HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES 2014 FINANCIAL DISCLOSURE STATEMENT Tray Gowdy 2014 Annual (Due: May 15, 2015) Member of or Candidate for U.S. House of Representatives District: State: 40 2 Daytime Telephone: 864-809 - 0917 Amendment For Use by Members, Officers, and Employees Form A Employee Officer or Employing Office: Termination Date of Termination: U.S. HOUSE OF REPRESENTATIVES 2015 MAY 13 AM 9: 07

(Office Use Only)

Name:

FILER STATUS

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REPORT TYPE

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PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

YOU ANSWER "YES"	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	Yes No	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?
Yes No X	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?	Yes X No	D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?
Yes No X	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?	Yes X 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?
Yes No X	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?	Yes No	B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period?
Yes X No	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?	Yes 🔀 No	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?

IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS

SCHEDUL

A XOUB	JLE A – ASSETS &
BI DCX B	ILE A – ASSETS & "UNEARNED INCOME"
3 X30 IB	Name: Trey Gowery
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PLOCK F	2 of S

& Retrement System		Examples: Senon & Schuster	SP Mega Corp. Stock Elif	For bank and other cash accounts, lotal the amount in all interest-bearing accounts. If the lotal is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts. For rental and other real property held for investment, provide a complete address or description, a.g., rental property, and a city and state. For an ownership inderest 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 hones state that name of the pushiness, the nature of its activities, and its geographic location hones (unless thate was rental income during the reporting period); and any financial income during the reporting period); and any financial inferest in, or income derived from a forcing increment program, including the Thrift Savings Plan. If you have a privately-traded fund that its an Excepted investment Fund, please check the "Eifforcing the source is that of your spouse (SP) or dependent orded (DC), or jointly held with anyone (LT), in the optional column on the far left. For a distillated discussion of Specially A sequirements, please refer to the instruction booklet.	Asset and/or income Source Source Source sonty, (a) each sess had 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 that generated more than \$200 in "unearned income thing sentanded more than \$200 in "unearned income during the year." Provide complete names of stocks and mutual funds (so not use only licker symbols). For all IRAs and other retirement plans (such as 401(t) plans) provide bro value for each asset held in the account that exceeds the reporting investigits.
		Indeface	×	None	BLOCK B Value of Asset Value of Asset Value of Asset Value of Asset Findicate value of asset at close of the reporting period. If you use a valuation method other han fair market value, please specify the method used. Ye an asset was sold during the reporting period and is included only because in generated income, the reporting period and is included only because it is for assets held by your spouse or dependent child in which you have no interest.
2		Partiesho	×	NONE DMDENDS RENT INTEREST CAPITAL GAINS EXCEPTEDIBLIND TRUST TAX-DEFERRED Other Type of Income (Specify, e.g., Partnership Income or Farm Income)	BLOCK C Type of Income Chock all columns that apply. For accounts that generate ba-deferred income (such as 401(4), IRA, or 529 accounts), you may check the Tax-Deserred column. Dividends, Interest, and capital gains, even if reinvested, must be disclosed as Income for assess held in taxable accounts. Check Nonc' if the asset generated no income during the reporting period.
	<		x	None — \$1-\$200 — \$201-\$1,000 — \$1,001-\$2,500 ≥ \$2,501-\$5,000 <	Amount of Income 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, Indianate, and capital galins, even if retirested, must be disclosed as income for assets held in traable accounts. Check "None" if no income was reamed or generated. **Column XII is for assets held by your spouse or dependent child in which you have no interest.
			S(part)	Leave this column blank if there are no transactions that exceeded \$1,000.	Transaction Industriable Interpretation Industriable Interpretation Interpretatio

SCHEDULE C - EARNED INCOME

Name: Trey Gowely	
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st 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 enumerated amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.	
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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: 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. safed at or above the "senior staff" rate totally prohibited.	was \$26,955. In addition, certain
Source (include date of receipt for honoraria)	Туре	Amount
Examples: Sale of Manyland Cox 21	Approved Teaching Fee Logistative Pention Spouse Speech	200,13 200,003 200,003
Ļ	Spouse Salary	N/A
Spartanburg County School District 6	Spouse Salary	34,977
Se Judges - Solicitors Retirement System	Solicitors Pension	488 12
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SCHEDULE D - LIABILITIES

Name: Trzy Gowdy
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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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)	Sallie mas shount			Farst Bank of Warrington, OE	Creditor		
	1/0 1/0	4/09	5/09	5/98	Date Liability Incurred MO/YR		
dependent child	Student loon by	Mortgage on 2212 Edge Field Rd	unsecured Term Loca - Kurchose of SC Solicitus; Edudges Retirement	Mortgege on Rental Property, Daver, DE	Type of Liability		
					\$10,001- \$15,000	>	
	×				\$15,001- \$50,000	•	
					\$50,001- \$100,000	c	
			×	×	\$100,001- \$250,000	•	▶
	_	×			\$250,001- \$500,000	m	moun
			:		\$500,001- \$1,000,000	71	Amount of Liability
					\$1,000,001- \$5,000,000	၈	ability
					\$5,000,001- \$25,000,000	x	
					\$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, held during the current or prior calendar year as an officer, furstee 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.

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Position	Name of Organization

SCHEDULE F - AGREEMENTS

Name: Tru Coudu
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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
12/10	12/10 Muself + the State of South Carolina	Continued participation in the state pension program

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.

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Source	Description	Value
Example: Mr. Joseph Smith, Arlington, VA	Silver Platter (dotormination of personal friendship received from the Ethics Committee)	\$400