

POSTMARK ILLEGIBLE

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT

FORM B

For New Members, Candidates, and New Employees

LEGISLATIVE RESOURCE CENTER

18 MAY 23 PM 2:04

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

AL

Name: Anthony J. Portantino Daytime Telephone: _____

FILER STATUS	<input checked="" type="checkbox"/> New Member of or Candidate for U.S. House of Representatives	State: <u>CA</u> District: <u>undetermined</u>	<input type="checkbox"/> Check if Amendment
	<input type="checkbox"/> Candidates - Date of Election: _____		
	<input type="checkbox"/> New Officer or Employee	Staff Filer Type (If Applicable): <input type="checkbox"/> Shared <input type="checkbox"/> Principal Assistant	Period Covered: January 1, <u>2017</u> to <u>December 31, 2017</u>

A \$200 penalty shall be assessed against any individual who files more than 30 days late.

PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? <u>or</u> b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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 <input checked="" type="checkbox"/> No <input type="checkbox"/>	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?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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 <input type="checkbox"/> No <input checked="" type="checkbox"/>	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"
THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS

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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
EXEMPTION - Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Page 2 of 1

[illegible]

Page 2 of 7

[illegible]

Use additional sheets if more space is required.

Page 4 of 7

BLOCK A													BLOCK B													BLOCK C													BLOCK D																									
Assets and/or Income Sources													Value of Asset													Type of Income													Amount of Income																									
																																							Current Year													Preceding Year												
ASSET NAME																																																																
SIF 500 Index													None													None													None													None												
Small cap Blend													A \$1-\$1,000													DIVIDENDS													I \$1-\$200													I \$1-\$200												
Small cap Index													B \$1,001-\$15,000													RENT													II \$201-\$1,000													II \$201-\$1,000												
Large cap Growth													C \$15,001-\$50,000													INTEREST													III \$1,001-\$2,500													III \$201-\$1,000												
Savings Plus 401K													D \$50,001-\$100,000													CAPITAL GAINS													IV \$2,501-\$5,000													IV \$1,001-\$2,500												
Bond Index													E \$100,001-\$250,000													EXCEPTED/BLIND TRUST													V \$5,001-\$15,000													V \$2,501-\$5,000												
Int'l Index													F \$250,001-\$500,000													TAX-DEFERRED													VI \$15,001-\$50,000													VI \$5,001-\$15,000												
Large cap													G \$500,001-\$1,000,000													Other Type of Income (Specify: e.g., Partnership Income or Firms Income)													VII \$50,001-\$100,000													VII \$10,001-\$50,000												
Large cap Index													H \$1,000,001-\$5,000,000																										VIII \$100,001-\$1,000,000													VIII \$10,001-\$50,000												
Mid cap													I \$5,000,001-\$25,000,000																										IX \$1,000,001-\$5,000,000													IX \$201-\$1,000												
Mid cap Index													J \$25,000,001-\$50,000,000																										X \$5,000,001-\$10,000,000													X \$2,501-\$5,000												
Target 2025													K Over \$50,000,000																										XI Spouse/DC income over \$1,000,000*													XI \$15,001-\$50,000												
Small cap													Spouse/DC Asset over \$1,000,000*																										XII													XII \$50,001-\$100,000												
Small cap Index																																							XIII													XIII \$100,001-\$1,000,000												
IT 1300 M Fund																																							XIV													XIV \$1,000,001-\$5,000,000												
IT 1300 M Fund																																							XV													XV \$5,000,000												
IT 1300 M Fund																																							XVI													XVI Spouse/DC income over \$1,000,000*												
IT 1300 M Fund																																							XVII													XVII None												
IT 1300 M Fund																																							XVIII													XVIII \$1-\$200												
IT 1300 M Fund																																							XIX													XIX \$201-\$1,000												
IT 1300 M Fund																																							XX													XX \$1,001-\$2,500												
IT 1300 M Fund																																							XXI													XXI \$2,501-\$5,000												
IT 1300 M Fund																																							XXII													XXII \$5,001-\$15,000												
IT 1300 M Fund																																							XXIII													XXIII \$15,001-\$50,000												
IT 1300 M Fund																																							XXIV													XXIV \$50,001-\$100,000												
IT 1300 M Fund																																							XXV													XXV \$100,001-\$1,000,000												
IT 1300 M Fund																																							XXVI													XXVI \$1,000,001-\$5,000,000												
IT 1300 M Fund																																							XXVII													XXVII \$5,000,000												
IT 1300 M Fund																																							XXVIII													XXVIII Spouse/DC income over \$1,000,000*												
IT 1300 M Fund																																							XXIX													XXIX None												
IT 1300 M Fund																																							XXX													XXX \$1-\$200												
IT 1300 M Fund																																							XXXI													XXXI \$201-\$1,000												
IT 1300 M Fund																																							XXXII													XXXII \$1,001-\$2,500												
IT 1300 M Fund																																							XXXIII													XXXIII \$2,501-\$5,000												
IT 1300 M Fund																																							XXXIV													XXXIV \$5,001-\$15,000												
IT 1300 M Fund																																							XXXV													XXXV \$15,001-\$50,000												
IT 1300 M Fund																																							XXXVI													XXXVI \$50,001-\$100,000												
IT 1300 M Fund																																							XXXVII													XXXVII \$100,001-\$1,000,000												
IT 1300 M Fund																																							XXXVIII													XXXVIII \$1,000,001-\$5,000,000												
IT 1300 M Fund																																							XXXIX													XXXIX \$5,000,000												
IT 1300 M Fund																																							XL													XL Spouse/DC income over \$1,000,000*												

Use additional sheets if more space is required.

Page 5 of 7

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

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: He advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2016 limit on outside earned income for Members and employees compensated at or above the rate was \$27,485. The 2017 limit is \$27,765. In addition, certain types of income (probably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

[illegible]

SCHEDULE D - LIABILITIES

Name: Anthony J. Patatino

Page 6 of 7

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. New Members: Members are required to report all liabilities secured by real property 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 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.

SP, DC, JT	Creditor	Date Liability Incurred MO/YR	Type of Liability	Amount of Liability										
				A	B	C	D	E	F	G	H	I	J	K
				\$10,001-\$15,000	\$15,001-\$50,000	\$50,001-\$100,000	\$100,001-\$250,000	\$250,001-\$500,000	\$500,001-\$1,000,000	\$1,000,001-\$5,000,000	\$5,000,001-\$25,000,000	\$25,000,001-\$50,000,000	Over \$50,000,000	Over \$1,000,000* (Spouse/DC Liability)
Example	First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE				X							
DT	Ditech	12/06	Mortgage on 1396 Milford Dr W. Sacramento				X							

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, 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. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

Position	Name of Organization
Member	Santa Monica Conservancy Advisory Board (uncompensated)
Advisory Board Member	Professional Child Development Associates (uncompensated)
Advisory Board Member	Hedmanway Sycamors (uncompensated)
BOARD MEMBER	CIT STATE BOARDING Commission
MEMBER	Instructional Quality Commission

Use additional sheets if more space is required.

SCHEDULE F - AGREEMENTS

Name: Anthony J. Patentino Page 7 of 7

Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties to Agreement	Terms of Agreement
12/01/04	City of La Canada Flintridge	Member of CALPERS Pension Plan for 8 years Service on advisory council. Estimated \$30 months.

SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

Source (Name and City/State)	Brief Description of Duties
Example Doe Jones & Smith, Hometown, Homestate	Accounting Services

Use additional sheets if more space is required.