FORM A Page 1 of 4 2019 JUL -1 PH 5: 48 LEGISLATIVE RESOURCE CONTEN RED

Yes 🗍 No 🐼	come, transactions, or liabilities of a spouse or dependent child es" unless you have first consulted with the Committee on	Exemptions 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 Standards of Official Conduct.
Yes 🗌 No 🕢	tee on Standards of Official Conduct and certain other "excepted details of such a trust benefiting you, your spouse, or dependent	Trusts- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?
STIONS	ATION ANSWER EACH OF THESE QUESTIONS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EA
	schedule attached for each "Yes" response.	If yes, complete and attach Schedule V.
and the appropriate	Each question in this part must be answered and the appropriate	V. (more than \$10,000) during the reporting period?
	If yes, complete and attach Schedule IX.	If yes, complete and attach Schedule IV.
utside Yes   No	Did you have any reportable agreement or arrangement with an outside IX. entity?	Did you, your spouse, or dependent child purchase, sell, or exchange any IV. reportable asset in a transaction exceeding \$1,000 during the reporting  Yes No with
	If yes, complete and attach Schedule VIII.	If yes, complete and attach Schedule III.
ng in the Yes 💟 No 🗌	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Did you, your spouse, or a dependent child receive "unearned" income of III. more than \$200 in the reporting period or hold any reportable asset worth Yes No more than \$1,000 at the end of the period?
	If yes, complete and attach Schedule VII.	If yes, complete and attach Schedule II.
e travel or an \$335 Yes ☐ No ☑	Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$335 from one source)?	Did any individual or organization make a donation to charity in lieu of paying  No   Yes   No   No   No   No   No   No   No   N
	If yes, complete and attach Schedule VI.	If yes, complete and attach Schedule I.
egiftin Perwise Yes 🗀 No 🔀	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)?	Did you of your spouse have "earned" Income (e.g., salaries or fees) of \$200  Yes : No ::
	QUESTIONS	PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS
more than 30 days late.	Termination Date:	Report ☐ Annual (May 15) ☐ Amendment • ☐ Termination
be assessed against	Employee	B House of Representative District: 02
A \$200 penalty shall	Employing Office:	Filer  Member of the U.S. State: PA
WomDELJN/FI	(Daytime Telephone)	(Full Name)
HAN	202-225-4001	Chaka Fattah
	For use by Members, officers, and employees	CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT
	FORM A Page 1 of 4	UNITED STATES HOUSE OF REPRESENTATIVES

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 preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. SCHEDULE I - EARNED INCOME PA State Employee Retirement System General Electric Source Pension Spouse Salary Name Chaka Fattah Type \$4,586 N X Amount Page 2 of 4

THE PROPERTY OF THE PROPERTY O	LEDULE III - ASSETS AND "LINEARNED" INCOME
Name	
Chaka Fattah	
 Page 3 of	

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SP GE Common Stock	If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent or sibling; any deposits totaling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S.  Government retirement programs.	sizite the name of the business, the nature of its activities, and its geographic location in Block A. For additional information, see the instruction booklet.	directed, name the institution holding the account and its value at the end of the reporting period. For an active business that is not publicly traded,	provide the value and income information on each asset in the account that exceeds the reporting threshold. For retirement plans that are not self-	funds (do not use ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) that are self directed (i.e., plans in which you have	\$200 in "uneamed" income during the year. For rental property or land, provide a complete address. Provide full names of stocks and mutual	tair market value exceeding \$1,000 at the end of the reporting period, and (b) any other assets or sources of income which generated more than	Asset and/or Income Source	BLOCK A	SCHEDOLE III - ASSETS AND "UNEARNED" INCOME
\$100,001 - \$250,000			"None,"	it is generated income, the value should be	asset was sold and is included only because	than fair market value, please specify the	year. If you use a valuation method other	Value of Asset at close of reporting	Year-End	вгоск в	E Name Chaka Fattah
Other: 401K		oning he catelled year.	be listed as income. Check "None" if asset did not generate any income	Dividends and Interest, even if reinvested, should	income by checking the annronriate hay below	may write "NA". For all other assets including all	not allow you to choose specific investments, you	Check all columns that apply. For retirement plans or accounts that do	Type of Income	вгоск с	attah
NONE			no income was earned or generated.	if reinvested, should be listed as income. Check "None" if	appropriate box below.  Olividends and interest even	other assets, including all IRAs, indicate the category of	investments, you may write "NA" for income. For all	For retirement plans or accounts that do not allow you to choose specific	Amount of Income	вгоск D	
N/A						in reporting year.	exchanges (E) exceeding \$1,000	had purchases (P), sales (S), or	Transaction	вгоск Е	Page 3 of 4

educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I. representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor,

Position	Name of Organization
Board Member	Philadelphia Futures