EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	IPO—Did you purchase any shares that were allocated as a part of an Initial Public Offering?	EXCLUSION OF SPOUSE, DEPENDENT,	V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.	IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yee, complete and attach Schedule IV.	III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.	II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schadule II.	I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	PRELIMINARY INFORMATION — ANSWER	Status X House of Representatives District: 44 Report X Annual (May 15, 2013)	Janice Kay Hahn		UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT
isets, "unearned" income, trailess you have first consulted	y the Committee on Ethics ar your spouse, or dependent ch	rt of an Initial Public Offerings	DEPENDENT, OR TRUST INFORMATION	° Yes X No	Yes No X	Yes X No	Yes No X	Yes No X	R EACH OF THESE	An Amendment			NTIVES JRE STATEMENT
esne	ertain other "excepted trusts"	7	MATION — ANSWER EACH OF THESE QUESTIONS	Each question in this part appropriate schedule attach	IX. Did you have any reportable agreement or an outside entity? If yes, complete and attach Schedule IX.	VIII. Did you hold any reportable positions on of filing in the current calendar year? If yee, complete and attach Schedule VIII.	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reportin period (worth more than \$350 from one source)? If yes, complete and attach Schedule VII.	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)? If yes, complete and attach Schedule VI.	E QUESTIONS	ee Termination Date:	ele		Form A For use by Members, officers, and employees
or dependent child because	need not be disclosed. Have you)F THESE QL	this part must be answered and the uie attached for each "Yes" response.	agreement or arrangement with hedule IX.	e positions on or before the date year? chedule VIII.	dependent child receive any ents for travel in the reporting rom one source)?	d receive any pregating more		A \$200 penaity shall be assessed against anyone who files more than 30 days late.	U.S. HOUSE OF REPRESENTATIVES (Office Use Only)	2013 MAY 15 PM 1:54	LEGISLATIVE RESOURCE CENTER A
Yes	Y ₉ 9	Ye.8	JESTION	vered and Yes" respo	Ses C	Yes	×	, ves		y shall be e who files r	Office Use Only)	5 PH 1:	RESOURCE C
×	×	×	S	the onse.	×	₹ ×	Š	×		assessed more than	TIVES	54 //	ENTER A

	Wells Fargo Savings Account	Edison International 401(k)	Wells Fargo Retirement Brokerage Account (Cash Only/No Assets)	Wells Fargo Checking Account	ILWU Credit Union CD Account	SP. SP Mega Corp. Stock DC, Examples: Simon & Schuster 17 fet Bank of Paducah, KY Accounts	your a complete sources or a unsertipuon, e.g., remainded, was a complete business that is not publicly traded, state the name of the business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts, and any financial interest in, or income derived from, a tederal retirement program, including the Thritt Savings Plan. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent income source is that of your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	For rantal or other real property held for investment, pro-	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.	Provide complete names of not use ticker symbols.)	intify (a) each asset held income with a fair marker and of the reporting portable asset or sources ire than \$200 in "unearner."	Asset and/or li
			ĺ	.	nt	KY Aucounte	trately-held business te name of the business te name of the business te name of the business tended asset there was rentall); any deposits totall; any deposits totall; checking or saving in, or including the Thrift including the Thrift as (SP) or dependent or spouse (JT), in the dule III requirements, list.	held for investment, pro-	nent plans (such as 401(k) reach asset held in the oring thresholds.	Provide complete names of stocks and mutual funds (do not use ticker symbols.)	Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.	Asset and/or Income Source
-							None >		용ㅋ	3 5 5	year. Year n fair n	
		•	Ž.		1.15	5	\$1 - \$1,000 · · · ·		is Sign	and ts income.	6 a 5 6	
					X	Indefinite	\$1,001 \$15,000 °		욕을		- 1 × 0 ×	
		×	×	×		8	\$15,001 - \$50,000		* This column is for assets held solety by your spouse or dependent child.	If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."	Indicate value or asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used.	
						×	\$50,001 - \$100,000 m	1	e is	ated as s		<u> </u>
-						×	\$100,001 - \$250,000	i		\$ 9 G		Value of Asset
	×	****					\$250,001 - \$500,000 [©]		Chi	£ ₹ 2	set luati	ue of As
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	\dashv						\$25,000,001 - \$50,000,000	1	<u>e</u>		1 1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
				11:1	F 5	- 2	Over \$50,000,000		á	oring year generated		j •
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						1	NONE Spouser over \$1,000,000	=				
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		-					TAX-DEFERRED	1	o ≕ ë	¥ 3 9		Type of Income
						Royakie	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		vested, must be disclosed as income. Check "None" if the asset generated no income during the	IRAs), you may check the "lax- Deferred" column. Dividends, inter- est, and capital gains, even if rein-	check all columns mat apply, ror retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or	<u>.</u> D
	7 .	څ	×	,		8,	None (194)	o.	: د د			
				×	×		\$1 - \$200 ==	ğ			order of the condition	
	×	. : '	%			1 7 7 5	\$201 - \$1,000	dependent child.	"This column is for assets held solely	and capital gains, even if reinvested to income was sarried or openitated.	Prie co	
			-			×	\$1,001 - \$2,500	흕				[†] ≥
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							Over \$5,000,000 ≚			and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or penerated.	For assets for which you check the Deferred in Block C, you may check the "None" column. For all other assets, indicate the category of Income by checking the appropriate box below. Dividends, interest,	j
			<u> </u>		<u> </u>	<u> </u>	Spouse/DC Income over \$1,000,000*	 	ਰ হ	- : H	7 6 6 6 7	
						S (partial)	ortion of a portion of a portion of a poster is sold, please indicate as follows: (S) (partial) See below for example. P. S.		,	\$1,000 in reporting year.	asset had purchases (P), sales (S), or exchanges (E) exceeding	Transaction Indicate if the

SCHEDULE V— LIABILITIES

Name Janice Kay Hahn Page 3_of 4

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year, Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal curing the year. Institutes it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you residence (unless it is rented out or you 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 a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. 'This column is for liabilities held solely by your spouse or dependent child.

				7			Amo	at of	Amount of Liability	٢			
e G		Liability		A	B		π						×
J O K	Creditor	Incurred Mo/Year	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	\$25,000,00 \$50,000,000	Over \$50,000,000 Spoins/DC Liability	I Spouse/OC Lisbills
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main St., Dover, DE				×					_	1 1
	Wells Fargo	Dec. 2004	Dec. 2004 Mortgage on personal residence	= 15	TATE LE			×					
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SCHEDULE VI— GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, 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 \$140 or less need not be added towards the \$350 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibit	Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.	
Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	\$375

Name	
Janice Kay Hahn	
Kay	
Hahn	
Page	_

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SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel Itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$350 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and

the amount of time, if any, that was not 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 (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 you.

Source	Date(s)	City of Departure—Destination— City of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Number of days <u>not</u> at sponsor's expense
Chicago Chamber of Commerce	Mar. 2	DCChicagoDC	N		Z	None
Examples: Roycroft Corporation	Aug. 6-11	Aug. 6-11 DC-Los Angeles-Cleveland	٧	Υ	4	2 Days
	Jan. 8 - 20, 2012	DC - Baltimore - DC	Å	Y	Z	None
				<u> </u>		
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