



Filing ID #10053875

FINANCIAL DISCLOSURE REPORT

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FILER INFORMATION

Name: Hon. Mark Pocan
Status: Member
State/District: WI02

FILING INFORMATION

Filing Type: Annual Report
Filing Year: 2022
Filing Date: 05/12/2023

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Budget Signs & Specialties, 100% Interest [OL] LOCATION: Monona/Dane, WI, US DESCRIPTION: business	JT	\$250,001 - \$500,000	Dividends	\$50,001 - \$100,000	<input type="checkbox"/>
Fidelity Fund [MF]	JT	\$50,001 - \$100,000	Dividends	None	<input type="checkbox"/>
Settlers Bank [BA]	JT	\$100,001 - \$250,000	Interest	\$201 - \$1,000	<input type="checkbox"/>
State of Wisconsin Pension [PE] DESCRIPTION: The WI Retirement System is a defined benefit pension that has no underlying holdings.		Undetermined	None		<input type="checkbox"/>
US Treasury I Bond [GS]	JT	\$15,001 - \$50,000	Interest	None	<input type="checkbox"/>

* For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

SCHEDULE B: TRANSACTIONS

Asset	Owner	Date	Tx. Type	Amount	Cap. Gains > \$200?
US Treasury I Bond [GS]	JT	03/31/2022	P	\$15,001 - \$50,000	

* For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

SCHEDULE C: EARNED INCOME

Source	Type	Amount
Budget Signs & Specialties	Spouse Salary	N/A
State of Wisconsin Pension	State Pension	\$10,620.00

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	US Bank	November 2020	Washington DC condo	\$250,001 - \$500,000
	Old National	March 2014	Home mortgage	\$100,001 - \$250,000
	Settlers Bank	November 2021	business equipment loan	\$10,000 - \$15,000

SCHEDULE E: POSITIONS

Position	Name of Organization
Proprietor	Budget Signs & Specialties, LLC
Board Member COMMENTS: Position is not compensated.	Progressive Caucus Center (Nonprofit Organization)
Board Member COMMENTS: Position not compensated	Humpty Dumpty Institute (Nonprofit Organization)

SCHEDULE F: AGREEMENTS

Date	Parties To	Terms of Agreement
January 1999	Myself and State of Wisconsin	continued partnership in State pension plan

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.

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. Mark Pocan , 05/12/2023