UNITED STATES HOUSE OF REPRESENTATIVES	FORM B For New Members, Candidates, and New Employees	Page 1 of 2
Name: Ge offrey M. Young	Daytime Telephone:	17 OCT 25 PM 1: 34
New Member of or Candidate for State: U.S. House of Representatives District: Candidates – Date of Election: 11/6/18	Check if Amendment	OCT 1 (BIT 204 Only)
New Officer or Employee Staff File Employing Office: Shared	Staff Filer Type (If Applicable): Period Covered: January 1,	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	F THESE 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. Receive more than \$200 in uneamed income from any reportable asset during the reporting period?	No E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	g the reporting yes No
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 F. Did you have any reponsation outside entity during the year up through the date	ortable agreement or arrangement with an reporting period or in the current calendar Yes No of filing?
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. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	r years? Yes No No
ATTACH THE CORR	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	S" COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>BO</u>		TH OF THESE QUESTIONS
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 this report details of such a trust that benefits you, your spouse, or dependent child?	e on Ethics and certain other "excepted trusts" need not be disclosed.	Have you excluded Yes No M
EXEMPTION – Have you excluded from this report any other assets, "uneamed" income, or liabilities of a spouse or dependent ch exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	nitee on Ethics.	et all three tests for Yes No 🛛

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Geoffrey M. Young

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í		New Alternatives	27	ぐ		Ğ			geographic location in Block A. Exclude: Your personal residence, including second homes 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. If you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box. If you so choose, you may indicate that an asset or income source is that or 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 rafer 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. The state of the state is an expression of the 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).	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.	Assets and/or income Sources	
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		₹.	Fidelity Japan	Deferred	ABC Hedge Fund	Simon & Schuster	Mega Corp Stock		cation in Block A. cation in Block A. githe reporting period); and any financial or income (unless there was rental githe reporting period); and any financial or income derived from, a federal ogram, including the Thrift Savings Plan. privately-traded fund that is an Excepted und, please check the "Elf" box. ce is that of your spouse (SP) or lid (DC), or jointly held with anyone (JT), all column on the far left.	eal pl add a city srest trade	accor ancia	ther the veds t	mes o	each asset held if income and with 1,000 at the end of the reportable asset that more than \$\fo\$ the year.	or_	BLO
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		<u> </u>	-			-	\vdash	\rightarrow	25,000,001-\$50,000,000 Over \$50,000,000				*Column M is for assets held by your spouse or dependent child in which you have no interest.	Indicate value of asset at close of the reporting period. If you use a 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."		
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		×		×		+	-		CAPITAL GAINS				None if the asset gene during the reporting period.	s that defe	ġ,	BLOCK C
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					Partnership Income	Royalbes		(Other Type of Income (Specify: e.g., Partnership Income or	Farm Income)			"None" if the asset generated no income during the reporting period.	Check all columns that apply. For accounts that generate tax-deferred income (such as 401(tk), IRA, or 529 accounts), you may check the "Tax-Deferred" column. Dividends, interest, and capital gains, even if relivested, must be disclosed as income for each build in taxable accounts.		
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		ļ	├—	-	├	+	-	+	\$100,001-\$1,000,000 🔻					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. Dividends, interest, and capital gains, even if reinvested, must be disclosed 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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			L]			!	Spouse/DC Income over \$1,000,000*		잘	<u> </u>		its.		

SCHEDULE C - EARNED INCOME

Name: Geaffrey M. Young Page 3 of 5

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 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,765. 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.

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

		mA.	Amount
Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year
	Honorarium	\$0	\$500
Examples: Civil War Roundtable (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	\$0 N/A	\$1,000 N/A
Kentucky Retirement Systems		\$3,264	\$4,896

SCHEDULE D - LIABILITIES

Name: Geoffrey M. Young

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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. 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 *Column K is for liabilities held solely by your spouse or dependent child.

				SP, DC, JT		
		None	Example			
			First Bank of Wilmington, DE	Creditor		
			5/98	Liability Incurred MO/YR	!	
			Mortgage on Rental Property, Dover, DE	Type of Liability		
	:			\$10,001- \$15,000	>	
				\$15,001- \$50,000	D	
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				\$25,000,001- \$50,000,000	_	
				Over \$50,000,000	_	
				Over \$1,000,000* (Spouse/DC Liability)	×	

SCHEDULE E - POSITIONS

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. 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,

Position	Name of Organization
None	

SCHEDULE F - AGREEMENTS

:	
	Name:
	beoffrey
	M. Young
	Pa
	Page 5 of 5

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
2005	2005 Ky Retirement System	Monthly pension of \$400 to \$550 per month
"		

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	9 9 9 9 9 9 9
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services	
	2000		i j

CAMPAIGN NOTICE

OCT 1 6 2017

REGARDING FINANCIAL DISCLOSURE REQUIREMENT CENTER

If you have not yet raised (either through contributions or loans from yourseOCT 25 PM 1: 34 others) or spent in excess of \$5,000 for your campaign, or if you have withdrawn your candidacy, please indicate your status and sign and date below. U.S. HOUSE OF REPRESENTATIVES

The Honorable Karen L. Haas, Clerk
Office of the Clerk, U.S. House of Representatives
Legislative Resource Center
135 Cannon House Office Building
Washington, DC 20515-6601

Dear Madam Clerk:
This is to notify you that I have not yet raised (either through contributions or loans from myself or others) or spent in excess of \$5,000 for my campaign for the U.S. House of Representatives. I understand that when I do raise or spend in excess of \$5,000 for my campaign, I must file a Financial Disclosure Statement with the Clerk of the House of Representatives according to the deadlines set out on pages 2 and 3 of the Financial Disclosure Instruction booklet, a copy of which has been provided to me by the Clerk.
This is to notify you that under the laws of the state of

(THIS PAGE WILL BE MADE PUBLICLY AVAILABLE)

RETURN COMPLETED STATEMENT TO:

The Clerk, U.S. House of Representatives Legislative Resource Center 135 Cannon House Office Building Washington, DC 20515-6601