



Filing ID #10017299

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • 135 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Hon. Sam Johnson
Status: Member
State/District: TX03

FILING INFORMATION

Filing Type: Amendment Report
Filing Year: 2016
Filing Date: 05/17/2017

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Congressional Federal Credit Union		\$1,001 - \$15,000	Interest	\$1 - \$200	<input type="checkbox"/>
Franklin Gold		\$15,001 - \$50,000	Capital Gains	\$1,001 - \$2,500	<input type="checkbox"/>
Legacy Bank		\$1,001 - \$15,000	Interest	\$1 - \$200	<input type="checkbox"/>

SCHEDULE B: TRANSACTIONS

None disclosed.

SCHEDULE C: EARNED INCOME

None disclosed.

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
JT	Legacy Texas	December 2004	Mortgage on 7105 Havencrest Drive Plano, Texas 75074	\$15,001 - \$50,000

SCHEDULE E: POSITIONS

Position	Name of Organization
Board of Regents	Smithsonian Institution, Washington DC

SCHEDULE F: AGREEMENTS

None disclosed.

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 Heritage Foundation	01/27/2016	01/29/2016	Washington DC - Salamander Resort, Middleburg VA - Washington DC	2	<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. Sam Johnson , 05/17/2017