



Filing ID #10005139

FINANCIAL DISCLOSURE REPORT

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FILER INFORMATION

Name: Hon. Eddie Bernice Johnson
Status: Member
State/District: TX30

FILING INFORMATION

Filing Type: Amendment Report
Filing Year: 2013
Filing Date: 04/8/2015

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Blind Trust ⇒ Eddie Bernice Johnson Qualified Revocable Blind Trust		\$500,001 - \$1,000,000	Excepted/Blind Trust	None	<input type="checkbox"/>
Legislative Pension State of Texas		\$15,001 - \$50,000	None		<input type="checkbox"/>
Texas Credit Union		\$1 - \$1,000	Interest	\$1,001 - \$2,500	<input type="checkbox"/>
U.S. Savings Bond ⇒ U.S. Savings Bond		\$1,001 - \$15,000	Interest	\$5,001 - \$15,000	<input type="checkbox"/>
DESCRIPTION: U.S. Savings Bond					

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

SCHEDULE B: TRANSACTIONS

None disclosed.

SCHEDULE C: EARNED INCOME

Source	Type	Amount
State of Texas	Legislative Pension	\$35,000
Social Security	Social Security	\$22,000

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	Bank of America	January, 2007	Liability	\$500,001 - \$1,000,000

SCHEDULE E: POSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

Date	Parties To	Terms of Agreement
January 2003	Self and the State of Texas	Legislative Pension for the State of Texas

SCHEDULE G: GIFTS

None disclosed.

SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS

Trip Details					Inclusions		
Source	Start Date	End Date	Itinerary	Days at Own Exp.	Lodging?	Food?	Family?
MECEA	12/28/2013	01/4/2014	Dulles Airport, VA - Rabat, Morocco - Dulles Airport, VA		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

None disclosed.

SCHEDULE A AND B ASSET CLASS DETAILS

<ul style="list-style-type: none"> Blind Trust LOCATION: TX, US U.S. Savings Bond LOCATION: US
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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. Eddie Bernice Johnson , 04/8/2015