



Filing ID #10036755

FINANCIAL DISCLOSURE REPORT

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FILER INFORMATION

Name: Hon. James E. Clyburn
Status: Member
State/District: SC06

FILING INFORMATION

Filing Type: Annual Report
Filing Year: 2019
Filing Date: 07/22/2020

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
645-47 W. Liberty St. [RP] LOCATION: Sumter, SC, US DESCRIPTION: 50% Ownership.		\$50,001 - \$100,000	Rent	\$2,501 - \$5,000	<input type="checkbox"/>
Automatic Data Processing, Inc. (ADP) [ST]		\$1,001 - \$15,000	Dividends	\$1 - \$200	<input type="checkbox"/>
Bank of America [IH]		\$15,001 - \$50,000	Tax-Deferred		<input type="checkbox"/>
Bank of America [BA]		\$1,001 - \$15,000	Interest	\$1 - \$200	<input type="checkbox"/>
Bank of America Corporation (BAC) [ST]	SP	\$15,001 - \$50,000	Dividends	\$201 - \$1,000	<input type="checkbox"/>
Dominion Energy, Inc. (D) [ST]		\$15,001 - \$50,000	Dividends	\$1,001 - \$2,500	<input type="checkbox"/>
South Carolina Retirement System [PE]		Undetermined	Pension	\$50,001 - \$100,000	<input type="checkbox"/>
South Carolina State Credit Union [BA]		\$1 - \$1,000	Interest	\$1 - \$200	<input type="checkbox"/>

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Wright Patman Congressional Federal Credit Union [BA]		\$1 - \$1,000	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

Source	Type	Amount
South Carolina Retirement System	Retirement from State of South Carolina	\$58,334.10

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	Bank of America	May 2003	Mortgage on Residence in Washington, DC	\$250,001 - \$500,000
	Bank of America	June 1996	Mortgage on Residence in Santee, SC	\$250,001 - \$500,000
	First Citizens Bank	December 2018	Home Equity Line of Credit on Residence in Charleston, SC.	\$50,001 - \$100,000

SCHEDULE E: POSITIONS

Position	Name of Organization
Board Member (uncompensated)	Allen University
Board Member (uncompensated)	Congressional Black Caucus Education & Leadership Institute

SCHEDULE F: AGREEMENTS

Date	Parties To	Terms of Agreement
June 1992	Myself and South Carolina Retirement System	Retirement Pension

SCHEDULE G: GIFTS

None disclosed.

SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS

Trip Details					Inclusions		
Source	Start Date	End Date	Itinerary	Days at Own Exp.	Lodging?	Food?	Family?
Congressional Black Caucus Institute	08/8/2019	08/11/2019	na - Tunica, MS - na	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Congressional Black Caucus Institute	11/8/2019	11/10/2019	n/a - Las Vegas, NV - n/a	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

Source	Activity	Date	Amount	Charity Name
Ninth Episcopal District of the AME Church	Speech	06/25/2019	\$1,500.00	
First Nazareth Baptist Church	Speech	09/7/2019	\$300.00	

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. James E. Clyburn , 07/22/2020