UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	FORM B For New Members, Candidates, and No	FORM B Candidates, and New Employees	Page 1 of 1
Name: David M. Anderson	Daytime Telephone:	ne:	2015 OCT 22 P. 1: 1: 1:
New Member of or Candidate for State: Maryland X U.S. House of Representatives District: 8th FILER Candidates - Date of Election: 4/25/15	and	Check if Amendment	(Office Use Only)
New Officer or Employee Employing Office:		Period Covered: January 1, 2014 to 10/5/2015	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE QUESTIONS	F 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?	X 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 X No
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?	X No F.	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 X
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?	No J.	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	s? X No
ATTACH THE CORRESPONDING SCHEDULE IF YOU THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE	HE SCHEDULES T	EDULE IF YOU ANSWER "YES" HAT YOU ARE REQUIRED TO COMPLETE	S" O COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BO	INFORMATION -		TH OF THESE 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 your dependent child?	on Ethics and certain other "		not be disclosed. Have you excluded from Yes No
EXEMPTION - 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.	ncome, transactions, or liab Committee on Ethics.	ilities of a spouse or dependent child becau	use they meet all three Yes No X

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Name: DAVID ANDESSON

Page 2 10 =

	7	7	SEE		Examples	58.5	homes and vacation homes (unless income during the reporting period); interest in, or income derived resirement program, including the Third you have a privated fund the investment Fund, please check the "If you so choose, you may indicate income source is that of your dependent child (DC), or jointly held in the optional column on the far left. For a detailed discussion or requirements, please refer to the instructions.	For rental and other real proper provide a complete address "rental property," and a city and "rental property," and a city and "For an ownership interest in a that is not publicly traded, at business, the nature of its geographic location in Block A. exclude: Your personal reside	For bank and othe all interest-bearin \$5,000, list every more than \$1,000 i	For all IRAs and 401(k) plans) province account that ex-	identify (a) each asset held if production of income and with a exceeding \$1,000 at the end of the and (b) any other reportable as income which generated more unearned income during the year. Provide complete names of stocks (do not use only licker symbols).	Assets ar	
	741201104	11 (ma) 1/2	Paves	ABC Hedge Fund X	Simon & Schuster	Mega Corp Stock	homes and vacation homes (unless there was rental income during the reporting period); and any financial interest in, or income derived from, a federal resirement program, including the Thrift Savings Plan. If you have a privately-traded fund that is an Excepted investment Fund, please check the "Elf" box. If you have a privately-traded fund that is an Excepted investment Fund, please check the "Elf" box. If you no choose, you may indicate that en easet 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 refer to the instruction booklet.	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	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 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.	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 "unearned" income during the year. Provide complete names of stocks and mutual funds (do not use only ticker symbols).	Assets and/or Income Sources	BLOCK A
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Name: DAVID M. ANDESSUN

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Name: DAVID M. ANDESON

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SCHEDULE C - EARNED INCOME

Name: DAVID M. ANDEISON Page 8 of 11

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.

professional services involving a floridary relationship) are totally prohibited for Members and senior start.	staff.		
	4	Am	Amount
Source (include date of receipt for nonoraria)	Туре	Current Year to Filing	Preceding Year
	Honorarium	\$0	\$500
Examples: Civil War Roundlable (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	\$0 N/A	\$1,000 N/A
WASHINGTON CENTER for Internships + ACADEMIC SEMINAS	chalas	00.008,081	181, 366.96
ADRIENNE OLECK LLC - LAW Firm	Spouse Salary	N/A	NA
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SCHEDULE D - LIABILITIES

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DAVID M. ANDESSOI	
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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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	Example First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE				×	\rightarrow					
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	British Airways VISA Rewards 01/14	01/14	CREDIT CAPD	X	1								

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.

Julius Hapilius Univ. CENTER for Advanced bovERNMENT Studies	ADjust Faculty (2013)
SR. UP STATE RELATIONS (2013-Present WASHINGTON CENTER FOR INTERNATIONS + ACADEMIC SEMINARS	SR. UP STATE RELATIONS (2013-Press
Name of Organization	Position

SCHEDULE D - LIABILITIES

Name: PAVID	
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Page 10	
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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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			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: DAVID M. ANDESSON	
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Date Parties to Agreement	Identify the date, parties to, and general terms of any agreer continuation or deferral of payments by a former or current e	
ement	ment or arrangement that you have employer other than the U.S. govern	
Terms of Agreemens	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.	Name: DAVID M. ANDECSON Page 11 of 11

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)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services
SEE	SEE Schedule C	