	Jose F. Serrano		202-225-4361	
	(Full Name)		(Daytime Telephone)	WEREDONLY)
Filer Status	Member of the U.S. State: NY House of Representatives District: 16	Officer Or Employee	Employing Office:	
Report Type	Annual (May 15) Amendment	☐ Termination	Termination Date:	more than 30 days late.
RELIMIN	PRELIMINARY INFORMATION ANSWER EACH	OF THESE QUESTIONS	STIONS	
Did you or yo or more from	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	Yes 💟 No 🔲 Vi.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)?	ntable gift in ot otherwise , Yes
Did any indiv	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 was, complete and attach Schedule II.	Yes No VII.	Did you, your spouse, or a dependent child receive any reportable travel or relimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	rtable travel or re than \$335 Yes No
Did you, you III. more than \$2 more than \$1 If yes, com	Did you, your spouse, or a dependent child receive "uneamed" 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.	Yes 🗸 No 🗌 VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	of filing in the
Did you, your IV. reportable as period?	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?	Yes 🗌 No 🗹 IX.	Did you have any reportable agreement or arrangement with an outside entity?	an outside Yes ☐ No ☑
If yes, com Did you, you V. (more than \$	If yes, complete and attach Schedule IV. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	Yes U No	Each question in this part must be answered and the appropriate schodule affached for each "Yes" response	red and the appropriate
EXCLUSION OF	CLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSI	JST INFORMATIO	N ANSWER EACH OF THESE QUESTIONS	JESTIONS
Trusts-	Details regarding "Qualified Blind Trusts" appro trusts" need not be disclosed. Have you exclud child?	oved by the Committee on led from this report details	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct 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?	cepted Yes No
Exemptions-		ssets, "unearned" income. ? Do not answer "yes" ur	, transactions, or liabilities of a spouse or dependent child nless you have first consulted with the Committee on	n Yes No 🗸

SCHEDULE I - EARNED INCOME

Name Jose E. Serrano

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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 preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Туре	Amount
NYS Employee Retirement System	Pension	\$14,000

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Wright Patman Congressional Federal Credit Union	If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent or sibling; any deposits totaling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.	Asset and/or income Source Asset and/or income Source 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 assets or sources of income which generated more than \$200 in "unearned" income during the year. For rental property or land, provide a complete address. Provide full names of stocks and mutual funds (do not use ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) that are self directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value and income information on each asset in the account that exceeds the reporting threshold. For retirement plans that are not self-directed, name the institution holding the account and its value at the end of the reporting period. For an active business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. For additional information, see the instruction booklet.	
\$15,001 - \$50,000			Year-End Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	
INTEREST			Type of Income Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA". For all other assets including all IRAs, indicate the type of income by checking the appropriate box below. Dividends and Interest, even if reinvested, should be listed as income. Check "None" if asset did not generate any income during the calendar year.	
\$1 - \$200			Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, including all IRAs, indicate the category of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was earned or generated.	
other		<u> </u>	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.	

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