UNITED STATES HOUSE OF REPRESENTATIVES For New Members,	FORM B For New Members, Candidates, and New Employees	MAY 12 2016 Page 1 of 8
Name: Geraldine F. Thompson Daytime Telephone:	ne: 	N DESTABLIST OF 1:26
New Member of or Candidate for State: Florida U.S. House of Representatives District: 10th Candidates – Date of Election: August 30th, 2016	Check if Amendment	(Office Use Only)
New Officer or Employee Employing Office:	Period Covered: January 1, 2016 to December 31,2016	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE QUESTIONS	ONS	
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? or b. Make more than \$200 in unearned income from any reportable asset during the reporting period?	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	ing the reporting period Yes No X
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes X No or reporting period?	F. Do 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?	r arrangement with an Yes No X
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	Did you receive compensation of more than source in the current year and two prior years?	ation of more than \$5,000 from a single Yes X No
ATTACH THE CORRESPONDING SCHEDULE IF YOU AND THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE RE	EDULE IF YOU ANSWER "YES" "HAT YOU ARE REQUIRED TO (SWER "YES" QUIRED 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 this report details of such a trust that benefits you, your spouse, or dependent child?		be disclosed. Have you excluded from Yes 🔲 No 🔲
EXEMPTION - Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child be exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	ouse or dependent child because they mee	cause they meet all three tests for Yes No No

SCHEDULE

BLOCK A BLOCK B BLOCK B BLOCK C BLOCK D for Income Sources Value of Asset Type of Income Amount of Income	Name: Geraldine F. Thomspon BLOCK B	E A - ASSETS & "UNEARNED INCOME"	
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Name: Geraldine F. Thompson Page_

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SCHEDULE C - EARNED INCOME

ļ	Name:	
	Geraldine F. Thompson	
	Page 4 of 8	

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below. 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: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2015 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,225. The 2016 limit is \$27,495. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

		Am	Amount
Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
Examples: State of Maryland	Salary	\$20,000	\$76,000
Ontario County Board of Education	Spouse Salary	N/A	N/A
State of Florida, Senior Judge	Salary	32,200	32,200
State of Florida, State Senator	Salary	29,697	29,697

SCHEDULE D - LIABILITIES

Name:	:
Geraldine F. Thompson	
Page 5 of 8	

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.

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 partnership, or educations of the United States. Exclude: Positions held in the reporting period and the profit of the Country of the United States. Exclude: Positions held in the reporting period and the profit of the Country of th

the current calendar year. First-year candidates and new	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
Executive Committee Member	National Black Caucus of State Legislators
Chair	Florida Legislative Black Caucus
Board of Directors	Orlando Children's Trust
Board of Trustees	Dr. Phillips Center for the Preforming Arts

SCHEDULE F - AGREEMENTS

	Name: Geraldine F. Thompson	
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	Page 6 of 8	
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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
:		

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. opportunent and any information considered confidential as a result of a nitrilianed relationship recognized by law. Do not reneat information listed on Schedule C.

government ar	nd any information considered confidential as a result of a	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

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Page 8 of 8

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