

UNITED STATES HOUSE OF REPRESENTATIVES 2018 FINANCIAL DISCLOSURE STATEMENT	Form A For Use by Members, Officers, and Employees	2019 JUN 13 PH 2: 111
		(Office Use Only).
Name: (Swen J. Moore D	Daytime Telephone: 202-235-4522	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
FILER Member of the U.S. State: 14/54 STATUS House of Representatives District: 4	Officer or Employing Office:	Staff Filer Type: (If Applicable) Shered Principal Assistant
REPORT 2018 Annual (Due: May 15, 2019)	Amendment Termination Date of Termination:	ination:
PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	UESTIONS	
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 unearned income from any reportable asset during the reporting period?	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?	eament or arrangement with an Yes X No
B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction     Yes exceeding \$1,000 during the reporting period?	No G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$390 in value from a single source during the reporting period?	d receive any Yes No No
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or persion/IRA distributions) of \$200 or more during the Yes reporting period?		spendent child receive any sor travel totaing more than during the reporting period?
©. Did you, your spouse, or your dependent child have any reportable Yes Eability (more than \$10,000) at any point during the reporting period?	No iieu of paying you for a speech, appearance, or reporting period?	make a donation to charity in searance, or article during the Yes No
E. Did you hold any reportable positions during the reporting period or Yes in the current calender year up through the date of filing?	E CORRESP	ONDING SCHEDULE IF YOU ANSWER "YES"
IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR	OR TRUST INFORMATION - ANSWER EACH OF	F 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 answered 'you contact the Committee on Ethics for further guidance.	Offering during the reporting period? If you answered 'yes' to this qu	es" to this question, please Yes No X
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be different this report details of such a trust that benefits you, your spouse, or dependent child?	s and certain other "excepted trusts" need not be d	isclosed. Have you excluded Yes No X
EXEMPTION - Have you excluded from this report any other assets, "uncerned" income, transactions, or liabilities of a spouse or your deperal three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.		ident child because they meet Yes No X

SCHEDULE A – ASSETS & "UNEARNED INCOME"	
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			_	-			E)	T	For a detailed discussion of Schedule A requirements please refer to the instruction bodder.	if you so choose, you may indicate that an asset of income source is that of your spouse (SP) or department child (DC), or joinly hald with anyone (JT), in the optional column on the far left	ll you report a privately-traded fund that is an fixcepts eventment Fund, please check the "EH" box.	Educiation, Your personal residence, including second fechalist and vacabon konne (unless there was moral societie during the reporting period), and any financial resease in, or income derived from, a federal researent program, including the Thifft Savings Plan.	For an ownership internet in a privately-held business ther is not publicly tracked, state the name of the business, the nature of its activities, and its geographic location in Block A	For restal and other real properly held for investment, provide a complete address or description, e.g., "rental properly," and a city and state.	For bank and other ceah accounts, total the amount in sal sylmest-bearing accounts, if the total is over \$5,000, list away francial versitudion where there is a more than \$1,000 in mismest-bearing accounts.	AU(A) plans) provide the value for each asset need in the account that exceeds the reporting thresholds.	1	Provide complete names of stroks and mutual funds (do not use only ticker symbols)	hus generated during the year	production of income and with a fair market value exceeding \$1,000 at the end of the reputing period, and (b) any other reportable agent or source of income	•	}
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## SCHEDULE C - EARNED INCOME

Name: GWEN S. MOORS Page 3 of 6

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#### SCHEDULE D - LIABILITIES

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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. 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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	lwante, W	- Citizens South	First Bank of Wilmington, DE	Creditor		
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	Reibre	Montgage on Gersmal	Mortgage on Rental Property, Dover, DE	Type of Liability		
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1		1	1	Over \$1,000,000* (Spouse/DC Liability)	*	1

#### SCHEDULE 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:

Positione hald in any reliminary social trategral or relative lettical carties and carmination compensations.

Positions held in any religious, social, fraternal, or political of Position	Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and position  Name of Organization

### SCHEDULE F - AGREEMENTS

ement that you have wit	
sment that you have with respect to: future employment; a leave of absence during the period of government service;	Name: Gwen S. Moores
of government service;	Page 5 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

Date	Parties to Agreement	Terms of Agreement
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#### SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$390 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 (which may not include a registered lobbyist or foreign agent), 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 \$156 or less need not be added towards the \$390 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule and some gifts require prior approval of the Committee on Ethics.

	Source	Description	Value
Example:	Mr. Joseph Smith, Arington, VA	Silver Platter (prior detarmination of personal friendably received from the Committee on Ethics)	\$400

# SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENT

identify the source and list travel titnerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$390 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 the filer:

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龙	٧	۲	DC-Beijing, China-DC	Aug 5-11	Covernment of Chine (MECEA)
Family Member Included? (Y/N)	Food? (Y/N)	Lodging? (YA4)	City of Departure-Destination-City of Return	Date(s)	85/MOS