DELIVERED

#### PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS PO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? UNITED STATES HOUSE OF REPRESENTATIVES EXEMPTION - Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or your dependent child because they meet 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 that benefits you, your spouse, or dependent child? 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 in the current calendar year up through the date of filing? E. Did you hold any reportable positions during the reporting period or C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the exchange any securities or reportable real estate in a transaction B. Did you, your spouse, or your dependent child purchase, sell, or Name: tency 2018 FINANCIAL DISCLOSURE STATEMENT contact the Committee on Ethics for further guidance. A. Did you, your spouse, or your dependent child: reporting period? exceeding \$1,000 during the reporting period? REPORT STATUS a. Own any reportable asset that was worth more than \$1,000 at the FILER Receive more than \$200 in unearmed income from any reportable end of the reporting period? or. 2018 Annual (Due: May 15, 2019) Member of the U.S. House of Representatives C. "Hank & Johnson JV Daytime Telephone: (202)25-1605 State: District: Yes Yes ĕ Yes No Yes 2 <u>×</u> 2 Amendment Z Z 0 S For Use by Members, Officers, and Employees G. Did you, your spouse, or your dependent child receive any F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" lieu of paying you for a speech, appearance, or article during the reporting period? H. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$390 in value from a single reportable travel or reimbursements for travel totaling more than \$390 in value from a single source during the reporting period? Did any individual or organization make a donation to charity in source during the reporting period? year up through the date of filing? Form A Employee Officer or Employing Office: Termination Date of Termination: individual who files more than 30 days late. A \$200 penalty shall be assessed against ar MC2019 MAY 15 PH 5; 25 US HOUSE OF THE CLERK LEGISLATIVE RESOURCE CENTER Shared Staff Filer Type: (If Applicable) Yөs Yes ¥es Yes ¥es Yes Principal Assistant <del>Ž</del>

all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics,

Yes

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				,	Dekallo	_	Examples:	SP	\$1,000 in interest-bearing according to the read proper provide a complete address or properly." and a city and state, that is not publicly traded, state is not publicly traded, state is not publicly traded, stocation in Block A.  Exclude: Your personal residuhornes and vacation homes (chincome during the reporting perinterest in, or income derinterest in, or income for interest in, or income interest in privately-traded fif you so choose, you may not income sounce is that of you so choose, you may not for the propional column on the fif you so choose, you may not for the propional column on the fif you so choose, you may not for the propional column on the fif you so choose you may not for the propional column on the fif you so choose you may not for the propional column on the fif you so choose you may not for the propional column on the fif you so choose you may not for the propional column on the fif you so choose your may not for the propional column on the fif you so choose you may not for the propional column on the fif you so choose you may not for the propional column on the fif you so choose you may not for the propional column on the fifth you so choose you may not find you so choose you may not find you may not find you so choose you will not you you will not	ank and other prest-bearing ery financial	) plans) provi	de complete i of use only tic all IRAs and	production of inco exceeding \$1,000 and (b) any other rethat generated more during the year.	Assets an	
				a	a county ba	ABC Hedge Fund		Mega Corp. Stock	\$1,000 in interest-bearing accounts. 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 an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of 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); and any financial interest in, or income derived from, a leaderal interest in, or income during the That Savings Plan.  If you report a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box.  If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or income source is that of your spouse (SP) or income source is that of your spouse (SP) or income source source in the far left.  For a detailed discussion of Schedule A requirements, please rafer to the instruction booklet.	For bank and other cash eccounts, total the smount in all interest-bearing accounts. If the total is over \$5,000, its every financial institution where there is more than	401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds; (do not use only ticker symbols).  For all IRAs and other retirement plans (such as	usering (e) each asset into or irreture to production of income and with a fair market value accessing \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income that generated more than \$200 in "unearned" income during the year.	Assets and/or income Sources	BLOCK A
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_	4					<b> </b>	_		\$1-\$1,000		- Θ	you have no interest.	valuation method other than 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."  "Column M is fix assets held by your soouse or decendent child in which	Value of Asset	
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					ļ: .	1			TAX-DEFERRED			•	generate tax-deterned income (such as 529 accounts), you may check the column. Dividends, interest, and capt if rainvested, must be disclosed a seests held in taxable accounts. One seest openated to po income during the r	. G	
					Kensi'sh	Income	Royallies		Other Type of Income (Specify: a.g., Partnership Income or Farm Income)				401(k), IRJ "Tax-Defer tal gains, e is income ck "None" to	r accounts that	
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Τ.									\$1-\$200		=	ich y	check yory tenda		
					×		×		\$201-\$1,008	٠.	<b>=</b>	1	Che disch		
								×	\$1,001-\$2,500		2	*Column XII is for assets held in which you have no interest.	may check the "None category of income Dividends, interest, must be disclosed accounts. Check "No	<u> </u>	<u> </u>
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				Γ	Τ				\$5,001-\$15,000		≤	<u>.</u> 15.	uman. Hacki capi ncom f no ir		. }
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$\prod$					1		I		\$106,001-\$1,000,000	: .	ж.	Column XII is for assets held by your spouse or dependent child in which you have no interest.	may check the "None" column. For all other assets indicate the category of income by checking the appropriate box below. Dividends, interset, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if no income was earned or generated.	Amount of assets for which you checked "Tax-Deferred" in Block C. you	•
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floor							1		Over \$5,000,000		¥	dent	dicati ox be invest a tax jenera	Š Ĉ	
									Spouse/DC Asset with Income over \$1,000,000*		¥			<u>ě</u>	
								S(part)	\$1,000. P, S, S(part), or	Leave this colur blank if there are no transactions that exceeded	follows: (S (part	period. If only a portion an asset was so please indicate	asset had purchases (P), sales (S), or exchanges (E) exceeding \$1.00 in the reporting	Indicate if the	Tennandi

	SCHEDULE A - ASSETS & "UNEARNED INCOME"
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Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the	Тур	Type of Transaction	nsactio	3	1	Date				A	Amount of		Transaction	š			
reporting bende of any security or less property need by you, your spouse, or your dependent child for investment or the production of income, include transactions that resulted in a capital loss. Provide a brief description of an exchange transaction.	: · ·				xceeded		>	σ»	o	0	rri	ח	6	<b>I</b>	<del>-</del>	٠.	*
Exclude transactions between you, your spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please choose 'partial sale,' as the type of transaction.					apital Gain E	(MO/DAYR) or Quarterly.										000	
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 disclose the capital gain income on Schedule A.	rchase	le	rtiel Sale	changa	eck Box if C 00	weekly, if applicable	,001- 5,000	5,001- 0,000	0,061- 00,600	00,001- 50,000	50,901- 60,000	500,001- 1,000,000	,000,001- ,000,000	5,000,001- 25,000,000	25,000,001- 50,000,000	ver \$50,000	ver \$1,000,0 Spouse/DC
<ul> <li>Column K is for assets solely held by your spouse or dependent child.</li> </ul>	Po	Sa	Pa	Ex	C1 \$2		\$1 \$1		\$		\$	\$1			\$.	0	
SP, DC, JT Asset																	
SP Example Mega Corp. Stock			×		×	3/9/18		×	. :						<u> </u>		
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### SCHEDULE C - EARNED INCOME

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Page Y of B	
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the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.	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 pe	
	g the reporting period.	
	For a spouse, I	

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

INCOME LIMITS and PROHIBITED INCOME: The 2018 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$28,050. The 2019 limit is \$28,44 in addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited.	impensated at or above the "senior staff" rate was a fiduciary relationship) are totally prohibited.	\$28,050. The 2019 limit is \$28,44
Source (include date of receipt for honoraria)	Туре	Amount
$\downarrow$	Approved Teaching Fee	\$6,000 \$18,000
Examples: Civit West Roundlable (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Selary	\$1,000 N/A
Dekalle County Commission	spouse Salary	2 P
Johnson and Appenell Coleman, LLC	spouse salary	274
DeKalb County GA	Dension	911,000

#### SCHEDULE D - LIABILITIES

Name: Hark Johnson, Jr.

Page 5 of 6

owed to you by a spouse or the child, parent, 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. 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 properly 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, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities

	Exa	SP, DC, JT			\$10.000.
0CMEN	Example First Bank of Wilmington, DE	Creditor			Column N is for flabilities rield solely by your spouse or dependent crima.
3\w	5/16	Date Liability Incurred MO/YR			a shouse or nebu
mortgage on primary home Lithinia, lat.	Mortgage on Rental Property, Dover, DE	Type of Liability			Silveric Cilia.
		\$10,001- \$15,000	A		
		\$15,001- \$50,000			
		\$50,001- \$100,000	c		
X	×	\$100,001- \$250,000	O	<b>\</b>	
		\$250,001- \$500,000	3	moun	
		\$500,001- \$1,000,000	F	Amount of Liability	
		\$1,000,001- \$5,000,000	G	ability	
		\$5,000,001- \$25,000,000	<b>T</b>		
		\$25,000,001- \$50,000,000	<u>-</u>		
		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:

Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

Position	Name of Organization
Not Applicable	

#### SCHEDULE F - AGREEMENTS

Name: Hank Johnson Jr.	
Page 6 of 8	
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employer
continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee wetrare or benefit maintained by a former or current employee other than the U.S. government; or continuing participation in an employee wetrare or benefit maintained by a former or current employee other than the U.S. government; or continuing participation in an employee wetrare or benefit maintained by a former or current employee.
identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: tuture employment; a leave or assence during the period of given the first transfer of any agreement or arrangement that you have with respect to: tuture employment; a leave or assence during the period of given the given th

employer.		
Date	Parties to Agreement	Terms of Agreement
7004	Dekalb County GA and Hamy	Dension
	C. "Hank" Thinkson Jr.	

#### SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$390 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 lobbyist 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 \$156 or less need not be added towards the \$390 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, Arlington, VA	Silver Platter (prior determination of personal friendship received from the Committee on Ethics)	\$400
	not Apolicable	

# SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

Name: Hank Johnson

Page 7 of S

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$390 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 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 (FGDA, 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

the filer.					
Source	Date(s)	City of Departure-Destination-City of Return	Lodging? (Y/N)	Food? (Y/N)	Family Membe Included? (Y/h
Government of China (MECEA)	Aug. 6-11	DC-Beijng, China-DC	۲	٧	¥
Examples: Habitat for Humanity (charity fundrates)	Mar. 3-4	DC-Boston-DC	*	. ≺	٧
Congressional Black Caucus	21-6 5mg	by 9-12 ATL TURICE, MS-BIL	4	7	7
Political Educations and	0				
Leadership Institute					
				<u>.</u>	
alabal Poverty Project Inc.	Nov 30-		~	4	Z
(slobal Citizen	Dec 12				
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## SCHEDULE I – PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

Name:
tank John, J.
Page 8 of 8

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 separal confidential list of charities receiving such payments must be filed directly with the Committee on Ethics.

Source	Activity	Date	Amount
	Speech	Feb, 2, 2018	\$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2018	\$500
Not Applicable			