	FORM B	APR .0.4 2018 Page 1 of <u>\$</u>
UNITED STATES HOUSE OF REPRESENTATIVES	For New Members, Candidates, and New Employees	LEGISLATIVE RESOURCE CENTER
FINANCIAL DISCLOSURE STATEMENT	r or rivew internities, candidates, and rivew Employees	
FILER STATUS  U.S. House of Representatives  Candidates – Date of Election:  NOV	Check if Amendment  Check if Amendment  Iller Type (If Applicable): Period Covered: January 1, 2017	OFFICE OF THE CLERA U.S. HOUSE OF REPRESENTATIVES  (Office Use Only)  A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER EACH O	F THESE QUESTIONS	
a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period?      b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	No E. Did you hold any reportable positions during period or in the current calendar year up through	
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 F. Did you have any reportable agreement or outside entity during the reporting period or in year up through the date of filing?	
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	No J. Did you receive compensation of more that single source in the current year and two prior	
ATTACH THE CORF	RESPONDING SCHEDULE IF YOU ANSWER "YES	<b>5"</b>
THIS FORM INCLUDES ONLY T	THE SCHEDULES THAT YOU ARE REQUIRED TO	COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST	INFORMATION - ANSWER BOTH OF THES	E QUESTIONS
TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committe from this report details of such a trust that benefits you, your spouse, or depend		Have you excluded Yes No No
<b>EXEMPTION</b> – Have you excluded from this report any other assets, "unearned exemption? Do not answer "yes" unless you have first consulted with the Comm	" income, or liabilities of a spouse or dependent child because they me nittee on Ethics.	eet all three tests for Yes No No

# SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Joshua Miha

Page\_2\_ of \_\_\_\_\_

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BLOCK A	BLOCK B				•	Ι			BL	OCK	С			BLOCK D																								
Assets and/or Income Sources	urces Value of Asset					l	Type of Income								Amount of Income																							
Identify (a) each asset held 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 which generated more than \$200 in "unearned" income during the year.  Provide complete names of stocks and mutual funds	od, specify the method used.  The life as asset was sold during the reporting period and					and is	401 the inte reir for	that generate wax-denined income (such as 401(k), IRA, or 529 accounts), you may check the "Tax-Deferred" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check							if column XII is for assets held by your spouse or dependent child in which you have no interest.																							
(do not use only ticker symbols).	child in	which	h you	have:	no inte	erest.	ui apo	ouse (	or acpt	, nacii				orting			u ix	IIICOINE																				
For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.		1		_			Τ		_	_	_	Τ	1				- 1					Cu	FFOF	t Ye	ar							Dr	2000	tino	ı Ye			
For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.	A B	c C	D	E	FG	Н	1	j	K	. М									1	II	ili IV	V	_	VII		( x	XI	XII	I	<b>11</b>	111	_	v v	_	Vill	_	Х	XI XII
For rental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and state.																		me)																				
For an ownership interest 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 in Block A.																		ne or Farm Income)																				
Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.																		r, Partnership Inco										*DG										<b>\$</b>
If you have a privately-traded fund that is an Excepted Investment Fund, please check the "EIF" box.										000'000								cify: e.g			ļ							00'000'										0000
If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left.  For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	None	\$1,001-\$15,000	\$15,001-\$50-000	\$50,001-\$100,000	\$100,001-\$250,000	\$500,001-\$1,000,000	\$1,000,001-\$5,000,000	\$5,000,001-\$25,000,000	\$25,000,001-\$50,000,000	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	None	\$1-\$200	\$1,001-\$2,500	\$2,501-\$5,000	\$5,001-\$15,000	\$15,001-\$50,000	\$50,001-\$100,000	\$1,000,001-\$5,000,000	Over \$5,000,000	Spouse/DC Income over \$1,000,000	None	\$1-\$200	\$201-\$1,000	\$1,001-\$2,500	\$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
SP, EIF DC, JT Mega Corp Stock				х								х								х											х							
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ABC Hedge Fund X					×												ı	Partnership Income					х									T		х				
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& BOA CHECKING		\ \		1					$\top$	T	T			1						V				$\dashv$		1						,	11	3		П	1	
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Use additional sheets if more space is required.

# SCHEDULE A - ASSETS & "UNEARNED INCOME"

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### **SCHEDULE C - EARNED INCOME**

Name: 505hha	Malon	Page of

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

**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**: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,765. 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.

		1 _	Amount									
	Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year								
Examples:	ABC Trade Association, Baltimore, MD (July 15) State of Maryland Civil War Roundtable (Oct. 2) Ontario County Board of Education	Honorarium Salary Spouse Speech Spouse Salary	\$0 \$20,000 \$0 N/A	\$500 \$76,000 \$1,000 N/A								
WALMART	ASSOCIATES IN L BENTONVILLE AT TATIL	Spouse GALARY	253,866.06	116,192.00								

#### **SCHEDULE D - LIABILITIES**

Name: Johan Mahiney

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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. 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 (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.

							Α	moun	t of Li	ability				
		Date		A	В	С	D	E	F	G	Н	1	J	К
SP, DC, JT	Creditor	Liability Incurred MO/YR	Type of Liability	\$10,001- \$15,000	\$15,001- \$50,000	\$50,001- \$100,000	\$100,001- \$250,000	\$250,001- \$500,000	\$500,001- \$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	Over \$1,000,000* (Spouse/DC Liability)
	Example First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE				х							
sp	BANK OF AMERICA	2017	CREDIT CARD	$\sqrt{}$			,							
SP	ROUNDPOINT MORTGAGE SE CORP	11/14	HOME MORTGAGE				<u> </u>							
	U.S. DEPARTMENT OF EDUCATION	VAR	STUDENT LOANS	16:	1 8	RP.	20	7						
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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 period and the current calendar year. **First-year candidates and new employees** report positions held in the current calendar year and two

Position	Name of Organization
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Board mesto / President	Ar Can bas sinte bant Scholarchip tuch
Board member / Chair	Deark Literin Council