HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES For Use b	Form A LEGISLATIVE RECEIVED FOR Use by Members, Officers, and Employees 2021 815 13 PH 2: 45
Name: Joanna Castro Daytime Teleph	Daytime Telephone: (202) 235-3258 KUUSE OF FILTRESEVIAINES individual who files more than 30 days late.
FILER Member of the U.S. State: X House of Representatives District: XO	Officer or Employing Office: Staff Filer Type: (If Applicable) Employee Shared Principal Assistant
REPORT 2023 Annuel (Due: May 15, 2024) Amendment	Termination Date of Termination:
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? or the reporting period? or the nore than \$200 is unearmed income from any reportable asset 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?
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?	6. 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?
C. Did you or your spouse have "earned" income (e.g., saleries, honoraria, cr pension/IRA distributions) of \$200 or more during the Yes No persorting period?	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$450 in value from a single source during the reporting period?
D. Did you, your spouse, or your dependent child have any reportable Yes No liability (more than \$10,000) at any point during the reporting period?	I. Did any individual or organization make a donation to charity in leu of paying you for a speech, appearance, or article during the reporting period?
E. Did you hold any reportable positions during the reporting period or Yes No No	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"
PO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS	ORMATION - 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 contact the Committee on Ethics for further guidance.	reporting period? If you answered "yes" to this question, please Yes
TRUSTS – Estails regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not from this report details of such a trust that benefits you, your spouse, or dependent child?	other "excepted trusts" need not be disclosed. Have you excluded Yes
EXEMPTION - Have you excluded from this repert any other assets, "unearned" income, transactions, or liabilities of a spouse or your dependent child because they meet all three tests for exemption? Do not answer 'yea" unless you have first consulted with the Committee on Ethics.	or liabilities of a spouse or your dependent child because they meet Yes . No .

SCHEDULE

BLOCK A BLOCK C BLOCK C	EA - ASSETS & "UNEARNED INCOME" Name: JOAGUIN (ASTRO Page 2 of _
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	4		6		6		(P)	Т	or a detailed discussion of Schedule A requirement please refer to the instruction booklet.	If you so choose, you may Indicate that an asset or income source is that of your apouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the fair left.	Tyou report a privately-traded fund that is an Eucepted Investriant Fund, plasse check the "EIF" box.	Euclude: Your personal residence, including second formes and vecation formes (unless there was retail income during the responding period); and exp filterical interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	For an elementhip intensit in a privately-held business that is not publicly traded, suits the came of the business, the nother of its activities, and its geographi location in Block A.	For rental and other real properly held for investment, provide a complete address or description, e.g., 'rental properly,' and a city and state.	For bent and other cash ecounts, total the smooth in all misma-hearing accounts. If the soal is over \$5,000, list every francial statistics where there is more than \$1,000 in interest-besting accounts.	401(k) plans) provide the value for each seed held in the account that exceeds the reporting thresholds.	State compete names of spore and musical name (so not use only ticker symbols).	production of norms and with a fair mental value production of norms are with a fair mental value accepting \$1,000 at the end of the reporting period, and (i) any other reportable asset or nounce of noome that generated more then \$200 in "unserned" income during the year.	3	
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MOICHER	40	\vdash	$\vdash \vdash$	_	H	┞	\vdash	×	\$50,001-\$100									method other then 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 "None." "Calumn M is for assets hold by your apouse or dependent child in which you have no interest.	Value of Asset	_
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						Г	1		TAX-DETER	RED						\neg		generate ten-deferred income (puch as 401(s), 629 accounts), you may check the "Tex-Couloms, Dividends, interest, and ceptal gate outure. Dividends, interest, and ceptal gate if religiousted as incurate the disclosed as inco- sessin held in toxable socounts. Check "No sease generated no income during the reporting	Type of Income	
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Page 2 of 9

														- None	gp Example Mage Corp. Stock	89, DC, JT Asset	Sipplies deline: If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains' box, unless it was an exact in a tax-deliwred account, and disclose the capital gain income on Schedule A. **Column K is for exacts acleby test by your socure or dependent child.	purchase or side of your personal residence, unless it generated rantal income. If only a portion of an asset is sold, please choose "partial sale" as the type of transaction.	reporting period or any security or rest property rest by you, your source, or your dependent of the date framework and the control of the control of the security of the control of	Report any purchase, edle, or exchange transactions that supposed \$1,000 in the
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1															İ		Over \$1,000,0 (Spouse/DC Asset)	XV	*	

SCHEDULE C - EARNED INCOME

Name: JOAQUIN CASTED Page 4 of 9

						Accoiris	Ontario County Board of Education	Civil War Roundtable (Oct. 2)	Examples: State of Maryland	Keene State	Source (includ	INCOME LIMITS and PROHIBITED INCOME: The 2 addition, certain types of income (notably honoraris,	EXCLUDE: Military pay (such as National Guard or F	List the source, type, and amount of earned income i
											Source (include date of receipt for honoraria)	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 honorarie, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited.	ins addice and sindurit of any norweste, liet dray are educed in burst should easied industries expecting enjoyd, age examples below. EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	List the source, type, and amount of earned income from any source (other than the filer's ourrent employment by the U.S. government)
					·	Spouse Salary	Spouse Salary	Spouse Speech	Lagislative Pension	Approved Teaching Fee	Туре	sated at or above the "senior staff" rate was\$3 ry relationship) are totally prohibited.	he Social Security Act	1
					•	WIN	VAN	\$1,000	\$10,000	000,8\$	Amount	11,815. The 2024 limit is \$31,815. In		totaling \$200 or more during the reporting period. For a spouse, list

Name: JOAQUIN LASTICO
Page 5 of 9

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, bousehold 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, perent, 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.

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	U.S. Dept. of Education Congressional FCU	First Bank of Wrintington, DE	Creditor	
4/20	6/00 3/13	5/20	Date Liability Incurred MOYR	
Cvedit	Can Subo I Loans Persone I Usidence Matago	Nortgage on Rental Property, Dover, DE	Type of Liability	
			\$10,001- \$15,000	
5	7		\$15,001- \$50,000	
	7		\$50,001- \$100,000	
		×	\$100,001- \$250,000	
			\$250,001- \$500,000	Amount of Liability
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			\$1,000,001- \$5,000,600	Zilidal Zilidal
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			\$25,000,001- \$50,000,000	
			Over \$50,000,000 -	
			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 business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude:

Board Munber NAtional Endowment Fore Domociacy (NED)

SCHEDULE F - AGREEMENTS

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Name: John A CASTNO Page 6 of 9

Identify the date, perfes to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government sorvice; continuation or deferral of payments by a former or current employer other than the U.S. government, or continuing participation in an employee welfare or benefit plan maintained by a former

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Date	Parties to Agreement	Terms of Agreement
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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 lobbylat or foreign agent), local meals, 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 approved of the Committee on Ethics.

The standards	Commence of Management of Commence of the Comm		
	Source	Description	Value
Exemple:	Mr. Joseph Smith, Arlington, VA	Silver Piather (prior determination of parsonal Mendehip received from the Committee on Ethics)	\$500
	- Nowe -		

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

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Name:		
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Page of	70	

Identify the source and list travel litherary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$450 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 relimbursed 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 Giffs 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

	gorras	Date(s)	City of Departure-Destination-City of Return	Lodging? (YA)	Food? (YAI)	Pamity Member Included? (Y/N)
	Government of China (MECSA)	Aug. 6-11	DC-enter) Weigne-CO	γ	γ	*
Exemples	Habital for Humanity (Charity Fundactors)	Nar, 3-4	DC-Bossen-DC	¥	Y	Υ
Center	Center for Economic and Policy		Austin IX - SAM tioso, Chille-			
Reso	Research (Privately sponsored 4/16-8/21		Bog ata Colombia - Sur Admis)	~	~	>
	travel 3					
JFK	Library Foundation Profiles		SAN Antonio - Baston -			
126	IN Courage Ammed GALA	10/29-1450	10/29 - 19/30 Sm Antonio	×	×	>
2	(Charity Events Exception)			•		
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SCHEDULE I -- PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

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Name: Lossour Castro Page of 9

List the source, activity (i.e., speech, appearance, of 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 filled directly with the Committee on Ethics.

					- Nove	Examples: XYZ Magazine		Source	
						Article	Speech	Activity	
						Aug. 13, 2023	Feb. 2, 2023	Date	
						\$500	\$2,000	Amount	

						©	(9	NOTE
					j	2022 was my trad year of service on the U.S Spain	Advising Losp Board.	2023 would be my final year of source on the College	NOTES