion. By not repeat information uses on scribuling c.
Source (Name and City/State)	Brief Description of Duties
Doe Jones & Smith, Hometown, Homestate	Accounting Services
HSP Direct, Herndon, VA	Business Development / consulting, payments
The Legacy Foundation	7
Leadership Institute, Arlington, VA BOOK payment	Book payment) surearing in