

UNITED STATES HOUSE OF REPRESENTATIVES
2019 FINANCIAL DISCLOSURE STATEMENT

Form A
For Use by Members, Officers, and Employees

EXCERPT FROM THE HOUSE FINANCIAL DISCLOSURE ACT
A \$250 penalty will be imposed against any individual who files more than 30 days late.

2020 JUL 28^{Final} A/HB 82

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

FILER STATUS	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: <u>CA</u>	District: <u>05</u>	Officer or Employee	Employing Office:	Staff Filer Type: (If Applicable) Shared <input type="checkbox"/> Principal Assistant <input type="checkbox"/>
REPORT TYPE	<input checked="" type="checkbox"/> 2019 Annual (Due: May 15, 2020)			<input type="checkbox"/> Amendment	<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?
- 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?
- 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?
- 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?
- 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?

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 "accepted 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.

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 "accepted 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.

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SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: Mike Thompson

Page 2 of 12

BLOCK B												BLOCK C												BLOCK D												BLOCK E																							
Value of Asset												Type of Income												Amount of Income												Transaction																							
For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.												Indicate value of asset or class 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 529 accounts), you may check the "Non-Deferred" category of income by checking the appropriate box below. If reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if there was no gain or loss generated during the reporting period.												Indicate if the asset was sold, purchased, exchanged (\$), or otherwise disposed of during the reporting period.																							
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.												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.												For rental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and state.												For assets for which you checked "In-Deferred" in Block C, you may check the "None" column. For all other assets indicate the asset held: 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 during the reporting period.																							
Provide complete names of stocks and mutual funds (do not use only ticker symbols).												"Column M is for assets held by your spouse or dependent child in which you have no interest."												If only a portion of an asset was sold, please indicate its percentage: (S (part)).																																			
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.												If reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if no income was earned or generated during the reporting period.												Indicate if the asset was sold, purchased, exchanged (\$), or otherwise disposed of during the reporting period.																																			
Exclude: 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 land that is an Excluded Investment Fund, please check the "Elf" box.												"Column M is for assets held by your spouse or dependent child in which you have no interest."												Indicate if the asset was sold, purchased, exchanged (\$), or otherwise disposed of during the reporting period.																																			
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 far left, For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.												"Column M is for assets held by your spouse or dependent child in which you have no interest."												Indicate if the asset was sold, purchased, exchanged (\$), or otherwise disposed of during the reporting period.																																			
None												NONE												None												For assets for which you checked "In-Deferred" in Block C, you may check the "None" column. For all other assets indicate the asset held: 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 during the reporting period.																							
\$1-\$1,000												DIVIDENDS												\$1-\$200												Indicate if the asset was sold, purchased, exchanged (\$), or otherwise disposed of during the reporting period.																							
\$1,001-\$15,000												RENT												\$201-\$1,000												Indicate if the asset was sold, purchased, exchanged (\$), or otherwise disposed of during the reporting period.																							
\$15,001-\$50,000												INTEREST												\$1,001-\$2,500												Indicate if the asset was sold, purchased, exchanged (\$), or otherwise disposed of during the reporting period.																							
\$50,001-\$100,000												CAPITAL GAINS												\$2,501-\$5,000												Indicate if the asset was sold, purchased, exchanged (\$), or otherwise disposed of during the reporting period.																							
\$100,001-\$250,000												EXCEPTED BLIND TRUST												\$5,001-\$15,000												Indicate if the asset was sold, purchased, exchanged (\$), or otherwise disposed of during the reporting period.																							
\$250,001-\$500,000												TA+DEFERRED												\$15,001-\$50,000												Indicate if the asset was sold, purchased, exchanged (\$), or otherwise disposed of during the reporting period.																							
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Use additional sheets if more space is required

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: **Mike Thompson**

Page **3** of **12**

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. DC, ST	ASSET NAME	Esp	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,Spart), or E	
	JT Ownership of 2140 Faulk Road East Finley, CA																												
	JT Silverado Credit Union																												
	JT Washington Mutual Fund	X																											
	SP Adventist Health Care Retirement Plan - 401(a) Plan																												
	- HHRP Cap Pres																												
	- Van Trust Index	X																											
	- Harbor Mid Cap	X																											
	- Prince Total Return	X																											
	- American Balanced																												
	- Washington Mutual																												
	- Black Rock	X																											
	VS Debt Index																												
	ASSETS																												

Use additional sheets if more space is required.

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: Mike Thompson

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SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: Mike Thompson

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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	
SP Adventist Health Care Retirement Plan - 403(b) Plan	None														
-Pimco Total Return	\$1-\$1,000														
- American Funds Amer. Balanced Fund	\$1,001-\$15,000														
- American Funds Wash Mutual - TRP Inst Large Cap Growth Fund	\$15,001-\$50,000														
- ComERICA SDA mid small cap Port	\$50,001-\$100,000														
- CRM Mid Cap Value Fund	\$100,001-\$250,000														
- American Funds Euro Pacific Fund	\$250,001-\$500,000														
	Over \$500,000														
	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, B (part), or E														
S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: **Mike Thompson**

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ASSET NAME [REDACTED]	BLOCK A Assets and/or Income Sources	BLOCK B Value of Asset	BLOCK C Type of Income												BLOCK D Amount of Income Transaction	BLOCK E Transaction
			A	B	C	D	E	F	G	H	I	J	K	L	M	
SP Adventist HealthCare		None														
Retirement Plan		\$1-\$1,000														
403(b) plan - Cont'd		\$1,001-\$15,000														
- Cohen & Steers	X	\$15,001-\$50,000														
RealtyShares		\$50,001-\$100,000														
-MFS Utilities	X	\$100,001-\$250,000														
-Hartford Global Health	X	\$250,001-\$500,000														
-Black Rock US	X	\$500,001-\$1,000,000														
Debt Index	X	Over \$1,000,000														
-Guggenheim SDI		Spouse/DC Asset over \$1,000,000*														
US Equity Mkts Indx																
-Black Rock Russel		NONE														
3000 Index		DIVIDENDS														
-Black Rock MSCI	X	RENT														
ACUT exVS Index	X	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, S(past), or E														
		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: **Mike Thompson**

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ASSET NAME REF#	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	
SP Adventist Health Care Retirement Plan 403 (b) plan, cont'd - Black Rock LifePath Index Fund - Black Rock LifePath Index 2020	EP X X X X X	None \$1-\$1,000 \$1,001-\$15,000 \$15,001-\$50,000 \$50,001-\$100,000 \$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 EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	
	P P.S.	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 w/25 Income over \$1,000,000*	P, S, S(pmt), or E													

SCHEDULE B – TRANSACTIONS

Name: Mike Thompson

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Report any purchases, sales, or exchanges 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. Intra-household transactions that resulted in a capital loss. Provides a brief description of an exchange transaction. Excludes 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.

SP. IX. JT	Asset <u>* Column K is for assets solely held by your spouse or dependent child.</u>
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SCHEDULE B – TRANSACTIONS

Name: Mike Thompson

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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 attach the capital gain income on Schedule A.

• Column K is for assets jointly held by your spouse or dependent child.

SCHEDULE B – TRANSACTIONS

Name: Mike Thompson

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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. Include 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 solely held by your spouse or dependent child.

SP, DC, JT	Asset	Type of Transaction		Purchase	Sale	Partial Sale	Exchange	Check Box if Capital Gain Exceeded \$200	Date							Amount of Transaction						
		SP	Example						(MONTHLY) or Quarterly, Monthly, or Bi- weekly, if applicable	A	B	C	D	E	F	G	H	I	J	K		
SP	Mega Corp. Stock			X		X			3/31/19													
SP	Adventist HealthCare Retirement Plan N03(b) – Cont'd									\$1,001-\$15,000												
	-Black Rock Russell 3000 Index	X								\$15,001-\$50,000												
	-Black Rock MSCI ACWI ex US Index	X								\$50,001-\$100,000												
	-Black Rock LifePath Index Retir	X								\$100,001-\$250,000												
	-Black Rock LifePath Index 2020	X								\$250,001-\$500,000												
	-Black Rock LifePath Index 2030	X								\$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 Assets)												

Use additional sheets if more space is required.

SCHEDULE C – EARNED INCOME

Name: Mike Thompson

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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.

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 2019 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$28,440. The 2020 limit is \$28,845. 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
	Approved Teaching Fee	\$0.00
Keene State	Lective/Presentation	\$18,000
State of Maryland	Spouse Speech	\$1,000
Civ War Roundtable (Cont. 2)		

Use additional sheets if more space is required.

SCHEDULE D - LIABILITIES

Name: mike Thompson

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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. **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.

Use additional sheets if more space is required.