



Filing ID #10036581

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • 135 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Hon. José E. Serrano
Status: Member
State/District: NY15

FILING INFORMATION

Filing Type: Annual Report
Filing Year: 2019
Filing Date: 06/25/2020

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
NYS Employee Retirement System [PE]		Undetermined	Pension	\$15,001 - \$50,000	<input type="checkbox"/>
Wright Patman Congressional Federal Credit Union [BA]		\$50,001 - \$100,000	Interest	\$1 - \$200	<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

None disclosed.

SCHEDULE E: POSITIONS

Position	Name of Organization
Board of Directors (Uncompensated) Since 1990	Congressional Hispanic Caucus Institute (CHCI)
Board of Directors (Uncompensated) Since 1996	New York City Empowerment Zone Corporation

SCHEDULE F: AGREEMENTS

Date	Parties To	Terms of Agreement
October 1998	José E. Serrano and NYS Government	Pension received for public service related to NY State Government while serving in the NY State Assembly.

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. José E. Serrano , 06/25/2020