



Filing ID #10022114

FINANCIAL DISCLOSURE REPORT

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FILER INFORMATION

Name: Hon. Kathleen Rice
Status: Member
State/District: NY04

FILING INFORMATION

Filing Type: Annual Report
Filing Year: 2017
Filing Date: 05/15/2018

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Chase Bank Account [BA]		\$1,001 - \$15,000	Interest	\$1 - \$200	<input type="checkbox"/>
IRA Rollover Account - American Portfolios ⇒ Dreyfus Ins Deposit -Brokerage Money Market [IH]		\$1,001 - \$15,000	Tax-Deferred		<input type="checkbox"/>
IRA Rollover Account - American Portfolios ⇒ First Eagle Global Fund Class I (SGIIX) [MF]		\$15,001 - \$50,000	Tax-Deferred		<input type="checkbox"/>
IRA Rollover Account - American Portfolios ⇒ Franklin Income Fund Advisor Class (FRIAX) [MF]		\$15,001 - \$50,000	Tax-Deferred		<input type="checkbox"/>
IRA Rollover Account - American Portfolios ⇒ Leader Total Return Fund (LCTIX) [MF]		\$1,001 - \$15,000	Tax-Deferred		<input type="checkbox"/>
IRA Rollover Account - American Portfolios ⇒ Mutual Global Discovery Fund - Class Z (MDISX) [MF]		\$1,001 - \$15,000	Tax-Deferred		<input type="checkbox"/>
New York State and Local Retirement System [PE]		Undetermined	None		<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

None disclosed.

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	JP Morgan Chase NA	February 2011	Mortgage on Personal Residence	\$50,001 - \$100,000
	American Express	Balance at close of the reporting period.	Revolving charge account.	\$15,001 - \$50,000

SCHEDULE E: POSITIONS

Position	Name of Organization
Member, Board of Governors	Touro Law Center

SCHEDULE F: AGREEMENTS

Date	Parties To	Terms of Agreement
January 2006	Kathleen Rice and New York State	Pension system participant - New York State and Local Retirement System

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?
The Aspen Institute, Inc. (Congressional Program)	04/8/2017	04/15/2017	New York, NY - Tokyo, Japan - Seoul, South Korea - New York, NY	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
The Aspen Institute, Inc. (Congressional Program)	02/18/2017	02/26/2017	Washington DC - New Delhi, India - Hyderabad, India - New York, NY	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Trip Details					Inclusions		
Source	Start Date	End Date	Itinerary	Days at Own Exp.	Lodging?	Food?	Family?
U.S. Association of Former Members of Congress	05/30/2017	06/3/2017	New York, NY - Berlin, Germany - Newark, NJ	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The Ripon Society and the Franklin Center for Global Policy	08/6/2017	08/11/2017	Washington, DC - Berlin, Germany - Washington, DC	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

None disclosed.

SCHEDULE A AND B ASSET CLASS DETAILS

- IRA Rollover Account - American Portfolios

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. Kathleen Rice , 05/15/2018