

**UNITED STATES HOUSE OF REPRESENTATIVES****2020 FINANCIAL DISCLOSURE STATEMENT**

Form A

For Use by Members, Officers, and Employees

**HAND  
DELIVERED or  
MAILED**

LEGISLATIVE RESOURCE CENTER

2021 JOURNAL OF REPUTATION

Name: Mike Thompson Daytime Telephone: (202) 225-3311

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

FILER STATUS	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: <u>CA</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"/> Shared	<input type="checkbox"/> Principal Assistant
			<input type="checkbox"/> Termination	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?
- b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?

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?

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?

D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?

E. Did you hold any reportable positions during the reporting period or In the current calendar year up through the date of filing?

**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: Mike Thompson

Page 2 of 6

BLOCK A		BLOCK B												BLOCK C												BLOCK D												BLOCK E											
Assets and/or Income Sources		Value of Asset												Type of Income												Amount of Income												Transaction											
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, and (b) any other reportable asset or source of income that generated more than \$200 in “Unearned” income during the year.		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 used.												Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k), IRA, or 423 accounts), you may check the “Tax-Deferred” column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check “None” if the asset generated no income during the reporting period.												For assets for which you checked “Tax-Deferred” in Block C, you may check the “None” column. For all other assets indicate the category of income by checking the appropriate box below. 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 in the reporting period.																							
Provide complete names of stocks and mutual funds (do not use only ticker symbols).		For all IRA and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting threshold.												If an asset was sold during the reporting period and is included only because it generated income, the value should be “None.”												Column M is for assets held by your spouse or dependent child in which you have no interest.												Leave this column blank if there are no transactions that exceeded \$1,000.											
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.		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.												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). In the optional column on the left:												If only a portion of an asset was sold, please indicate as follows: (S) (part).																							
For rental and other real property held for investment property, and a city and state.		For rental and other real property held for investment, provide a complete address or description, e.g., “rental property,” and a city and state.												If an asset was sold during the reporting period and is included only because it generated income, the value should be “None.”												Leave this column blank if there are no transactions that exceeded \$1,000.																							
SP, DC, J	SE	Mesa, Coop. Stock	EEF	A	B	C	D	E	F	G	H	I	J	K	L	M	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	P, S, S(part), or E																				
Exempted:	ABC Hedge Fund	X																																															
ST	Bank of America	X																																															
ST	First Republic Bank	X																																															
ST	Half Ownership	X																																															
1435	1439 Kearney Street, St. Helena	X																																															
DT	Wells Fargo Bank	X																																															
Indemnity																																																	
X																																																	
X																																																	
X																																																	
X																																																	
X																																																	
Royalties																																																	
Partnership Income																																																	

Use additional sheets if more space is required.

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

Name: Mike Thompson

Page 3 of 8

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		
SP. ID.	ASSET NAME	A	B	C	D	E	F	G	H	I	J	K	L	M	I	II	III	IV	V	VI	VII	VIII	X	XI	P	S	I	E
ST	Ownership of 2140 Finley Road East Finley, CA													None														
ST	Silverado Credit Union													\$1-\$1,000														
ST	Washington Mutual Fund	X												\$1,001-\$15,000														
ST	Adventist Health Care Retirement Plan - 401(a) Plan - AHRP Cap Pres - Black Rock US Debt Index - Ameriqa SPA - US Equity Mkt's Indx - Black Rock Russell 3000 Index	X												\$15,001-\$50,000														
		X												\$50,001-\$100,000														
		X												\$100,001-\$250,000														
		X												\$250,001-\$500,000														
		X												\$500,001-\$1,000,000														
		X												\$1,000,001-\$5,000,000														
		X												\$5,000,001-\$25,000,000														
		X												\$25,000,001-\$50,000,000														
		X												Over \$50,000,000														
		X												Spouse/DC Asset over \$1,000,000*														
														NONE														
														DIVIDENDS														
														RENT														
														INTEREST														
														CAPITAL GAINS														
														EXCEPTED/BLIND TRUST														
														TAX-DEFERRED														
														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-\$15,000														
														\$15,001-\$50,000														
														\$50,001-\$100,000														
														\$100,001-\$1,000,000														
														\$1,000,001-\$5,000,000														
														Over \$5,000,000														
														Spouse/DC Asset with Income over \$1,000,000*														
																										P, S, I, E, or E		
																										P		

Use additional sheets if more space is required.

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

Name: Mike Thompson

Page 4 of 8

**SCHEDULE A – ASSETS & “UNEARNED”**

Name: Mike Thompson

Page 5 of 8

ASSET NAME EIN	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																
					A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q
SP Adventist Retirement Plan		None																			
403(b) plan - cont'd		\$1-\$1,000																			
- Black Rock M&G	X	\$1,001-\$15,000																			
AUT EX US Index - Black Rock	X	\$15,001-\$50,000																			
LifePath Index Ret	X	\$50,001-\$100,000																			
Chase Bank		\$100,001-\$250,000																			
		\$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																			
		Spouse/DC Asset over \$1,000,000*																			
		NONE																			
		DIVIDENDS																			
		RENT																			
		INTEREST																			
		CAPITAL GAINS																			
		EXCERPTED/BLIND TRUST																			
		TAX-DEFERRED																			
		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-\$15,000																			
		\$15,001-\$50,000																			
		\$50,001-\$100,000																			
		\$100,001-\$1,000,000																			
		\$1,000,001-\$5,000,000																			
		Over \$5,000,000																			
		Spouse/DC Asset with Income over \$1,000,000*																			
		P, S, S(part), or E																			
Bank Account opened 9/30/12																					

Use additional sheets if more space is required.

## SCHEDULE B – TRANSACTIONS

 Name: Mike Thompson | Page 6 of 8

		Type of Transaction		Date	Amount of Transaction										
SP SP, DC, JT	Example	Purchase	Sale		A	B	C	D	E	F	G	H	I	J	K
	SP Adventist Health Care Retirement Plan 401(a)														
	- Black Rock Russell 3000 Index	X													
	- Black Rock Russell 3000 Index	X													
	- Black Rock US Debt Index	X													
	SP Adventist Health Care Retirement Plan 403(b)														
	- Black Rock Russell 3000 Index	P		1/7/20	X										
	- Black Rock Russell 3000 Index	P		1/21/20	X										
	- Black Rock Russell 3000 Index	P		2/4/20	X										
	- Black Rock Russell 3000 Index	P		2/18/20	X										
	- Black Rock Russell 3000 Index	P		3/3/20	X										
	- Black Rock Russell 3000 Index	P		3/31/20	X										
	- Black Rock Russell 3000 Index	P		4/4/20	X										
	- Black Rock Russell 3000 Index	P		4/28/20	X										
	- Black Rock Russell 3000 Index	P		5/12/20	X										

Use additional sheets if more space is required.

Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the reporting period of any security or real property held by you, your spouse, or your dependent child for investment or the production of income, trade transactions that resulted in a capital loss. Provide a brief description of an exchange transaction. Exclude transactions between you, your spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated "rental income". If only a portion of an asset is sold, please choose "partial sale" as the type of transaction.

**Capital Gains:** If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box, unless it was an asset in a tax-deferred account, and disclose the capital gain income on Schedule A.

\* Column K is for assets owned by your spouse or dependent child.

**SCHEDULE C – EARNED INCOME**

Name: Mike Thompson

Page 7 of 4

**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.

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.

In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited.

**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.

### **Examples:**

Club Wines Roundtable (Cont'd.)  
Ontario County Board of Education

St. Helena Hospital

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
Kent State State of Minnesota Civil War Roundtable (Oct. 21) Ontario County Board of Education	Approved Tradition Fee Legislative Briefing Speaker Search Speaker Salary	\$6,000 \$18,000 \$1,000 N/A
St. Helena Hospital		
Spouse Salary	N/A	

Use additional sheets if more space is required.

## SCHEDULE D - LIABILITIES

Name: Mike Thompson

Page 8 of 8

**Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period.** **Members:** Members are required to report all liabilities secured by real property including mortgages on their 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.**

**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.**

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