UNITED STATES SENATE FINANCIAL DISCLOSURE REPORT FOR ANNUAL AND TERMINATION FILERS

					•					
Amendment		<u></u>								
Last Name	First Name and Middle In	tial	Annual Report							
			Calendar Year Covered by Report	Senate Office / Agency in Which Employed						
Van Hollen	. Chris		20,7	U.S. Senate						
Senate Office Address (Number, Street, City, State, and ZIP C	ode) Senate Office Telephone	Number (Include Area Cod	(e) Termination Report							
			Termination Date (mm/dd/yy)	Prior Office / Agency in Which Employed						
110 Harr Building	(202) 224-	4654	N/A							
AFTER READING THE INSTR	uctions – answ	/ER EACH O	F THESE QUESTIONS	ND ATTACH THE RELEV	VANT PART					
		YES NO			YES NO					
Did any individual or organization make a donation	on to charity in lieu of	<u></u>	Did you, your spouse, or depender	nt child receive any reportable travel of						
paying you for a speech, appearance, or article i	—		reimbursements for travel in the re	porting period (i.e., worth more than						
If Yes, complete and attach PART I.			\$390 from one source)?							
Did you or your spouse have earned income (e.g.	salaries or fees) or non-		If Yes, complete and attach PART	VI.						
investment income totaling \$200 or more from a			Did you, your spouse, or depender	nt child have any reportable liability						
reporting period?			(more than \$10,000) during the rep	orting period?						
If Yes, complete and attach PART II.			If Yes, complete and attach PART.	.VII.						
Did you, your spouse, or dependent child hold a	•		Did you hold any reportable positio							
more than \$1,000 at the end of the period, or red			Did you hold any reportable positio current calendar year?							
investment income of more than \$200 in the repair of Yes, complete & attach PART IIIA and/or IIIB.	oning perioa?		If Yes, complete and attach PART							
il 165, complete & attach i Arti IIIA and/or IIID.	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	······································						
Did you, your spouse, or dependent child purcha	•		Do you have any reportable agreer	ment or arrangement with an outside						
reportable asset worth more than \$1,000 in the r	eporting period?		entity?							
If Yes, complete and attach PART IV.			If Yes, complete and attach PART	IX.						
Did you, your spouse, or dependent child receive	e any reportable gift in the		KALL IN COUNTY OF THE PLAN							
reporting period (i.e., aggregating more than \$35	30 and not otherwise		\$5,000 from a single source in the	ou receive compensation of more than						
exempt)?			If Yes, complete and attach PART	<u>two</u> prior years? X						
If Yes, complete and attach PART V.	······································									
Each question mu	<u>ust</u> be answered a	nd the appro	priate PART attached for	or each "YES" response.						
	······································			FOR OFFICIA	AEUSE DIVLY					
				71	Ge ow this juice					
	•									
					- SS					
					ے ا					
i UJ,					л ≥					

≥ Amendment eporting individual's Name Page Number PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES BLOCK B **BLOCK A** BLOCK C Identity of Publicly Traded Assets Valuation of Assets Type and Amount of Income And Unearned Income Sources At the close of reporting period. If None, or less than \$1,001, Report the complete name of each publicly check the first column. raded asset held by you, your spouse, or Type of Income Amount of Income rour dependent child (see page 13, Financial Disclosure Instructions for CY 2017) for production of income or nvestment which: (1) had a value exceeding \$1,000 at the Excepted Investment Fund
Excepted Trust
Qualified Blind Trust None (or less than \$1,001) \$50,000,000 Actual \$25,000,000 close of the reporting period; and/or Other **Amount** (2) generated over \$200 in "unearned" -\$1,000,000 -\$500,000 income during the reporting period. - \$100,000 Required Over \$1,000,000*** Sver \$1,000,000** \$1,000,001 - \$5,00 Over \$5,000,000 (Specify' Type) \$5,000 Include on PART IIIA a complete ,000,000 \$1,000 identification of each public bond, mutual \$5,000,001fund, publicly traded partnership interest, \$50,001 -\$5,001 -\$15,001 excepted investment fund, bank account, excepted and qualified blind trust, and publicly traded asset of a retirement plan. IBM Corp. (stock) Example Example : Example: DC, (S) Keystone Fund Exemple | Exemple: vanguard Wellingrowindmiles tur. 5 Pesico 6 TROWE Price 2025 T. Rowe Price 2030 8 Johnson & Jannson 9 Congressional Crodit Luca 10 State of MD. Pension EXEMPTION TEST (see Financial Disclosure Instructions for CY 2017): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right. This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

eporting Indi	PA	RT	000/	A.	P	UB		CL	Y	TR.		Œ		15	SE'	TS	A	ND		VE.	ARNE	D	IN(ME	E S	OL	JR(CE	S	P	Page N	Number		
BLOCK A Identity of Publicly Traded Assets And Unearned Income Sources Report the complete name of each publicly raded asset held by you, your spouse, or your dependent child (see page 13, Financial Disclosure Instructions for CY 2017) for production of income or investment which: (1) had a value exceeding \$1,000 at the close of the reporting period; and/or (2) generated over \$200 in "unearned" income during the reporting period. Include on PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment fund, bank account, excepted and qualified blind trust, and publicly traded asset of a retirement plan.			BLOCK B Valuation of Assets At the close of reporting period. If None, or less than \$1,001, check the first column.										Type and Amount of Income Type of Income Amount of Income																						
		None (or less than \$1,001)	.001	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	None	Dívidends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	5,001 -	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000***	<u>'</u> ç	Over \$5,000,000	Actual Amount Required if "Other" Specified	
	S,	IBM Corp. (stock)				Х										X							Example		X						4	<u></u>	. ;	•	Exemple
Example	DC, (S						X						<u>:</u>							Х			Example	X				<u>i</u>	' i					7	Exemble
1 33		voon Bank accor			\times													X							Х										
2	Y & 1																																		
3																		<u>.</u>																	
4																_		_					•												
5								-						_											_	_							_		<u></u>
6												_		_	_													1_							
7											_	_		_	1					_							-						_		
8							_					-	\downarrow	-	$\!$		_	_	-	_				_	_		_	_	_				_	-	
9				_			-	-	-	-	_	-	+	+	\blacksquare	-	-	-	-	-		-			-		-		-					\dashv	
10														\perp													<u> </u>								

Reportisig Individual's Name Amendment Page Number PARTIV. TRANSACTIONS Van Hollen Amount of Transaction (x) Report any purchase, sale, or exchange by you, your spouse, or dependent Transaction child (see page 20, Financial Disclosure Instructions for CY 2017) during the Type (x) reporting period of any real property, stocks, bonds, commodity futures, and \$25,000,000 other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Do not report a transaction \$100,000 -\$250,000 -\$500,000 Transaction involving property used solely as your personal residence, or a transaction 0000 Date between you, your spouse, or dependent child. Please clarify which two (Mo., Day, Yr.) assets are involved in any reportable exchange. Identification of Assets IBM Corp. (stock) NYSE 2/1/1X Example: DC. DC. Corosoft stock NASDAQ OTO 2/17/17 General Electric Company 2/17/17 Johnson & Johnson 2/19/17 PEPSICO 2/17/17 VERIZON COMMUNICATIONS FUM BRANDS Inc.

7 Yum China Holdings

EXEMPTION TEST (see Financial Disclosure Instructions for CY 2017): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.

This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or lointly held use the other categories of the local control of the local categories of the local categories

-	rting Individual's	1	PARTV	/]]. <u>L</u>],	F	Page Nu	21122												
Rep	ort liabilitie	es over \$10,000 ov	ouse, or dependent child (see 17), to any one creditor at any							Ci	ateç	gory	/ of	An	mount				
Exc Ser and info	e during the orting period clude: (1) relators); (2) is (3) liabilities rmation on	e reporting period.	Date Incurred	Interest Rate	scount Points Paid for rtgage (Senators Only)	Ferm if Applicable	01 - \$15,000	50,	11 - \$100,000	001 - \$250,000	01 - \$500,000	1,000	1,000,000***		,001 - \$25,000,000	0,001 - \$50,000,000	בט טטט טטט אַנּ		
	Name	of Creditor	Address	Address Type of Liability					\$10,00	\$15,0	\$50,0	\$100,	\$250,	\$500,	Over §	\$1,000	\$5,000	\$25,00	Over 9
Ex	S, cample: DC,	First District Bank	Wash., DC	Mortgage on undeveloped land	2002	13%	1 pt	25 yrs			X		E	X	Α	M	P	L	E
	or J	(J) John Jones	Wash., DC	Promissory Note	2010	10%	n/a	On dmd				X	Е	X	Α	M	P	L	E
1	J. P. M.	ORGAN	Kensingroni	MORT6468	2011	3,4%	None	15yr					X						
2																			
3.																			
4												_						+	
5												+			+				
6										+	+	+	-	_	_	-	+	-	
7										-+	-	+	+	+			+	+	
8							,			+	-	+	+	+	+	+		+	
9											+		+	+	+	+	+	+	
10									-	+	+	+	+	+	+		+	+	
11									+	+	+	+	+	+	+	+	+	+	
12										-	+	+	-	_	+	-	+	+	
EXE	MPTION TEST category applie	(see Financial Disclosure In sonly if the asset is/was he	structions for CY 2017): If you ld independently by the spouse	omitted any asset because it meets the three or dependent child. If the asset is/was either	e-part test	for exempti	on described	in the instruc	tions,	pleas	e che	ck bo	x to ti	ne rigi	ht.				-