



Filing ID #10022889

# FINANCIAL DISCLOSURE REPORT

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## FILER INFORMATION

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

## FILING INFORMATION

**Filing Type:** Annual Report  
**Filing Year:** 2017  
**Filing Date:** 05/14/2018

## 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 (EQ) [EQ]		\$500,001 - \$1,000,000	None		<input type="checkbox"/>
Legislative Pension State of Texas [PE] [PE]		\$15,001 - \$50,000	None		<input type="checkbox"/>
U.S. Savings Bond [GS] [PE]		\$1,001 - \$15,000	Interest	\$5,001 - \$15,000	<input type="checkbox"/>

\* Asset class details available at the bottom of this form. For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

## SCHEDULE B: TRANSACTIONS

None disclosed.

## SCHEDULE C: EARNED INCOME

Source	Type	Amount
Social Security	Social Security Earning	\$25,000.00

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	Bank of America	January 2007	Liability	\$100,001 - \$250,000

SCHEDULE E: POSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

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

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

<div><div>◦ Blind Trust</div><div>LOCATION: TX, US</div></div>
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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

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☒ 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 , 05/14/2018