UNITED STATES HOUSE OF REPRESENTATIVES 2024 FINANCIAL DISCLOSURE REPORT	Form A For Use by Members, Officers, and Employees	HAND DELIVERED
		(Office Use Only)
Name: Michael T. McCaul	Daytime Telephone: 202.225.2401	A \$200 pensity shall be assessed against any individual who files more than 30 days late.
FILER X Member of the U.S. State: STATUS House of Representatives District:	Officer or Employing Office:	Staff Filer Type: (If Applicable) Shared Principal Assistant
REPORT X 2024 Annual (Due: May 15, 2025)	Amendment Termination Date of Termination:	mination:
PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	QUESTIONS	
A. Did you, your spouse, or your dependent children: 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 unearned income from any reportable asset during the reporting period?	Yes X No 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?	arrangement with an the current calendar Yes No X
B. Did you, your spouse, or your dependent children purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting penod?	Yes X No G. Did you, your spouse, or your dependent children receive enry reportable gift(s) totaling more than \$480 in value from a single source during the reporting period?	Ildren receive Yes No X
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 X 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?	nild receive any Yes No X sporting period?
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 X Did any individual or organization donate to charity in fieu of paying you for a speech, appearance, or article during the reporting period?	to charity in fieu of Yes No X
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	E CO	RRESPONDING SCHEDULE IF YOU ANSWER "YES"
IPO AND EXCLUSION OF SPOUSE, DEPENDENT,	OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS	QUESTIONS
IPO – Did you purchase any shares that were allocated as a part of an inicontact the Committee on Ethics for further guidance.	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 contact the Committee on Ethics for further guidance.	uestion, please Yes No X
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "Excepted Trusts" ne excluded from this report details of such a trust that benefits you, your spouse, or dependent child?	nundtee on Ethics and certain other "Excepted Trusts" need not be disclosed. Have you wase, or dependent child?	lave you Yes No X
EXEMPTION – Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities of a spouse all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	named" income, transactions, or liabilities of a spouse or your dependent child because they meet onsulted with the Committee on Ethics.	because they meet Yes No X

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name:

Michael T. McCau

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For an ownership interest in a privately-held business that Is not publicly itsded, state the name of the business, the nature of its activities, and its geographic Interest-bearing accounts. If the total is over \$5,000, every financial institution where there is more than \$1,000 on interest-bearing accounts. plana) provide the value for each asset held in she account that acceeds the reporting thresholds of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) eny other If you choose, you may indicate ther an esset or income source is that of your spouse (SP) or dependent children. Ren (DC), or jointly hold with enyone (IT), in the options program, including the Thrift Savings Plan homes and vecation homes (unless there was rents income during the reporting period), and any financial increastin, or income derhed from, a federal settemen location in Block A. property," and a city and state. provide a complate address or description, e.g., "rante For all IPAs and other retirement plans (such as 401(k) (do not use only ticker symbols). identify (a) each asset hald for investment or production plasse rafer to the instruction booklet. For a detailed discussion of Schedule A requir For rental and other real property held for investment For bank and other cash accounts, total the amount in a more than \$200 in "unsamed" income during the year. reportable asset or source of income that generated Exclude: Your personal residence, including secon rovide complete names of stocks and mutual funds you report a privately-traded fund that is an Excepte: weatment Fund, please check the "EIF" box Assets and/or income Sources See Attached Schedule Heat on Sock Smon & Schuster ABC Hedge Fund × | *Column M is for essets held by your spouse or dependent children in which you have no interest. If an asset was sold during the reporting period and is included only because translated income, the value should be "None." method other than fair market velue, please specify the method used Indicate value of easet at close of the reporting period. If you use a valuati None \$1-\$1,000 ₽ Indefinite \$1,001-\$15,000 C \$15,001 \$50,000 o m \$50,001-\$109,000 Value of Asset -\$100,001-\$250,000 o \$250,001-\$500,000 \$500,001-\$1,000,000 I \$1,000,001-\$5,000,000 \$5,000,001-\$25,000,000 \$25,000,001-\$50,000 000 Over \$50,000,000 _ Spouse/DC Asset over \$1,000,0001 3 generate tax-deferred income (such as 401(k), IRA, or 528 accounts), you may check the "fax-Deferred" column. Dhidends, interest, and capital gains, event retirested, must be disclosed as income for assets held in taxable accounts. Check "None" if the essets Check all the columns that apply. For accounts the generated no income during the reporting period DIVID€NOS RENT INTEREST Type of Income CAPITAL GAINS Brockc EXCEPTED/BUND TRUST TAX DEFERRED Pannorsh Hoyaltea Other Type of Income (Specifyr e.g., Partnership Income or Farm income) For essets for which you checked "Tax-Dafared" in Block C, you may check the "Nona" column. For all other essets indicate the category of income by checking the appropriate box below. Ordereds, interests, and capital gains, even if reinvected, must be disclosed as income for assets held in taxable accounts. Orack "Nona" disconcerne was samed or generated. is which you have no interest "Column XIIIs for assets held by your appease or dependent childr None = \$201-\$1,000 = × ₹ \$1,001 \$2,500 Amount of Income < \$2,501-\$5,000 \$5,001 \$15,000 BLOCKD ≤ ≦ \$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 Asset with income over \$1,000 000 Ĭ exchanges (E) exceeding \$1,000 in the reporting blank if there are no transactions that exceeded esset had please indicate as follows: (5 (part)). if only a portion o period Indicate if the S(pan) eetes (5), or ринсћањев (Р), earve this collunin Transaction BLOCKE

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SCHEDULE B - TRANSACTIONS

Name: Michael T. McCaul Page 4 of 10

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					- 4													See Attached Schedule	Example Mega Corp. Stock	>##90	Capital Gains: if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box, unless it was an asset in a tax-deferred account, and discloss like capital gain income on Schedule A. "Column K is for assets solely held by your spouse or dependent children.	purchase of sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please choose "pertial sale" as the type of transaction.	dependent children for investment or the production of norms. Include transactions that resulting the production of an exchange transactions bring that resulting the production of an exchange transactions. For link transactions between the provides a prief description of an exchange transaction.	Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the reporting bended of any security or real property hald by you, your spouse, or your
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SCHEDULE C - EARNED INCOME

Name: Michael T. McCaul Page 5 of 10

List the source, type, a	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 honoragin; list only the source for other spouse earned income exceeding \$1,000. See examples below.	int) totaling \$200 or more during the reporti	ing period. For a spouse, list the
EXCLUDE: Military pa	EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	Security Act.	
NCOMELIMITS and F	INCOMELIMITS and PROMIBITED INCOME: The 2024 limit on outside earned income for Members and employees compensated at or above the "senior steff" rate was \$31,815. The 2025 limit is \$33,285, in addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited.	above the "senior steff" rate was \$31,815. T ire totally prohibited.	The 2025 limit is \$33,285. In addition,
	Source (include date of receipt for honoraria)	Туре	Amount
	Keene State	Approved Teaching Fee	\$6,000
Examples:	State of Maryland	Legislative Pension	\$18,000
	CIVII War Roundlable (Oct. 2)	Spouse Speech	\$1,000
	Ontario County Board of Education	Spouse Salery	KIN
N/A			
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SCHEDULE D - LIABILITIES

Name: Michael T. McCaul	
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eru 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 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 children. Mark the highest amount owed during the reporting period.

Members: Members are required to report all liabilities secured by real property including mongages on their personal residence. Exclude: Any mongage on your personal residence (unless you rent it out or or the children, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit cerd) 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 children.

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		_		N/A	Exemple			
	•				First Bank of Wilmington, DE	Creditor		
					5/20	Date Liability Incurred MO/YR		
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SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calandar 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: Positions heid in any religious, social, fraternal, or political entities (such as political parties and campaign organizations), and positions solely of an hongrary natura

		Board Member Ke	Position	Services acoust account a political cultures (30ch of the
		Kennedy Center	Name of Organization	THE STATE OF THE PROPERTY OF T

SCHEDULE F - AGREEMENTS

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Name Michael T. McCau	
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of 10	

dentify the date, parties to, and general terms of any agreement or arrangement that you have with respect to future employment; a leave of at deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or be

Date	Parties to Agreement	Terms of Agreement
	N/A	

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 children from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality from an individual (which may not include a registered tobbyist or foreign agent), local meals, and gifts to a spouse or dependent children that are totally independent of his or har 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
Example:	Mr. Joseph Smith, Adington, VA	Silver Platter (prior determination of personal friendship received from the Committee on Ethics)	\$500
N/A			

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

Name: Michael T. McCaul	
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of 10	

you and reimbursed by the sponsor. Identify the source and list travel linerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$480 received by you, your spouse, or your dependent children during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor or were paid by

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 children that is totally independent of his or her relationship to the filter.

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	\$ource	Date(s)	City of Departure-Destination-City of Return	Ledging? (Y/N)	Food? (Y/N)	Family Hember Included? (Y/N)
	Government of Chine (MECEA)	Aug. 5-11	DC-Serjing, China-DC	*	۲	z
Examples.	Habitet for Hurnanity (Charity Fundraliser)	Mar. 3-4	DC:Boxton:DC	≺ '	≺	*
N/A						

OF HONORARIA SCHEDULE I - PAYMENTS MADE TO CHARITY IN LIEU

Name: Michael T. McCaul Page 9 of 10

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. X X Examples: XYZ Magazine Association of American Associations, Washington, DC Source Activity Speech Aug. 13, 2024 Feb. 2, 2024 Date Amount \$2,000 \$500

Name: Michael T. McCaul

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