



Filing ID #10008136

# FINANCIAL DISCLOSURE REPORT

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## FILER INFORMATION

**Name:** Hon. Glenn Thompson  
**Status:** Member  
**State/District:** PA05

## FILING INFORMATION

**Filing Type:** Amendment Report  
**Filing Year:** 2013  
**Filing Date:** 06/23/2015

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
403 (b) Plan from Susquehanna Health ⇒ American Funds AMCAP R5 (Ticker RAFFX)		\$1,001 - \$15,000	Tax-Deferred		<input type="checkbox"/>
403 (b) Plan from Susquehanna Health ⇒ American Funds EuroPacific Gr A (Ticker AEPGX)		\$1,001 - \$15,000	Tax-Deferred		<input type="checkbox"/>
403 (b) Plan from Susquehanna Health ⇒ Invesco Growth and Income A (Ticker ACGIX)		\$1,001 - \$15,000	Tax-Deferred		<input type="checkbox"/>
403 (b) Plan from Susquehanna Health ⇒ Prudential Jennison Mid Cap Growth A (Ticker PEEAX)		\$1,001 - \$15,000	Tax-Deferred		<input type="checkbox"/>
403 (b) Plan from Susquehanna Health ⇒ T. Rowe Price Mid-Cap Value (Ticker TRMCX)		\$1,001 - \$15,000	Tax-Deferred		<input type="checkbox"/>
606 Walnut Street Howard, Pennsylvania (Rental Property) LOCATION: Hooward / Centre, PA, US	JT	\$50,001 - \$100,000	Rent	\$5,001 - \$15,000	<input type="checkbox"/>
MetLife Tax Sheltered Annuity T-Flex		\$1 - \$1,000	None		<input type="checkbox"/>

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
National Western Life Insurance		\$100,001 - \$250,000	None		<input type="checkbox"/>

\* Asset class details available at the bottom of this form.

SCHEDULE B: TRANSACTIONS

None disclosed.

SCHEDULE C: EARNED INCOME

None disclosed.

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
DC	Sallie Mae	September 2008	Education Loan for son (Kale)	\$15,001 - \$50,000

SCHEDULE E: POSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE G: GIFTS

None disclosed.

SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS

None disclosed.

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

None disclosed.

SCHEDULE A AND B ASSET CLASS DETAILS

◦ 403 (b) Plan from Susquehanna Health
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EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

IPO: Did you purchase any shares that were allocated as a part of an Initial Public Offering?

☐ Yes ☒ No

**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?

☐ Yes ☒ 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?

☐ 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:** Hon. Glenn Thompson , 06/23/2015