UNITED STATES HOUSE OF REPRESENTATIVES FORM B FINANCIAL DISCLOSURE STATEMENT For New Members, Candidates, and New Employees	ICT 25 2019, Page 1 of 5
Name: Josh Mahony Daytime Telephone:	2019 OCT 31 AH 10: 44
New Member of or Candidate for State: Arkansas V.S. House of Representatives District: 03 Check if Amendment Candidates – Date of Election: November 6, 2018	V.S. HOUSE OF INCULTAR (Office Use Only)
STATUS New Officer or Employee Staff Filer Type (If Applicable): Employing Office: Shared Principal Assistant to April 4, 2018	A \$200 penaity shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION ANSWER <u>EACH</u> 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?	gh the date of filing? Yes No X
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? 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?	arrangement with an the current calendar Yes No X
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 X No J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	\$5,000 from a Yes No X
ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS	QUESTIONS
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?	lave you excluded Yes No X
EXEMPTION – Have you excluded from this report any other assets, "unearned" income, 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.	t all three tests for Yes No X

SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SP 누,무,왕 For rental investment For an ownership interest in a privately-hustiness that is not publicly traded, state the nar of the business, the nature of its activities, and yeographic location in Block A. \$5,000, list every financial institution where there more than \$1,000 in interest-bearing accounts. 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds Provide complete names of stocks and mutual fund (do not use only ticker symbols). production of income and with a fair market value succeeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in in the optional column on the far left. or bank and other cash accounts, total the amou For all IRAs and other retirement plans (such you so choose, you may indicate that an roome source is that of your spouse ependent child (DC), or jointly held with omes and vacation homes (unless there was xclude; Your personal residence, including seco uneamed" income during the year you report a privately-traded fund that capted investment Fund, please check the ome during the reporting period); and ancial interest in, or income derived from, a few **BOA Savings** Assets and/or Income Sources **BOA Checking** Ð EAM Company LLC

Timber & Oil Production Lanxess - Brine Royalty interest-bearing accounts. If the total is over Examples (a) each asset held for detailed please refer to the instruction bookle "rental property," and a other Simon & Schuster ABC Hedge Fund Mega Corp Stock interest in a privately-he publicly traded, state the name BLOCK A including the real property held complete address of Schedule T I investment Savin (SP) Ş. Ø. Ŧ × If an asset was sold during the reporting period and included only because it generated income, the value should be "None." *Column M is for assets held by your spouse or depender child in which you have no interest. specify the method used. ndicate value of asset at close of the reporting period. If you use a valuation method other than fair market value, please \$1-\$1.000 03 $\times | \times$ \$1,001-\$15,000 n \$15,001-\$50,000 0 × × m Value of Asset \$50,001-\$100,000 \$100,001-\$250,000 П BLOCK B × \$250,001-\$500,000 G \$500,001-\$1,000,000 I \$1,000,001-\$5,000,000 \$5,000,001-\$25,000,000 _ \$25,000,001-\$50,000,000 _ Over \$50,000,000 _ Spouse/DC Asset over \$1,000,000* ኟ RA, or 529 accounts), you may check the Taxis Deferred column. Dividends, inderest, and
capital gains, even if reinvested, must be
disclosed as income for assets held in
taxable accounts. Check "None" if the asset Check all columns that apply. For accounts tha NONE generated no income during × × DIVIDENDS RENT Type of Income × INTEREST ×× BLOCK C CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Partnership Income Royatties reporti Other Type of Income (Specify: e.g., Partnership Income or Farm (noome) For assets for which you checked "Tax-Defensed" in Block C, you may check the "None" column. For all othe assets indicate the category of income by checking the appropriate box below. Dividends, interest, an 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. "Column XII is for assets held by your spouse or dependent child in which you have no interest × × \$1-\$200 = \$201-\$1,000 ≡ \$1,001-\$2,500 ₹ × \$2,501-\$5,000 < Current Year × \$5,001-\$15,000 ≤ ≦ \$15,001-\$50,000 ≨ X \$50,001-\$100,000 \$100,001-\$1,000,000 × \$1,000,001-\$5,000,000 Amount of Income × × Over \$5,000,000 BLOCKD ¥ Spouse/DC Income over \$1,000,000* $\overline{\mathsf{x}}$ \$1-\$200 = × \$201-\$1,000 ₹ \$1,001-\$2,500 ₹ Preceding Year × ٧ × \$2,501-\$5,000 \$5,001-\$15,000 ≤ ≦ × \$15,001-\$50,000 ≦ \$50,001-\$100,000 × \$100,001-\$1,000,000 \$1,000,001-\$5,000,000 × Over \$5,000,000 × × Spouse/DC Income over \$1,000,000*

Use additional sheets if more space is required

	SCHEDULE A - ASSETS & "UNEARNED INCOME"	
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SCHEDULE C - EARNED INCOME

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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 eamed income exceeding \$1,000. See examples below.

INCOME LIMITS and PROHIBITED INCOME: Be advised that the outside earned income limit and prohibitions on types of income may apply to you after you are on House payroll. The 2018 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$28,050. The 2019 limit is \$28,440. 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.

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

	•	Am	Amount
Source (iliciade date of receipt for horioraria)	- ype	Current Year to Filing	Preceding Year
	Honorarium	\$0	\$500
Examples: Civil War Roundable (Oct. 2) Chitario County Board of Education	Spouse Speech Spouse Salary	\$20,000 \$0 N/A	\$1,000 N/A
Walmart Associates, Inc. Bentonville, AR 72716	Spouse Salary	N/A	N/A

SCHEDULE D - LIABILITIES

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(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. 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

	SP	SP	SP		SP. DC. JT		
	U.S. [Round	Bank	Example			
	U.S. Department of Education	RoundPoint Mortgage SE Corp	Bank of America	First Benk of Wilmington, DE	Creditor		
	VAR	11/14	2017	5/16	Date Liability Incurred MO/YR		
	Student Loans	Home Mortgage	Credit Card	Mortgage on Rental Property, Dover, DE	Type of Liability		
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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 es report positions held in the current calendar year and two previous years

Pariod and the content calculate year. First-year candidate	CHOCHER CHIEF CARRIDA Your Fristy and Carminates and her analysis positions from the current varieties your and two provides yours.
Position	Name of Organization
Board Member	EAM Company, LLC
Board Member/President	Arkansas Single Parent Scholarship Fund
Board Member/Chair	Ozark Literacy Council