



Filing ID #10050875

# FINANCIAL DISCLOSURE REPORT

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## FILER INFORMATION

**Name:** Hon. Tom Malinowski  
**Status:** Former Member  
**State/District:** NJ07

## FILING INFORMATION

**Filing Type:** Terminated Filer Report  
**Filing Year:** 2023  
**Filing Date:** 02/6/2023

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Bank of America Checking Account [BA]		\$15,001 - \$50,000	Interest	\$1 - \$200	<input type="checkbox"/>
CREF Bond Market [PE]		\$15,001 - \$50,000	None		<input type="checkbox"/>
CREF Social Choice [PE]		\$100,001 - \$250,000	None		<input type="checkbox"/>
CREF Stock [PE]		\$100,001 - \$250,000	None		<input type="checkbox"/>
The Tomasz P. Malinowski Blind Trust [EQ]		\$1,000,001 - \$5,000,000	Excepted/Blind Trust	\$2,501 - \$5,000	<input type="checkbox"/>
TIAA Real Estate [PE]		\$15,001 - \$50,000	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

None disclosed.

## SCHEDULE C: EARNED INCOME

None disclosed.

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	Mr Cooper Mortgage	November 2019	Home Mortgage	\$100,001 - \$250,000
	TD Auto Finance	January 2019	Vehicle Loan	\$15,001 - \$50,000

SCHEDULE E: POSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

None disclosed.

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. Tom Malinowski , 02/6/2023