122.14							•				44 - 4 - 4		******
	EXEMPTION – Have you excluded from this report any other assets, "uneamed" income, or liabilities of a spouse or dependexemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	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?	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>BOTH</u> OF THESE QUESTIONS	THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU	ATTACH THE CORRESPONDING SCHEDULE IF	D. Did you, your spouse, or your dependent child have any reportable Yes X No liability (more than \$10,000) at any point 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?	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?	PRELIMINARY INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS	New Officer or Employee Employing Office:	New Member of or Candidate for State: MICHIGTHN U.S. House of Representatives District: 14th Candidates - Date of Election: NOVEMBER, \$ 2016	Name: VANESSA M. MOSS Daytime Telephone:	UNITED STATES HOUSE OF REPRESENTATIVES For New Members, Candidates,
	ent child because they meet all three tests for	ther "excepted trusts" need not be disclosed. Have you excluded from Yes	N - ANSWER <u>BOTH</u> OF THESE QUESTIONS	S THAT YOU ARE REQUIRED TO COMPLETE	CHEDULE IF YOU ANSWER "YES"	J. Did you receive compensation of more than \$5,000 from a single Yes source in the current year and two prior years?	F. Do 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?	E. Did you hold any reportable positions during the reporting period Yes or in the current calendar year up through the date of filing?	STIONS	Period Covered: January 1, A \$200 penalty shall be assessed against any to individual who files more than 30 days late.	Check if Amendment (Office Use Only)	20 6 MAY	FORM B MAY 0.5 2016 S, Candidates, and New Employees SLATIVE RESSURCE CENTS
		No X				× 86	×	No X		sed against any າ 30 days late.	nly)		Page 1 of 5

.

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: VANESSA M. MOSS

⊊ [1	ŀ	1	Ţ		ងរុ	3.8	nequ For	2 6 5 7 2 5 5 3 3	in s	hon hon linca		a g F	352	, 5	출간	<u> </u>	5 5	end pro		
lies additional ahoste it more energies is required					BANK ACCOUNT	ABC Hedge Fund X	Examples: Simon & Schuster	Mega Corp Stock	티	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 informe during the reporting period; and any financial inferest 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.	rou cent and other cean accounts, fut all enterest-bearing accounts. If the total is own \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.	account that exceeds the reporting thresholds.	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in	(do not use only licker symbols).	"uneamed" income during the year.		Assets and/or Income Sources	BLOCK A
• •			1		1	-	t	t	Н	None				9 W G			*	<u> </u>				-	
ł			†	1	 	1	†	†	7	\$1-\$1,000	, I						BO		5	included only be should be "None." "Column M is for s	Indicate value of asset at close you use a valuation method of please specify the method used. If an asset was sold during the		ı
ŀ					×		E.	H		\$1,001-\$1									w nic	5 7 9	sset		ŀ
ŀ				 	<u> </u>	1	Today.	┝	_	\$15,001-\$			-				-	ĺ	_ \S				
ŀ		-	1	 	╆┈	├	ľ	١,	.	\$50,001-\$		-					_		O TO	6	f age	<	
ŀ				<u> </u>		 	╁╌	╁	-	\$100,001-							_		3 6			힐	_
ŀ		_ · -				×	t	╁	ᅥ	\$250,001-							<u> </u>		in a		를 <mark>들</mark> 었다.	9	Ž
ŀ			-	\vdash	\vdash	 	╁	+	\dashv		\$1,000,000						-		child in which you have no interest.	nen c	5 4 5 6 6 6 6	Ž	BLOCK B
ŀ				├	-	 	╁	\vdash	-		\$1,000,000 1-\$5,000,000						_		child in which you have no interest.	included only because it generated income, the should be "None." "Collimp M is for sessis held by your spouse or deci	Indicate value of asset at dose 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	Value of Asset	
ŀ			ł	 		 	╁	╁	\dashv								_	ŀ	2			•	ı
ŀ			-	├	 -	 	╁╴	╁	\dashv		1-\$25,000,000				•	·			Š				I
ŀ			ļ	╁	├		╁	╁	\dashv	· . · · · · · ·	01-\$50,000,00 000,000	,					_	i	Ę		g \$2		ŀ
ŀ			<u> </u>	 	├		╀	╀		Over \$50,		4 000 00	····	* .			-1		5	value	물 활정		ı
ŀ				<u> </u>	<u> </u>		╄	╄	_		C Asset over 1	1,000,00					E .	_					_
ŀ				 	~	ļ	-	┡		NONE				*			_		generated no	icon S			
L			<u> </u>	ļ	_	<u> </u>	L	Ľ	<u> </u>	DIVIDEND)S 							•		3	78		
							L		_[RENT									8	Q N	\$ > \$ 8	Ţ	
I							l		ſ	INTERES	Ţ						i			1 St.	3 2 3	8	9
							Г	Γ	J	CAPITAL	GAINS								income during	Ę	is that apply. Fix-deferred incon 529 accounts	Type of Income	BLOCK C
ı							T	T	7	EXCEPTE	DVBLIND TRU	ST T								3 2	6 8 B	ᇟ	ဂ်
t	\neg					_	1	┢	_	TAX-DEFE	RRED								ø =	- - -		₹	
						Partnership Income	Royalles			Other Type	e of Income (S)	ecify: e.(g., Partnership Inco	me or Farm Inco	эте)				income during the reporting	even if reinvested, must be disclosed as income for assets held in taxable	Check all columns that apply. For accounts that generate tax-deferred income (such as 40f(k), IRA, or 529 accounts), you may check the Tax-Deferred column. Included the formers and control of the columns of the colum		
ſ										None						-				ģ			
								>	٠	\$1-\$200						=	l			Column	For assets other esset and capits accounts.		ı
										\$201-\$1,0	00					. =			•	≚			
										\$1,001-\$2,	.500					Ä				Š.	indic geir		
							×			\$2,501-\$5,	,000				,	٧	ξ.			888			
Γ						×			$ oldsymbol{ extstyle \in 1} $	\$5,001-\$19	5,000					≤	Current Year			XII is for assets held by your spouse or dependent child in which you have no interest	For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets inclicate 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.		
T									o	\$15,001-\$	50,000					≦.	اجًا			8	n med character		
ŗ									\Box	\$50,001-\$	100,000					≨	ear	1		y yo	ked bry c einvi		
T									T	\$100,0014	\$1,000,000					×				ફ			
Ţ										\$1,000,001	1-\$5,000,000					×				Š.	as et chune Det	À	
ľ									T	Over \$5,00	00,000			,		≱,				ò	by c	Amount of Income	_ [
r									_†	Spouse/D0	Income over	\$1,000,00	00*			잘				iepe B	정 등 일 교	¥	BLOCK D
ľ										None						_				nden	Ring Bloc	¥	옭
r	\neg						П	Г	\top	\$1-\$200	 					=				<u> 5</u>	Tale the	č	Ĭ
ľ							П	>		\$201-\$1,00	20				ъ,	=	li			<u> 5</u>	o de u	Ħe	ı
İ							П		1	\$1,001-\$2,	500	•				2	ا ہا			₩			
	\neg 1								す	\$2,501-\$5,	000					<	Preceding Year			y y			
ı	一	\neg					×		\top	\$5,001-\$15	5,000					≤	ě			귫	₹ ₹ ₹		
ı		\neg				×	П		寸	\$15,001-\$8	50,000					≦:	กูด			₹	7 ¥ 6 € 1		ļ
							П		\dashv	\$50,001-\$1	000,000					¥	ğ) ji			- 1
F							П	Г	寸	\$100,001-4	1,000,000					×	뽁			188 188	2 d 8		
r			•				П		_		\$5,000,000					×				•-			
†			٠.				Н	Г	+	Over \$5,00						×					t in		
1	-	_			-		H	\vdash	\dashv		income over	1,000.00	00°								or a		
L								_		-,						=		Ь			• # <u>=</u>		

Use additional sheets if more space is required.

SCHEDULE C - EARNED INCOME

Name: 1 ANSSA Page

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 2015 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,225. The 2016 limit is \$27,495. 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.

		•					N SE4	Civil War Roundtable (Oct. 2) Ontario County Board of Education Spouse Salary	ABC Trade Association, Baltimore, MD (July 15) State of Maryland) () () () () () () () () () (
							30,000	SO.	\$0 \$20,000	Current Year to Filing	
- 1						_	23,158				Amount

SCHEDULE D - LIABILITIES

Name: VANESSA M, WOSS Page 4 of S

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, perent, 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.

_	1	7	Ţ			<u> </u>		
						DC, JT		_
				0	Example			
			V	U.S. DEPTY ED	First Benk of Wilmington, DE	Creditor		-
					5/98	Date Liability Incurred MO/YR		
				STUBENT LOANS	Mortgage on Rental Property, Dover, DE	Type of Liability		
						\$10,001- \$15,000	>	
						\$15,001- \$50,000	æ	
				×		\$50,001- \$100,000	n	
					×	\$100,001- \$250,000	0	
				ď		\$250,001- \$500,000	m	moun
						\$500,001- \$1,000,000	***	Amount of Liability
						\$1,000,001- \$5,000,000	Ø	ability
						\$5,000,001- \$25,000,000	I	
						\$25,000,001- \$50,000,000	_	
						Over \$50,000,000	٤.	
						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.

	1	1	}	1
			OWNER	Position
			VANESSA M. MOSS - WILSON + ASSOCIATES, MITOLINEY	Name of Organization

SC

SCHEDU	SCHEDULE F - AGREEMENTS	
Identify the dat continuation or	Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in	/e with respect to: future employment; a leave of absence during the period of government service; этптеят; от continuing participation in an employee welfare or benefit plan maintained by a former employer.
Date	Parties to Agreement	Terms of Agreement
	NA	

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
VANSSSA MOSS-WILSON ASSOC ATTY	LEGAL SERVICES