Yes No	because they meet	or liabilities of a spouse or your dependent child in Ethics.	samed" Income, transactions, prisulted with the Committee o	EXEMPTION - Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse or your dependent child because they meet all three tests for examption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.
Ves No	ave you excluded	other "excepted trusts" need not be disclosed. Have you excluded	nmittee on Ethics and certain ependent child?	TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts from this report details of such a trust that benefits you, your spouse, or dependent child?
Yes No V	vestion, please	reporting period? If you answered "yes," to this qu	tial Public Offering during the	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 cantact the Committee on Ethics for further guidance.
JESTIONS	OF THESE QU	TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS	9	IPO AND EXCLUSION OF SPOUSE, DEPENDENT,
CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	SCHEDULE IF	Li.	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	onation to charity in or article during the	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 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	hild receive any staling more than reporting period?	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$480 in value from a single source during the reporting period?	Yes No No	C. Did you or your spouse have "earned" income (e.g., saisries, honoraria, or pensionaliRA distributions) of \$200 or more during the reperting period?
Yes No	lid receive any ue from a single	Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$480 in value from a single source during the reporting period?	Yas No	8. 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 No	arrangement with an the current calendar	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 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. Receive more than \$200 in unsamed income from any reportable asset during the reporting period?
/			HESE QUESTIONS	PRELIMINARY INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS
	nination:	Termination Date of Termination:	Amendment	REPORT 2023 Annual (Due: May 15, 2024)
Staff Filer Type: (If Applicable) Shared Principal Assistant		Officer or Employing Office:	MN	FILER House of Representatives State:
A \$200 pollon who files more than 30 days late.	A \$200 pellakijusi Individuai who fil	on	 Daytime Telephon 	Name: House Tarl Emuse Il
HAND DELIVERED	HAN	Form A For Use by Members, Officers, and Employees		UNITED STATES HOUSE OF REPRESENTATIVES 2023 FINANCIAL DISCLOSURE REPORT

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: (Kowith the thinks the Page 2 of 10	
	Namo: [HEWATATAR EMWAR AR.]

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					CESSA	ABC	Examples:	162	provides a complete accress or description, e.g., Ter property, and a city and state. For an ownership interest in a privately-held busine that is not publicly traded, state the name of business, the nature of its activities, and its geograp location in Block A. Excitude: Your personal residence, including secret homes and vacistion homes (unless there was reinflowne during the reporting period); and any finantificates in, or income derived from, a federal retirem program, including the Thrift Savings Plan. If you report a privately-traded fund that is an Exceptinessment Fund, please check the "EIF" box. If you sport a privately-traded fund that is an Excepting the Country apouse (SF) dependent child (DC), or jointly held with anyone (Jin the optional column on the far left. For a detailed discussion of Schedule A requirement please refer to the histraction booklet.	the account that exceeds the report the accounts of all interest-bearing accounts. If the it list every financial institution where \$1,000 in interest-bearing accounts.	Assets and/or income Sources identify (a) each asset held for investmen production of income and with a fair market; exceeding \$1,000 at the end of the reporting p and (b) any other reportable asset or source of in that generated more than \$200 in 'unearned' by during the year. Provide complete names of stocks and mutual if (so not use only ticker symbols). For all 1984s and other retirement plans (suc 401(s) plans) provide the value for each asset he
					オイント	ABC Hedge Fund	Smon & Schuster	Mean Corp. Stock	oescription, e.g., "re oescription, e.g., "re of tites, and its geogral series, including securities, and its geogral neites there was re wholl; and any finar nor, a federal retires awings Plan. Hand that is an Except to the TEIF box. The TEIF box. GEP your agouse (SP) / held with anyone (PP)	the account that exceeds the reporting thresholds. 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. For rental and other real property held for investment,	BLOCK A Assets and/or income Sources identify (a) each asset held for investment or production of income and with a fair market value scoeding \$1,00 at the end of the sporting period and (b) any other reportable asset or source of income fixet generated more than \$200 in 'unearned' income during the year. Provide complete names of stocks and mutual funds (do not use only ticker symbols). For all \$20s, and other retirement plans (such as 401(it) plans) provide the value for such asset held in
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	<u> </u>	-	 	╀	\vdash	┡			None	<u> </u>	BLOCK B Value of Asset Value of Asset Indicate value of asset at close of the reporting period. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold during the reporting period and is included only because it generated income, the value should be "Norse." Column M is for assets held by your spouse or dependent child in which you have no interest.
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	H	 	t	+	T	-			\$100,001-\$250,000	71	BLOCK B Value of Asset lose of the reporting p tet value, please spating the reporting p tet value should all by your spouse or
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<u> </u>	├		├	╁	Н			Н	Spouse/DC Asset over \$1,000,000*	*	
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									TAX-DEFERRED		The state of the s
						Partnership Income	Royables		Other Type of Income {Specify: e.g., Partnership Income or Farm Income}		BLOCK C Type of Income Check all columns that apply. For accounts that generate tra-deferred income (such as 401(k), IRA, or 529 accounts), you may check the Trak-Deferred column. Dividental, interest, and capital gains, even if religiouslied, must be disclosed as income for assats intel in trauble eccurate, Chour' Hone' if the sasts intel in trauble or accurate, Chour' Hone' is the saset generated no income during the reporting period.
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			Ĺ			×			\$2,501-\$5,000	· ·	Amount of Income For assets for which you checked "Tax-Deferred" may check the "None" column. For all other assets for which you checking the appropriate the state of the st
									\$5,001-\$15,000		BLOCK D Int of In sected 'Ta umn. For a umn. For a capital g recome to no income eld by you set.
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									\$1,000,001-\$5,000,000	×	deper
									Over \$5,000,000	8	BLOCK D Amount of Income Amount of Income Amount of Income For assets for which you checked "Tax-Deferred" in Block C, you may check the "Nore" column. For all other assets indicate by category of knoome by checking the appropriate box below. Dividends, interest, and capital gaits, even if reinvested, Dividends, inderest, and empiral gaits, even if reinvested, Dividends, inderest, and empiral gaits, even if reinvested, 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.
									Spouse/DC Asset with Income over \$1,000,000*	≱	
								S(part)	P, S, S(part),	Leave this column blank if there are no trapsactions that exceeded \$1,000.	BLOCK E Transaction Indicate if the sase had purchases (P), seles (S), or excesting \$1,000 in the reporting period. If only a portion of an asset was sold.
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																		SP, ASSET NAME		Assets and/or Income Sources
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																			Spouse/DC Asset with Income over \$1,000,000° ≧	
																			P, S, S(part), or E	BLOCK E Transaction

Name: HOWAS FAN towns I An Page 3

(C)

SCHEDULE B - TRANSACTIONS

Name: HornAs Earl Europa dupage 4 of 10

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																	Ş	SP, DC, JT	Capital Gains: If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box, unless it was an esset in a tax-deferred account, and disclose the capital gain income on Schedule A. "Column K is for assets solely held by your spours or dependent child.	Exclude transactions between you, your spouse, or depandent children, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset it sold, please choose "partial sale" as the type of transaction.	dependent resulted in	Report any
																	Example		Capital Gains: If a sales transaction resulted in a capital gain in excited, the "capital gains" box, unless it was an esset in a tax-deferred disclose the capital gain income on Schedule A. "Column K is for assets solely held by your abouse or dependent child."	ansactions of sale of your	e capital k	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 apouse, or your
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SCHEDULE C - EARNED INCOME

Name: HOWI TAR SUMMER DE Page 5 of 10

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										Examples:			List the source, typi the source and ame EXCLUDE: Military INCOME LIMITS ar addition, certain typ
								Ontario County Board of Education	Clvd War Roundtable (Oct. 2)	State of Maryland	Keene State	Source (include date of receipt for honoraria)	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 a spouse, list the source and amount of any honorana; 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: The 2023 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was\$31,815. The 2024 limit is \$31,815. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited.
								Spouse Salary	Spaule Speech	Legislative Pension	Approved Teaching Fee	Туре	niment) totaling \$200 or more during the reporting period. For a spouse, list below. Social Security Act. But at or above the "senior staff" rate was\$31,815. The 2024 limit is \$31,815. In stationship) are totally prohibited.
								NIA	\$1,000	\$18,000	\$6,000	Amount	reporting period. For a spouse, list

SCHEDULE D - LIABILITIES

Name: Howas Cand Unverte De Page C

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. 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

				2. S.		
		12/1/	Example			
i		DAT! DANK VICTORIA	First Besix of Wilmington, DE	Creditor		
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		Mts Vermany BES.	Mortgage on Rental Property, Döver, DE	Type of Llability		
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				\$1,000,001- \$5,000,000	۵	Amount of Liability
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				Over \$50,000,000	د	
				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, director, trustee of an organization, partner, proprietor, representative, employee, or

consultant of any corporation, firm, partnership, or other bus Positions held in any religious, social, fraternal, or political e	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.
Position	Name of Organization

SCHEDULE F - AGREEMENTS

Name: Hornes Evant Emmes 1 Page 7 or 10

	Date	identify the date, parties to, and continuation or deferral of payme employer.
	Parties to Agreement	identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in a employer.
	Terms of Agreement	ive with respect to: future employment: a leave of absence during the period of government service; summent; or continuing participation in an employee welfare or benefit plan maintained by a former

SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$480 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 (which may not include a registered lobbyist or foreign agent), local meets, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$192 or less need not be added towards the \$480 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule and some gifts require prior approval of the Committee on Ethics.

	Source	Description	Value
Ехатрів:	Mr. Joseph Smith, Artington, VA	Silver Platter (prior determination of personal friendship received from the Committee on Ethics)	\$500
	:		

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

Name: Hy MAS
tral townson
Page 8 of 10

Identify the source and list travel litherary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$480 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

EXCLUDE: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

	Source	Date(s)	City of Departure-Deathnetion-City of Return	Lodging† (Y/N)	Food? (Y/N)	Family Member Included? (Y/N)
1	Government of China (MECIEA)	Aug 6-11	освейну, Сина-ос	۲	۲ .	æ
cxemper:	. Habitat for Humanity (Charley Fundrasier)	Nor. 3-4	DC-Boston-DC	≺	≺	۲

SCHEDULE I – PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

Name: HOWAS EXAM EMMENT SIL PAGE 9 OF 1C

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of paying an honorarium to you. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics.	an event to a charitable organization	in lieu of paying an honorariu	ım to you. A separate
Source	Activity	Date	Amount
Association of American Associations, Washington, DC	Speech	Feb. 2, 2023	\$2,000
XYZ Magazine	Article	Aug. 13, 2023	\$500
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