

# FINANCIAL DISCLOSURE REPORT

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#### FILER INFORMATION

Name: Brynne Kennedy

**Status:** Congressional Candidate

State/District: CA04

## FILING INFORMATION

Filing Type: Candidate Report

Filing Year: 2019

**Filing Date:** 05/30/2019

**Period Covered:** 01/01/2018-05/30/2019

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
22 Summit Road, Richmond, MA [RP]	\$250,001 - \$500,000	Rent	\$15,001 - \$50,000	None
Location: Richmond, MA, US Description: Rental Property				
Topia, Ltd. [PS]	\$5,000,001 - \$25,000,000	Capital Gains	None	\$469,318.00
Description: Sale of Stock				

 $<sup>*</sup> For the complete list of asset type abbreviations, please visit \underline{ {\tt https://fd.house.gov/reference/asset-type-codes.aspx.} \\$ 

## SCHEDULE C: EARNED INCOME

Source	Туре	Amount Current Year to Filing	Amount Preceding Year
Topia, Inc.	Employment	\$300,000.00	\$472,375.00
Joelle Delbourgo Assoc. Inc.	Book Advance	\$19,000.00	\$15,000.00

## SCHEDULE D: LIABILITIES

Owner Creditor	Date Incurred	Туре	Amount of Liability
Lee Bank	10/26/2018	Mortgage on Rental Property	\$250,001 - \$500,000

#### SCHEDULE E: Positions

Position	Name of Organization
Director	Topia Ltd.
CEO	Topia Ltd.
Director	The Other 1%

## SCHEDULE F: AGREEMENTS

Date	Parties To	Terms of Agreement
February 2019	Topia, Inc. and Brynne Kennedy	Topia, Inc. agreed to pay Brynne Kennedy one year of salary continuation over the 2019 calendar year.
February 2019	Topia, Inc. and Brynne Kennedy	Topia, Inc. agreed to pay one year of medical insurance for Brynne Kennedy via COBRA for the 2019 calendar year.

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

None disclosed.

## EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

**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?

∇es 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?

C 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: Brynne Kennedy, 05/30/2019