

UNITED STATES HOUSE OF REPRESENTATIVES 2013 FINANCIAL DISCLOSURE STATEMENT

Form A
For Use by Members, Officers, and Employees

FEB 21 2015

Page 1 of 7

LEGISLATIVE RESOURCE CENTER

2015 MAR -2 PM 12:43

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Name: ALLYSON Y. SCHWARTZ

Daytime Telephone: _____

(Office Use Only)

FILER STATUS	<input checked="" type="checkbox"/> Member of or Candidate for U.S. House of Representatives	State: <u>PA</u> District: <u>13</u>	<input type="checkbox"/> Officer or Employee	Employing Office: _____
REPORT TYPE	<input checked="" type="checkbox"/> 2013 Annual (Due: May 15, 2014) <u>2014</u>	<input type="checkbox"/> Amendment	<input checked="" type="checkbox"/> Termination Date: <u>1/2/15</u>	

PRELIMINARY INFORMATION - ANSWER EACH OF 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. Make more than \$200 in unearned income from any reportable asset during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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 <input checked="" type="checkbox"/> No <input type="checkbox"/>	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$350 in value from a single source during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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 <input checked="" type="checkbox"/> No <input type="checkbox"/>	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$350 in value from a single source during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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 <input type="checkbox"/> No <input checked="" type="checkbox"/>	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 <input type="checkbox"/> No <input checked="" type="checkbox"/>
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	

IPO, EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF 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 "yes" to this question, please contact the Committee on Ethics for further guidance.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
EXEMPTION - 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 Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Page 2 of 7

Use additional sheets if more space is required

Page 3 of 7

Use additional sheets if more space is required.

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name:

ALYSON Y. SCHWARTZ

Page

4 of 7

BLOCK A Asset and/or Income Source		BLOCK B Value of Asset													BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction			
SP, DC, JT	ASSET NAME	None	A \$1-\$1,000	B \$1-\$1,000	C \$1,001-\$15,000	D \$15,001-\$50,000	E \$50,001-\$100,000	F \$100,001-\$250,000	G \$250,001-\$500,000	H \$500,001-\$1,000,000	I \$1,000,001-\$5,000,000	J \$5,000,001-\$25,000,000	K \$25,000,001-\$50,000,000	L Over \$50,000,000	M Spouse/DC Asset over \$1,000,000*	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	TAX DEFERRED	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	None	II \$1-\$200	III \$201-\$1,000	IV \$1,001-\$2,500	V \$2,501-\$5,000	VI \$5,001-\$15,000	VII \$15,001-\$50,000	VIII \$50,001-\$100,000	IX \$100,001-\$250,000	X \$250,001-\$500,000	XI \$500,001-\$1,000,000	XII Spouse/DC Asset with income over \$1,000,000*	P, S, S(part), or E
	US Capital Growth Fund																																			
	Fidelity Fund																																			
	Schwab Mutual Beacon																																			
	Schwab SIF 500																																			
	Schwab T. Rowe Price SmallCap																																			
	Wellie Energy Bond Fund																																			
	Wellie Energy Bond Funds																																			
	PNC Fidelity Advisor Freedom Fund																																			
	Vanguard Health Care																																			
	Vanguard 500 Index																																			
	Vanguard US Growth																																			
	Vanguard Target Retirement 2025																																			
	TIAA CREF Fixed Acc																																			
	TIAA CREF Growth Income																																			
	TIAA CREF Social Change																																			

Page 5 of 7

Use additional sheets if more space is required.

SCHEDULE B - TRANSACTIONS

Name:

ALYSON Y. SCHUMMER

Page

6 of 7

Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the reporting period of any security or real property held by you, your spouse, or your dependent child for investment or the production of income. Include transactions that resulted in a capital loss. Provide a brief description of an exchange transaction. Exclude transactions between you, your spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please choose "partial sale" as the type of transaction.

Capital Gains: If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box, unless it was an asset in a tax-deferred account, and disclose the capital gain income on Schedule A.

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

SP, DC, JT	Asset	Type of Transaction				Check Box if Capital Gain Exceeded \$200	Date (MM/DA/YR) or Quarterly, Monthly, or Bi-weekly, if applicable	Amount of Transaction							
		Purchase	Sale	Partial Sale	Exchange			A	B	C	D	E	F	G	H
SP	Example Mega Corp. Stock														
JT	Vanguard 500 Index					X	9/17/14		X						
JT	Vanguard Health Care						9/17/14		X						
	Vanguard 500 Index						2/13/14		X						
	Vanguard Health Care						2/13/14		X						
	Vanguard Health Care						3/15/14			X					
	Vanguard Health Care						3/15/14								
	Alliance Bernstein High Return		X				3/15/14								
	First Eagle Global		X				3/15/14								
	Bruegger's Baked Alternatives		X				3/15/14								
	Regalota Global Bond		X				3/15/14								

Use additional sheets if more space is required.

