

## UNITED STATES HOUSE OF REPRESENTATIVES

## 2020 FINANCIAL DISCLOSURE STATEMENT

Form A

For Use by Members, Officers, and Employees

HAND  
DELIVEREDLEHIGH VALLEY RESOURCE CENTER  
(Office Use Only)

2021 AUG 13 AM 9:22

A \$200 penalty shall be assessed against any individual who fails more than 30 days late.

Name: Sheila Jackson Lee Daytime Telephone: 202 225 - 3816

FILER STATUS	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: <u>Texas</u>	Officer or Employee	Staff Filer Type: (If Applicable)
REPORT TYPE	<input checked="" type="checkbox"/> 2020 Annual (Due: May 17, 2021)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Shared <input type="checkbox"/> Principal Assistant <input type="checkbox"/>
			Date of Termination:	

## PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

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? <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	F. Did 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?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$415 in value from a single source during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$415 in value from a single source during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	I. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	<b>ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"</b>	

## IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS

IPO – Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answered 'yes' to this question, please contact the Committee on Ethics for further guidance.

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 that benefits you, your spouse, or dependent child?

EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or your dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.

## **SCHEDULE A - ASSETS & "UNEARNED INCOME"**

Name: Sheila Jackson Lee Page 2 of 8

**SCHEDULE A – ASSETS & “UNEARNED”**

Name: Sheila Jackson Legge

Page 3 of 9

BLOCK A Assets and/or Income Sources		BLOCK B Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
ASSET NAME	AMOUNT				
Sp 1514 Wimberlea Houston, Tx			NONE		
Sp 4428 McRae Drive Houston, Tx		\$1-\$5,000			
Fidelity Retirement 403k Optimal Retirement Plan	X	\$5,001-\$10,000			
Sp 403k Tax Deferred Retirement	X	\$10,001-\$25,000			
Sp IRA L3A 03 6152 Stock Port	X	\$25,001-\$50,000			
Sp IRA L3A 04 201 Stock Port	X	\$50,001-\$100,000			
Port of L3A 03 613 Charles Bank	X	\$100,001-\$500,000			
		Over \$500,000			
		Specia/UC Asset over \$1,000,000*			
			NONE		
			UNINCERUS		
			RENT		
			INTEREST		
			CAPITAL GAINS		
			EXCERED-BUND TRUST		
			TAX-PREFERRED		
			Other type of income (Specify: e.g. Partnership Income or Farm Income)		
			NONE		
			\$1-\$200		
			\$201-\$1,000		
			\$1,001-\$2,500		
			\$2,501-\$5,000		
			\$5,001-\$10,000		
			\$10,001-\$50,000		
			\$50,001-\$100,000		
			\$100,001-\$500,000		
			Over \$500,000		
			Specia/UC Asset with Income over \$1,000,000*		
			P.S. Signer, etc.		

## SCHEDULE C – EARNED INCOME

Name: Syle Jackson Lee

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 a 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:** The 2020 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$28,845. The 2021 limit is \$29,595. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited.

Source (include date of receipt for honoraria)	Type	Amount
--	------	--------

Examples:

Kenn State  
State of Maryland  
Civil War Roundtable (Ch. 2)  
Ontario County Board of Education

*The University of Houston - Stark of Texas*  
*- Administrative Position*

*Spouse Salary*

*1/4*

## SCHEDULE D – LIABILITIES

Name: Ashley Jackson Lee Page 5 of 8

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period. 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.

SP D.C./JR	Creditor	Date Liability Incurred MO/YR	Type of Liability	Amount of Liability									
				A	B	C	D	E	F	G	H	I	J
	Example First Bank of Wilmington, DE	3/20	Mortgage on Rental Property, Dover, DE										
SP	Ronald Scott	4/2014	Mortgage Residence	X	X								
SP	Residence One Credit Union	11/2014	Mortgage Residence										
SP	Bank America	12/2014	Auto Loan	X									
SP	Wright Partner Union	12/2014	Credit Card		X								
SP	Wright Partner	2015	Coop Home			X							

## SCHEDULE E – POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year 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 entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

### Position

### Name of Organization

SP Board Member, <u>Bruegger's</u>	Project Run House (non-profit)
SP Vice President, <u>Bruegger's</u>	Volunteer - Bruegger's Kitchen
SP Board Member	Starfele Community Center (non-profit)
Board Member	Camp Black Canyon Foundation (non-profit)
Corpor. Director, <u>Bruegger's</u>	Bruegger's Member
Board Member	Bruegger's Member
Interning Chairman	Bruegger's Chairman

Use additional sheets if more space is required.

## SCHEDULE D - LIABILITIES

Name STEG-Lee Truck Lines Inc. Page 12 of 25

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period. Mortgages: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Realistic: Any mortgage on your personal residence (unless you rent it out or use 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 exceeds \$10,000. Column K is for liabilities held solely by your spouse or dependent child.

Creditor Name	Date Liability Inurred MOYR	Type of Liability	Amount of Liability									
			A	B	C	D	E	F	G	H	I	J
Bank of Oklahoma, OK	070	Deposits in Bank	\$100,001-\$100,000	\$100,001-\$100,000	\$100,001-\$100,000	\$100,001-\$100,000	\$100,001-\$100,000	\$100,001-\$100,000	\$100,001-\$100,000	\$100,001-\$100,000	\$100,001-\$100,000	\$100,001-\$100,000
Thrift Savings Plan	10/2001	Loan	X									
Wells Fargo	10/2001	Loan		X								
Wells Fargo	10/2001	Check/Lean		X								
Neiman	1/1/02	Bank Loan			X							
Neiman Marcus	10/2001	Banking Credit			X							

## SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year 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. Realistic: Positions held in any industry, regardless of whether funds so received constitute compensation and positions outside of the United States.

Position	Name of Organization
Sup. Member Adv. Board	The Ford Loyalists Committee, "City of Plymouth, Indiana"
Sup. Board Member	Black Marketing Network (Local-Pacif.)
Sup. Board Member	West Michigan Grange Home Owners Assoc.

## SCHEDULE F – AGREEMENTS

**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**

Date	Parties to Agreement	Terms of Agreement
1/95	ST. FERD'S CONVENT WOMEN from The City of Houston Received	Pay out of City Pension - not yet

**SCHEDULE G – GIFTS**

**Report the source (by name), a brief description, and the value of all gifts totaling more than \$415 received by you, your spouse, or your dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality from an individual (which may not include a registered lobbyist or foreign agent), local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$166 or less need not be added towards the \$415 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule and some gifts require prior approval of the Committee on Ethics.**

Source	Description	Value
Example: Mr. Joseph Smith, Arlington, VA	Silver Platter (prior determination of personal friendship received from the Committee on Ethics)	\$500

**Use additional sheets if more space is required.**

Name: Sherry Jackson Lee Page 7 of 8

## **SCHEDULE H – TRAVEL PAYMENTS and REIMBURSEMENTS**

Name: SHEILA JACKSON Leg: 8 Page: 8 of 8

Page 8 of 8

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$415 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

**EXCLUDE:** Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

**EXCLUDE:** Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

Source	Date(s)	City of Departure-Destination-City of Return	Lodging?	Food?	Family Member Included? (Y/N)
Government of China (MECEA) Example:	Aug. 6-11	DC-Beijing, China-DC	Y	Y	N
Habitat for Humanity (Charity Fundraiser)	Mar. 3-4	DC-Boston-DC	Y	Y	Y

**Use additional sheets if more space is required.**