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UNITED STATES HOUSE OF REPRESENTATIVES 2014 FINANCIAL DISCLOSURE STATEMENT	Form A  For Use by Members, Officers, and Employees  LEGISLATIVE PER DELIVERED
Name: Terrold Lewis Nadler Dayti	2015 MAY 15 AM 10: 53 MC  (בוש) אנים - 1350 בייב לפים אים בייב און אים בייב ביים אים ביים בי
FILER STATUS  Member of or Candidate for State: 1/2, U.S. House of Representatives District: 1/2	Officer or Employing Office: Employee
REPORT 2014 Annual (Due: May 15, 2015) An	Amendment Termination  Date of Termination:
PRELIMINARY INFORMATION - ANSWER EACH OF THESE QU	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 unearmed income from any reportable asset during the reporting period?	No F. Did 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?
ident child purchase, sell, or real estate in a transaction Yes period?	No G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$375 in value from a single source during the reporting period?
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?	No H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$375 in value from a single source during the reporting period?
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 I. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period?
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	No ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"
IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TI	DEPENDENT, OR TRUST INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS
IPO – Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you the Committee on Ethics for further guidance.	ng during the reporting period? If you answered "yes" to this question, please contact  Yes No X
TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" this report details of such a trust that benefits you, your spouse, or your dependent child?	s and certain other "excepted trusts" need not be disclosed. Have you excluded from Yes No
<b>EXEMPTION</b> – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	transactions, or liabilities of a spouse or your dependent child because they meet all Yes No X

SCHEDULE A - ASSETS & "UNEARNED INCOME" Name: Terrold Lewis Nadler

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SP MYC Emp. Retrovert	System	¥.	IT Mayou Chase	-	HSBC Bank	ABC Hedge Fund X	Examples: Simon & Schuster	SP Mega Corp. Stock Eff	For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	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.	If you have a privately-traded fund that is an Excepted Investment Fund, please check the "EIF" box.	Exclude: Your personal residence, including second fromes and vacation homes (unless there was rental income during the reporting period); and any financial interest 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.	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.	Provide complete names of stocks and mutual funds (do not use only ticker symbols).	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 that generated more than \$200 in "unearned" income during the year.	ty (a) each asset held for investment or	BLOCK A
									None						>					
									\$1-\$1,000							1	have	ation 1. 1 assi	<u> </u>	
				X	X		Indefinite		\$1,001-\$15	,000					c		you have no interest.	metho et wa tgene		
2	7	- 7					- 18€		\$15,001-\$5	0,000						1	-column in its for assets nead by your spouse or dependent child in which you have no interest.	valuation method other than fair market value, please 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."	Indicate value of asset at close of the reporting period if you asset	
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	+					<b>.</b>			Spouse/DC	Asset over \$1,	*000,000				2	1	<b>*</b>	netho	Ē	
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7	2	<b></b>							EXCEPTED	/BLIND TRUST	ī					1	inco	ome (		BLOCK C
hedule	3								TAX-DEFE	RRED						1	ane of	generate tax-deferred income (such as 529 accounts), you may check the column. Dividends, interest, and even if relinvested, must be disclos for assets held in taxable accounts.	~	3 "
(A)	9					코 22	공		Other Type	of Income						1	Jring t	<u>06.5</u> 16	•	•
C	\rac{1}{2}					Partnership Income	Royalties			g., Partnership i	income or Fa	arm income)					if the asset generated no income during the reporting period.		accounts that	
				_					None							5 <u>\$</u>	generated. *Column X	may check category ca	5	
L	<u> </u>		rightarrow	X	X	<u> </u>			\$1-\$200						=	À À	no XI	yheck ory o be d ints.	ž <u>at</u> c	
	<u> </u>		_	<u> </u>					\$201-\$1,00							in which you have no interest.	is for	may check the "None category of income Dividends, interest, must be disclosed accounts. Check	Š	
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	_					_	_		\$50,001-\$1							1	OUSE	"column. For all other assets by checking the appropriate and capital gains, even if as income for assets held "None" if no income was		
<u> </u>	ऻ—		_	_		-			\$100,001-\$						<u>×</u>	-	요 음	asse) opriati wen if is held	Ž. 5	
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ļ	<del>                                      </del>		_			├				Asset with Inco	me over \$1,	*000,000			<u>×</u>	1	enerated. Column XII is for assets held by your spouse or dependent child	may check the "None" column. For all other assets indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, arouse the disclosed as income for assets held in taxable accounts. Check "None" if no income was earned or	n S	
	<del>                                     </del>							S(part)			***								=	$\dashv$
								eart)	P, S, S(part), or E						Leave this column blank if there are no transactions that exceeded \$1,000.	an asset was sold, please indicate as follows: (S (part)).	in the reporting period.	asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000	I Fainsaction	BLOCKE

## SCHEDULE C - EARNED INCOME

Lewis Page 3

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e was \$26,955. In addition, cert	ensated at or above the "senior staff" rate to totally prohibited.	INCOME LIMITS and PROHIBITED INCOME: The 2014 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were totally prohibited.	
	Social Security Act.	<b>EXCLUDE</b> : Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	_
reporting period. For a spouse, I	rmment) totaling \$200 or more during the below.	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 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.	

types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were	totally prohibited.	
Source (include date of receipt for honoraria)	Туре	Amount
	Approved Teaching Fee	\$18,000 \$6,000
Civil War Roundtable (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	\$1,000 N/A
New York State Employee Retirement System	Pension	20.781
City of New York	Spouse Salary	NA
New York City Employee Retirement System	Spouse Pension	NA
	0	

#### **SCHEDULE D - LIABILITIES**

Name: Jerrald Lewis Page\_

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. 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.

						:	₽	Amount of Liability	of Lia	bility				
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SP.	Creditor	Date Liability Incurred MO/YR	Type of Liability	\$10,001- \$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	\$5,000,001- \$25,000,000	\$25,000,001- \$50,000,000	Over \$50,000,000	Over \$1,000,000* (Spouse/DC Liability)
	Example First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE				×							
TT	Wells Fargo Bank	2/13	Mortgage orlergonal Residence					X						
	,	,	MYC (mot rested)											
R	Gordon Kupperstein	4/13	Paychase / oan on vacation		X									
		-	Home, Cortlant, My (not mented)	•	•									
ħ	SP Chage Credit Cord Services 12/10	12/10	Revolving Credit Card	X										
SCH	SCHEDULE E - POSITIONS			٠										

#### SCHEDOLE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year 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, fratemal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

		Chair	Position
		East of Hadson Rail Freight Task Force (uncompensated)	Name of Organization

### **SCHEDULE F - AGREEMENTS**

Name: (
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Page 5 of 7
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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. 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;

		7	6/13	Date
			6/73 N.Y.S. Employee Retirement System	Parties to Agreement
		State employee	To provide a pension after service as a New York	Terms of Agreement

#### **SCHEDULE G - GIFTS**

Report the source (by name), a brief description, and the value of all gifts totaling more than \$375 received by you, your spouse, or your dependent child from any source during the year. **Exclude**: Gifts from relatives, gifts of personal hospitality from an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$150 or less need not be added towards the \$375 disclosure threshold. **Note**: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Mr. Joseph Smith, Arlington, VA  Silver Platter (determination of personal friendship received from the		
Mr. Joseph Smith, Arlington, VA	Source	Description
	Example: Mr. Joseph Smith, Arlington, VA	Silver Platter (determination of personal friendship received from the Ethics Committee)

# **SCHEDULE H – TRAVEL PAYMENTS and REIMBURSEMENTS**

Name: Terrold
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Page 6 of 7

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$375 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

**EXCLUDE**: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to

	Source	Date(s)	City of Departure – Destination — City of Return	Lodging? (Y/N)	Food? (Y/N)	Family Member Included? (Y/N)
	Government of China (MECEA)	Aug. 6-11	рс-Веіјіту, China - DC	Υ	Υ	Z
examples:	Habitat for Humanity (charity fundraiser)	Mar. 3-4	DC-Boston-DC	Υ	Υ	Υ
Ameri	American Ignael Education Foundation Aug 2-13	Aug 2-13	DC-Tel Aniv-DC	V	7	1
		, <u> </u>		`	`	
200g	Progressive Comaress	Fcb 6-9	DC-Philadelphia	Y	Y	$\mathcal{N}$
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FILER NOTES (Optional)

Name: Leveld Nadler

Page 7 of 7

					NOTE NUMBER
			letter with the Clerk of the House.	I inadvertenty listed my mortgage on Schedule D on CY 14 with the	NOTES