SCHEDULE I - ÉARNED INCOME (INCLUDING HONORARIA)

Name SCRIRGIM C JOHNSON

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	15514 20 (JM)		
\$ 71, 685.00	\$ 71,685.00	SA LARY	STATE OF MICHIGAN / MICH. SENATE
NA	NA	Spouse Salary	Harris County, Texas Public Schools
\$1,000	0	Honorarium	XYZ Trade Association, Chicago, IL (Rec'd December 2)
\$3,200	\$400	Director's Fee	
\$28,450	\$6,300	Salary ·	XYZ Corporation, Houston, TX
Preceding Year	Current Year to Filing	- ypo	Color (include date of receipt to inclidialia)
unt	Amount	Time	
Security Act.	benefits received under the Social Security Act.	ement programs, and benefits re	Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and
use earned income	the source for other spo	amount of any honoraria; list only	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
at) totalling \$200 or	at by the LIC Commo	than the file of current amplement	trouply, control and employed powers to the control and the last to the

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	SLE VALUE	STATE OF MICH. 401 K		Examples: Simon & Schuste	SP, SP Mega Corp. Stock	ness, 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); any deposits totaling \$5,000 or less in personal checking or savings accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. 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 with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the busi-	account and its value at the end of the reporting period. For rental or other real property held for investment, provide a complete address.	Asset and/cr income Source dentify (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 reportable asset or sources of income which generated more than \$200 in "unearned" income during the year. Provide complete 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 for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed provide only the name of the institution holding the
					4	None \$1 - \$1,000		<u> </u>	ma ma lnc
				=	-	\$1,001 - \$15,000	-	9 C	Indicate of report reporting the reporting the reporting reporting only be income "None."
	<		\vdash	œ.	\dashv	\$15,001 - \$50,000			orti
				Indefinite	\forall	\$50,001 - \$100,000		m	Value Indicate value of reporting walue, waluation met market value, method used. If an asset wareporting year only because income, the wallone."
			×	4		\$100,001 - \$250,000		וד	BLC be o BLC year ayea ar a ar a ar a ar a walthough wal
						\$250,001 - \$500,000		G	BLOCK B Value of Asset Indicate 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 during the reporting year and is included only because it generated income, the value should be "None."
					1	\$500,001 - \$1,000,000		Ξ	A Se s Se s Short
						\$1,000,001 \$5,000,000		_	t at the per later with a trust the per later with
						\$5,000,001 - \$25,000,000		ſ	se clo an an city be
					_	\$25,000,001 - \$50,000,000		7	a se the
						Over \$50,000,000		r	
	<u> </u>				겍	NONE			thas as ress to be designed on the second of
					4	DIVIDENDS			Type of in Type of in Check all columns retirement accounts allow you to che investments or that deferred income (suplans or IRAs), you. "None" column. Divest, and capital gest, and capital gest reinvested, must as income. Check asset generated no the reporting period
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			\vdash			INTEREST			The local field of the local fie
			H		\dashv	CAPITAL GAINS			e of inc. locations the accounts to choo or that goome (suches), you manual be check "I beck "I beck "I beck" I beck "I beck
			H		-	EXCEPTED/BLIND TRUST			ins chunts chunt
				Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm In	ncome))	Type of Income Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments of that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as Income. Check "None" if the asset generated no income during the reporting period.
	<					None			
			L		_	\$1 - \$200	=]	
			Ļ		_	\$201 – \$1,000	= <	┨╻╢	
			Ļ		×	\$1,001 – \$2,500	_ <	Current Year	ភ្នំ នួង ២ភ្ភេខ ៖ ៩ ភ
			×	×	-	\$2,501 – \$5,000	<	<u> </u>	Amount of Income Amount of Income For retirement accounts that do not choose specific investments or ate tax-deferred income (such as or IRAs), you may check the "Not For all other assets, indicate the income by checking the approbelow. Dividends, interest, and gains, even if reinvested, muclosed as income. Check "Not income was earned or generated.
]				-	_	\$5,001 - \$15,000	XI IIIV IX	Į ≅ ∣	The Dos
			┝┤	-	\dashv	\$15,001 - \$50,000	_}_	┨┋╏	Amount of Incc rement accounts that one se specific investment deferred income (such deferred income (such deferred income), you may check the other assets, indicate by checking the a Dividends, interest even if reinvested, as income. Check was earned or general
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	+		┝┼	- 1	+	Over \$5,000,000	×	1	Amount of Income ant accounts that do ne pecific investments or red income (such as ou may check the "No r assets, indicate the checking the approfedends, interest, and if reinvested, mu income. Check "Nearned or generated.
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			┝┼	+	\times	\$201 - \$1,000	=	1 _	COI
			┝╅	+		\$1,001 \$2,500		1 ਛੱਂ	BLOCK D Amount of Income Amount of Income ement accounts that do not a se specific investments or the deferred income (such as 401), you may check the "None" other assets, indicate the cat by checking the appropriate of the cat income. Check "None as income. Check "None was earned or generated.
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					7	\$15,001 - \$50,000	VI VIII	@	llow you it gener- (k) plans (column. egory of ate box capital be dis-)" if no
			-†		\dashv	\$50,001 - \$100,000		⋨	ans nn. vital no
			-†		T	\$100,001 - \$1,000,000	- <u>-</u>	1 §	
						\$1,000,001 - \$5,000,000	×	1	
				- 1		Over \$5,000,000	×	1	

SCF	SCHEDULE II — ASSETS AN Continuation Sheet (if needed)	ASSETS AND "UNEARNED" INCOME	INCOM
	Asset and/or Income Source	Value of Asset	
SP,		A B C D E F G H I J K L	
В Н		0,000 00,000 250,000 500,000 1,000,000 \$5,000,000 \$25,000,000	000
		None \$1 - \$1,000 \$1,001 - \$15 \$15,001 - \$5 \$50,001 - \$1 \$100,001 - \$ \$250,001 - \$ \$500,001 - \$ \$1,000,001 - \$5,000,001 - \$25,000,001 Over \$50,000	
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			_

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SCHEDULE III — LIABILITIES

Name BERTRAM C. JOHNSON

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owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furni-Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount ture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000.

					SP, DC, JT
			DEPT. OF EDUCATION	Example: First Bank of Wilmington, DE	Creditor
			6/2001	May 1998	Date Liability Incurred mo/year
			STUDENT LOAN	Mortgage on 123 Main Street, Dover, DE	Type of Liability
	9				\$10,001— \$15,000
			 <u> </u>		\$15,001— B
-					\$50,001— \$100,000 O
ŀ				×	\$100,001— \$250,000 D Amou
-					\$500,000 m
-		:	 •		\$1,000,001— 6
ŀ					\$5,000,000 * \$5,000,001— T \$25,000,000
-					\$25,000,000 \$25,000,001— \$50,000,000
					Over \$50,000,000

SCHEDULE IV — POSITIONS

Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization);

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30			Position	and positions solely of an nonorary nature.
			Name of Organization	ature.

SCHEDULE V — AGREEMENTS

Name BERTRAM C. JOHNSON

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SCHEDULE VI — COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the *two* prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization 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 I.

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
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