



Filing ID #10068146

FINANCIAL DISCLOSURE REPORT

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FILER INFORMATION

Name: Hon. Steven A. Horsford
Status: Member
State/District: NV04

FILING INFORMATION

Filing Type: Annual Report
Filing Year: 2024
Filing Date: 07/14/2025

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Allianz Global College 529 [5P] LOCATION: NV DESCRIPTION: College access 529 Managed by Virtus Investment Partners The Portfolio is - Age-based 9	DC	\$15,001 - \$50,000	Tax-Deferred		<input type="checkbox"/>
Allianz Global College 529 [5P] LOCATION: NV DESCRIPTION: College access 529 Managed by Virtus Investment Partners The Portfolio is - Age-based 9	DC	\$15,001 - \$50,000	Tax-Deferred		<input type="checkbox"/>
Culinary Health and Welfare Pension Trust [PE]		Undetermined	None		<input type="checkbox"/>
MetLife Whole [WU]		\$15,001 - \$50,000	Tax-Deferred		<input type="checkbox"/>
Nevada Public Employees Retirement System [PE]		Undetermined	None		<input type="checkbox"/>

* For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

SCHEDULE B: TRANSACTIONS

None disclosed.

SCHEDULE C: EARNED INCOME

None disclosed.

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
JT	Lakeview Mortgage	November 2019	Mortgage - Primary Residence	\$100,001 - \$250,000

SCHEDULE E: POSITIONS

Position	Name of Organization
Uncompensated Board Member	Nevada Partners, Inc.

SCHEDULE F: AGREEMENTS

Date	Parties To	Terms of Agreement
February 2005	Myself and the Nevada Public Employees Retirement System	Pension
October 2001	Myself and the Culinary Health and Welfare Pension Trust	Pension

SCHEDULE G: GIFTS

None disclosed.

SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS

Trip Details					Inclusions		
Source	Start Date	End Date	Itinerary	Days at Own Exp.	Lodging?	Food?	Family?
The Climate Solutions Foundation	03/17/2024	03/19/2024	Los Angeles, CA - Houston, TX - Los Angeles, CA	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

IPO: Did you purchase any shares that were allocated as a part of an Initial Public Offering?

☐ Yes ☒ No

Trusts: Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be

disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

☐ Yes ☒ No

Exemption: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?

☐ Yes ☒ No

CERTIFICATION AND SIGNATURE

☒ I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

Digitally Signed: Hon. Steven A. Horsford , 07/14/2025