



Filing ID #10011361

FINANCIAL DISCLOSURE REPORT

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FILER INFORMATION

Name: Hon. Danny K. Davis
Status: Member
State/District: IL07

FILING INFORMATION

Filing Type: Annual Report
Filing Year: 2015
Filing Date: 05/12/2016

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
AIG VALIC	SP	\$100,001 - \$250,000	Dividends	\$5,001 - \$15,000	<input type="checkbox"/>
DESCRIPTION: SPOUSE WITHDRAWAL OF \$17,461.93					
AIG VALIC	JT	\$15,001 - \$50,000	Dividends	\$201 - \$1,000	<input type="checkbox"/>
DESCRIPTION: withdrawal \$13,293.43					
AUSTIN BANK	JT	\$1 - \$1,000	Interest	\$1 - \$200	<input type="checkbox"/>
BANK OF AMERICA	JT	\$1,001 - \$15,000	Interest	\$1 - \$200	<input type="checkbox"/>
CHASE BANK	JT	\$1,001 - \$15,000	Interest	\$1 - \$200	<input type="checkbox"/>
KNIGHT INSURANCE	JT	\$1,001 - \$15,000	Dividends	None	<input type="checkbox"/>
LIBERTY BANK	JT	\$1,001 - \$15,000	Interest	\$1 - \$200	<input type="checkbox"/>
MY STOCK FUND	JT	\$1,001 - \$15,000	Interest	\$201 - \$1,000	<input type="checkbox"/>

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Nicor Inc. 5.00% Convertible Preferred Stock (NICRL)	JT	\$1 - \$1,000	Interest	\$1 - \$200	<input type="checkbox"/>
SEAWAY BANK	JT	\$1,001 - \$15,000	Interest	\$1 - \$200	<input type="checkbox"/>
SOUTHSIDE CREDIT UNION	JT	\$1 - \$1,000	Interest	\$1 - \$200	<input type="checkbox"/>
UNITED CREDIT UNION	SP	\$1 - \$1,000	Interest	\$1 - \$200	<input type="checkbox"/>

SCHEDULE B: TRANSACTIONS

None disclosed.

SCHEDULE C: EARNED INCOME

Source	Type	Amount
US Government	Spouse Social Security	\$2,345.72
US Government	Social Security	\$29,579
Valic	Spouse withdrawl	\$17,461.93
Valic	Member withdrawl	\$13,293.43
Thrift Saving Plan (TSP)	Member withdrawl	\$20,000
Chicago Public School	Spouse Pension	\$46,736.76

SCHEDULE D: LIABILITIES

None disclosed.

SCHEDULE E: POSITIONS

Position	Name of Organization
ADVISORY BOARD MEMBER	STREETWISE NEWSPAPER
BOARD MEMBER	EAST WEST UNIVERISTY
ADVISORY BOARD	PREVENTION PARTNERSHIP

SCHEDULE F: AGREEMENTS

None disclosed.

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?
National Association of Community Health Centers	08/23/2015	08/24/2015	Chicago - Orlando, FL - Chicago	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mass League of Community Health Centers	11/23/2015	11/24/2015	Chicago - Boston - Chicago	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

None disclosed.

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. Danny K. Davis , 05/12/2016