

UNITED STATES HOUSE OF REPRESENTATIVES
2020 FINANCIAL DISCLOSURE STATEMENT

 Form A
 For Use by Members, Officers, and Employees

02 APR -2 (AM/PM Only)

LEGISLATIVE RESOURCE CENTER

 Name: Wm Lacy Clay Daytime Telephone: _____

FILER STATUS	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: <u>MO</u>	Officer or Employee: _____	Staff Filer Type: (If Applicable) <input type="checkbox"/> Shared <input type="checkbox"/> Principal Assistant
REPORT TYPE	<input type="checkbox"/> 2019 Annual (Due: May 15, 2020)	<input type="checkbox"/> Amendment	<input checked="" type="checkbox"/> Termination	Date of Termination: <u>1-2-2021</u>

 USE THIS CHECK BOX
A \$200 penalty shall be assessed against any individual who files more than 30 days late.

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? Yes No
 - b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?
 - c. 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 No
 - d. 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 No
 - e. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? Yes No
 - 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 No
 - g. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$300 in value from a single source during the reporting period? Yes No
 - h. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$300 in value from a single source during the reporting period? Yes No
 - 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 No

ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"
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 "exempted 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.

Yes No

Yes No

Yes No

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Lucy Ray

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BLOCK A												BLOCK B												BLOCK C												BLOCK D																																									
Assets and/or Income Sources												Value of Asset												Type of Income												Amount of Income												Transaction																													
<p>Identify (a) each asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, used, and (b) any other reportable asset or source of income that generated more than \$200 in "unearned" income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use only stock symbols).</p> <p>For all IRAs and other retirement plans (such as 401(k)s plans) provide the value for each asset held in the account that exceeds the reporting thresholds.</p>												<p>Indicate value of asset at close of the reporting period. If you use a valuation method other than fair market value, please specify the method.</p> <p>For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.</p> <p>For rental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and state.</p> <p>For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.</p>												<p>If an asset was sold during the reporting period and is included only because it generated income, the value should be "None."</p> <p>*Column M is for assets held by your spouse or dependent child in which you have no interest.</p>												<p>Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k)s, IRA, or many check the "None" column. For all other assets indicate the asset held column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if no income was earned or generated if re-invested.</p>												<p>For assets for which you checked "Tax-Deferred" in Block C, you indicate if the asset held for assets held in taxable accounts. Check "None" if no income was earned or generated if re-invested.</p>																													
A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ	AA	BB	CC	DD	EE	FF	GG	HH	II	JJ	KK	LL	MM	NN	OO	PP	QQ	RR	SS	TT	UU	VV	WW	XX	YY	ZZ
<p>Excluded: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period), and any financial interest in, or income derived from, a Federal retirement program, including the Thrift Savings Plan. If you report privately-held funds that is an Excepted Investment Fund, please check the "EF" box.</p> <p>If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (J).</p> <p>In the optional column on the far left, for a detailed discussion of Schedule A requirements, please refer to the instruction booklet.</p>												<p>None</p> <p>\$1-\$1,000</p> <p>\$1,001-\$15,000</p> <p>\$15,001-\$50,000</p> <p>\$50,001-\$100,000</p> <p>\$100,001-\$250,000</p> <p>\$250,001-\$500,000</p> <p>\$500,001-\$1,000,000</p> <p>\$1,000,001-\$5,000,000</p> <p>\$5,000,001-\$25,000,000</p> <p>\$25,000,001-\$50,000,000</p> <p>Over \$50,000,000</p> <p>Spouse/DC Asset over \$1,000,000*</p> <p>None</p> <p>DIVIDENDS</p> <p>RENT</p> <p>INTEREST</p> <p>CAPITAL GAINS</p> <p>EXCEPTED/BLIND TRUST</p> <p>TAX-DEFERRED</p> <p>Other Type of Income (Specify: e.g., Partnership Income or Farm Income)</p>												<p>None</p> <p>\$1-\$200</p> <p>\$201-\$1,000</p> <p>\$1,001-\$2,500</p> <p>\$2,501-\$5,000</p> <p>\$5,001-\$15,000</p> <p>\$15,001-\$50,000</p> <p>\$50,001-\$100,000</p> <p>\$100,001-\$1,000,000</p> <p>\$1,000,001-\$5,000,000</p> <p>Over \$5,000,000</p> <p>Spouse/DC Asset with income over \$1,000,000*</p>												<p>Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k)s, IRA, or many check the "None" column. For all other assets indicate the asset held column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if no income was earned or generated if re-invested.</p>												<p>Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k)s, IRA, or many check the "None" column. For all other assets indicate the asset held column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if no income was earned or generated if re-invested.</p>																													
<p>SP, DC, J, Example: ABC Hedge Fund</p>												<p>SP, DC, J, Example: Simon & Schuster</p>												<p>Replies Partnership Income</p>												<p>P, S, Sj, Sjap, or E Start</p>																																									

Use additional sheets if more space is required.

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Wm Racy clay

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Use additional sheets if more space is required.

SCHEDULE B – TRANSACTIONS

Name: Wm Lucy Clegg

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		Type of Transaction									
		Amount of Transaction									
		Date									
SP DC, JT	Asset	Purchase	Sale	Partial Sale	Exchange						
SP	Example					Check Box if Capital Gain Exceeded \$200	(MONTHLY) Quality or Monthly, or Bi-Weekly, if Applicable	A	B	C	D
	Mega Corp. Stock	X	X	X	X		\$1,001-\$15,000				E
	<i>Philip Morris Inc Conoco Phillips</i>	X	X	X	X		\$15,001-\$50,000			F	G
							\$50,001-\$100,000			H	I
							\$100,001-\$250,000			J	K
							\$250,001-\$500,000				
							\$500,001-\$1,000,000				
							\$1,000,001-\$5,000,000				
							\$5,000,001-\$25,000,000				
							\$25,000,001-\$50,000,000				
							Over \$50,000,000				
							Over \$1,000,000* (Spouse/DC Asset)				

Use additional sheets if more space is required.

SCHEDULE D – LIABILITIES

Name: Lynn Lacy Clegg

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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.**

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
DIRECTOR	W.M. CLEARY SCHOLARSHIP & RESEARCH FUND CHARTER VOTE SMART
DIRECTOR	

Use additional sheets if more space is required

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 employer.

Date	Parties to Agreement	Terms of Agreement
9/11	MISSOURI STATE EMPLOYEES GOVERNMENT SYSTEM	MISSOURI STATE LEGISLATORS RETIREMENT

SCHEDULE G – GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$390 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 \$150 or less need not be added towards the \$390 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.

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 \$150 or less need not be added towards the \$350 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
Estate of: Mr. Joseph Smith, Arlington, VA	Silver Pattern (prior determination of personal friendship received from the Committee on Ethics)	\$400

Use additional sheets if more space is required.