

UNITED STATES HOUSE OF REPRESENTATIVES 2020 FINANCIAL DISCLOSURE STATEMENT

Form A
For Use by Members, Officers, and Employees

HAND DELIVERED Page 1 of 25

LEGISLATIVE RESOURCE CENTER

2022 MAY -4 AM 10:00 (See Only)

FW

Name: Ms. J. Flores Daytime Telephone: _____

Individual who files more than 30 days late.

FILER STATUS	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: <u>TX</u> District: <u>32</u>	<input type="checkbox"/> Officer or Employee	Employing Office: _____	Staff Filer Type: (If Applicable) <input type="checkbox"/> Shared <input type="checkbox"/> Principal Assistant
REPORT TYPE	<input type="checkbox"/> 2020 Annual (Due: May 17, 2021)	<input type="checkbox"/> Amendment	<input checked="" type="checkbox"/> Termination	Date of Termination: <u>2021-01-03</u>	

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? <u>or</u> b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	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 <input type="checkbox"/> No <input checked="" type="checkbox"/>
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?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$416 in value from a single source during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$416 in value from a single source during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	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 <input type="checkbox"/> No <input checked="" type="checkbox"/>
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes <input type="checkbox"/> No <input type="checkbox"/>	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.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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 that benefits you, your spouse, or dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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 <input type="checkbox"/> No <input checked="" type="checkbox"/>

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25 (cont)

Use additional sheets if more space is required.

SCHEDULE A - ASSETS & "UNEARNED"

Name:

W. Flores

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BLOCK A Assets and Income Sources		BLOCK B Value of Asset													BLOCK C Type of Income							BLOCK D Amount of Income													BLOCK E Transaction	
ASSET NAME	SP, DC, JT	A	B	C	D	E	F	G	H	I	J	K	L	M	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/NO 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	Sp, S, Sp/Jt, or R	
<i>Fidelity Investments</i>																																				<i>AS (Joint)</i>
<i>IRA</i>																																				<i>AS (Joint)</i>
<i>Sec Exhibit B</i>																																				<i>AS (Joint)</i>
<i>Federal Employees Thrift Savings Plan</i>																																				<i>AS (Joint)</i>
<i>Sec Exhibit C</i>																																				<i>AS (Joint)</i>
<i>Securities Exchange Earnings</i>																																				<i>AS (Joint)</i>
<i>Sec Exhibit D</i>																																				<i>AS (Joint)</i>
<i>Farmer Bureau & Co. Insurance</i>																																				<i>AS (Joint)</i>
<i>Partners</i>																																				<i>AS (Joint)</i>

SCHEDULE A - ASSETS & "UNEARNED"

Name:

Bill Fildes

Page *4* of *26*

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	ASSET NAME	A	B	C	D	E	F	G	H	I	J	K	L	M	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	TAX-DEFERRED	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	1	2	3	4	5	6	7	8	9	10	11	12	13
	<i>Fidelity Cash</i>																																		
	<i>TPH Partners LP</i>																																		
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SCHEDULE A - ASSETS & "UNEARNED"

Name:

M. J. Thomas

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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	
ASSET NAME	SP, JT, or H	A	B	C	D	E	F	G	H	I	J	K	L	M	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, S, SPOUSE, or H	
		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	\$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*		
<i>ATM Associated with ATM</i>																																				
<i>Inclusive of ATM</i>																																				
<i>(see Exhibit A)</i>																																				
<i>ATM Associated with ATM</i>																																				
<i>The Underlying ATM</i>																																				
<i>(see Exhibit A)</i>																																				

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Use additional sheets if more space is required.

SCHEDULE B - TRANSACTIONS

Name:

Ms. J. J. Evans

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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 child, 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.		Type of Transaction				Check Box if Capital Gain Exceeded \$200	Date month/day/year or Quarterly or Monthly, if applicable	Amount of Transaction										
Purchase	Sale	Partial Sale	Exchange	A \$0-\$100	B \$100-\$100			C \$100-\$100	D \$100-\$100	E \$100-\$100	F \$100-\$100	G \$100-\$100	H \$100-\$100	I \$100-\$100	J Over \$100,000	K Over \$1,000,000		
TPH Partners LP					X	2010	X											
Ariston Partners						2010	X											
(See Exhibit E and Note 4)																		
TPH Partners LLC						2010	X											
Cash Sales	X					2010												
Ariston Partners						2010												
(See Exhibit G and Note 4)																		
AIM MLP Associates Fund LP						2010	X											
Ariston Partners						2010	X											
(See Exhibit A and Note 5)																		
AIM MLP Associates						2010	X											
Ariston Partners						2010	X											
(See Exhibit A and Note 5)																		

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Amount of Liability

SCHEDULE E - POSITIONS

Name of Organization

Use additional sheets if more space is required.

SCHEDULE D - LIABILITIES

Name:

Ms. J. J. Evans

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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.

SP, DC, JT	Creditor	Date Liability Incurred MO/YR	Type of Liability	Amount of Liability										
				A	B	C	D	E	F	G	H	I	J	K
				\$10,001- \$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	Over \$1,000,000* (Spouse/DC Liability)
Example	First Bank of Wilmington, DE	8/20	Mortgage on Rental Property, Dover, DE				X							
	Chase MasterCard	2020	cc note 7		X									
	Citi MasterCard	2020	" " "		X									
	Capital One MasterCard	2020	" " "	X										
	Federal TSI Loan	2020	TSI Loan			X								

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
Trustee	Houston Baptist University (Non-Compensated)
Director	Private Equity Firm Research Center (Non-Compensated)
Advisor	Legislative Hispanic Leadership Institute (Non-Compensated)

SCHEDULE F - AGREEMENTS

Name: Bill Flores

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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; contribution 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
<u>None</u>		

SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$415 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 initially independent of his or her relationship to you. Gifts with a value of \$166 or less need not be added towards the \$415 disclosure threshold. Note: The gift rule (House Rule 26, clause 9) 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
Example: Mr. Joseph Smith, Arlington, VA	Silver Platter (prior determination of personal friendship received from the Committee on Ethics)	\$200
<u>None</u>		

Name: Ms. 11 Flores Page 13 of 26

[illegible]

FILER NOTES
(Optional)

Name: Bill Fones Page 14 of 28

NOTE NUMBER	NOTES
1	These accounts are managed by Highwater Advisors pursuant to an asset allocation model that is updated periodically. All investment transactions are independently executed by Highwater to achieve the objectives set forth in the asset allocation model. Highwater reports the custodian of all accounts to Fidelity Investment. The custodian of all Highwater Advisors was terminated in March 2021 due to poor performance.
3	Storers Opportunity Fund is a private equity fund which has potential and which is being liquidated.
4	TPH Partners LP and TPH Partners PLLC are private equity funds in which others are passive investors. TPH Partners LP sold its remaining interests in 6/1/20.

As of the end of the first half of 2020 and began liquidating the fund leased operations on 12/28/2020.

16

[illegible]

Exhibit B (ix 2)

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Account	Description	12/31/2020 Value	Address	Method of Sale	Net Contribution	Change in Value of Investment	Change in Value of Investment	12/31/2020 Value
Account	Description	12/31/2020 Value	Address	Method of Sale	Net Contribution	Change in Value of Investment	Change in Value of Investment	12/31/2020 Value
0001	0001	-	0001	0001	0001	0001	0001	0001
0002	0002	-	0002	0002	0002	0002	0002	0002
0003	0003	-	0003	0003	0003	0003	0003	0003
0004	0004	-	0004	0004	0004	0004	0004	0004
0005	0005	-	0005	0005	0005	0005	0005	0005
0006	0006	-	0006	0006	0006	0006	0006	0006
0007	0007	-	0007	0007	0007	0007	0007	0007
0008	0008	-	0008	0008	0008	0008	0008	0008
0009	0009	-	0009	0009	0009	0009	0009	0009
0010	0010	-	0010	0010	0010	0010	0010	0010
0011	0011	-	0011	0011	0011	0011	0011	0011
0012	0012	-	0012	0012	0012	0012	0012	0012
0013	0013	-	0013	0013	0013	0013	0013	0013
0014	0014	-	0014	0014	0014	0014	0014	0014
0015	0015	-	0015	0015	0015	0015	0015	0015
0016	0016	-	0016	0016	0016	0016	0016	0016
0017	0017	-	0017	0017	0017	0017	0017	0017
0018	0018	-	0018	0018	0018	0018	0018	0018
0019	0019	-	0019	0019	0019	0019	0019	0019
0020	0020	-	0020	0020	0020	0020	0020	0020
0021	0021	-	0021	0021	0021	0021	0021	0021
0022	0022	-	0022	0022	0022	0022	0022	0022
0023	0023	-	0023	0023	0023	0023	0023	0023
0024	0024	-	0024	0024	0024	0024	0024	0024
0025	0025	-	0025	0025	0025	0025	0025	0025
0026	0026	-	0026	0026	0026	0026	0026	0026
0027	0027	-	0027	0027	0027	0027	0027	0027
0028	0028	-	0028	0028	0028	0028	0028	0028
0029	0029	-	0029	0029	0029	0029	0029	0029
0030	0030	-	0030	0030	0030	0030	0030	0030
0031	0031	-	0031	0031	0031	0031	0031	0031
0032	0032	-	0032	0032	0032	0032	0032	0032
0033	0033	-	0033	0033	0033	0033	0033	0033
0034	0034	-	0034	0034	0034	0034	0034	0034
0035	0035	-	0035	0035	0035	0035	0035	0035
0036	0036	-	0036	0036	0036	0036	0036	0036
0037	0037	-	0037	0037	0037	0037	0037	0037
0038	0038	-	0038	0038	0038	0038	0038	0038
0039	0039	-	0039	0039	0039	0039	0039	0039
0040	0040	-	0040	0040	0040	0040	0040	0040
0041	0041	-	0041	0041	0041	0041	0041	0041
0042	0042	-	0042	0042	0042	0042	0042	0042
0043	0043	-	0043	0043	0043	0043	0043	0043
0044	0044	-	0044	0044	0044	0044	0044	0044
0045	0045	-	0045	0045	0045	0045	0045	0045
0046	0046	-	0046	0046	0046	0046	0046	0046
0047	0047	-	0047	0047	0047	0047	0047	0047
0048	0048	-	0048	0048	0048	0048	0048	0048
0049	0049	-	0049	0049	0049	0049	0049	0049
0050	0050	-	0050	0050	0050	0050	0050	0050
0051	0051	-	0051	0051	0051	0051	0051	0051
0052	0052	-	0052	0052	0052	0052	0052	0052
0053	0053	-	0053	0053	0053	0053	0053	0053
0054	0054	-	0054	0054	0054	0054	0054	0054
0055	0055	-	0055	0055	0055	0055	0055	0055
0056	0056	-	0056	0056	0056	0056	0056	0056
0057	0057	-	0057	0057	0057	0057	0057	0057
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0059	0059	-	0059	0059	0059	0059	0059	0059
0060	0060	-	0060	0060	0060	0060	0060	0060
0061	0061	-	0061	0061	0061	0061	0061	0061
0062	0062	-	0062	0062	0062	0062	0062	0062
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0064	0064	-	0064	0064	0064	0064	0064	0064
0065	0065	-	0065	0065	0065	0065	0065	0065
0066	0066	-	0066	0066	0066	0066	0066	0066
0067	0067	-	0067	0067	0067	0067	0067	0067
0068	0068	-	0068	0068	0068	0068	0068	0068
0069	0069	-	0069	0069	0069	0069	0069	0069
0070	0070	-	0070	0070	0070	0070	0070	0070
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0072	0072	-	0072	0072	0072	0072	0072	0072
0073	0073	-	0073	0073	0073	0073	0073	0073
0074	0074	-	0074	0074	0074	0074	0074	0074
0075	0075	-	0075	0075	0075	0075	0075	0075
0076	0076	-	0076	0076	0076	0076	0076	0076
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0078	0078	-	0078	0078	0078	0078	0078	0078
0079	0079	-	0079	0079	0079	0079	0079	0079
0080	0080	-	0080	0080	0080	0080	0080	0080
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0096	0096	-	0096	0096	0096	0096	0096	0096
0097	0097	-	0097	0097	0097	0097	0097	0097
0098	0098	-	0098	0098	0098	0098	0098	0098
0099	0099	-	0099	0099	0099	0099	0099	0099
0100	0100	-	0100	0100	0100	0100	0100	0100

8

Account	Product	Description	Address/ City/State/Zip	Phone/Fax	Non-Contributing Institution	Change in Value of Institution	Change in Value of Institution	Inventory/ Inventory	12/31/2023 Value
WILLIAM H. FLORES - Andrew BA	CSN1	Relief/Cash Insurance	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD1	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD2	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD3	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD4	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD5	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD6	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD7	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD8	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD9	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD10	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD11	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD12	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD13	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD14	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD15	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD16	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD17	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD18	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD19	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD20	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD21	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD22	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD23	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD24	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD25	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD26	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD27	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD28	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD29	American Express	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00	100,000.00
	PROD30	American Express	100,000.00	100,000.00	100,000.00				

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Exhibit C (2X4)

WILLIAM H. FLORES
Account Number: [REDACTED]

A Summary of Your Account Activity in 2020

Beginning Balance as of January 1, 2020

\$360,618.54	Contributions
34,700.00	Transfers/Rollovers
0.00	Loan Disbursements
- 79,450.00	Loan Payments
22,732.97	Loan Overpayment Refunds
- 894.82	In-Service Withdrawals
- 60,000.00	Investment Gain/Loss
55,718.35	Post-Separation Withdrawals
0.00	

Ending Balance as of December 31, 2020

\$333,422.94

Questions about these terms? Visit tsp.gov/faq/annuallstatement.

Contributions to Your Account in 2020 (Without Adjustments)

Employee Contributions ¹	Roth	Automatic 1% Matching	Agency Contributions	Transfers/Rollovers into the TSP	Total
\$28,000.00	\$0.00	\$1,740.00	\$6,960.00	\$0.00	\$34,700.00

¹ Includes regular, catch-up, makeup, and late contributions. The traditional contribution amount includes \$6,500.00 in traditional catch-up contributions. The Roth contribution amount includes \$0.00 in Roth catch-up contributions.

Your Lifetime TSP Contributions (This section reflects your contributions from all periods of service.)

Traditional	Roth	Catch-Up ²	Total
\$179,484.00	\$0.00	\$58,488.00	\$237,972.00

² Includes traditional and Roth balances.

Your Primary Beneficiary Information (As you designated on 03/30/2011)

Name
GINA L FLORES
Share
100%

Exhibit C (3x3)

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WILLIAM H. FLORES

Account Number

Your Investments as of 12/31/2020

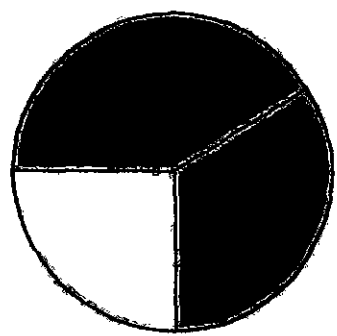
Lifecyle (L) Funds

☐ L Income Fund 25%

Individual Funds

☐ C Fund — Common Stock Index Investment Fund 34%
☐ S Fund — Small Capitalization Stock Investment Fund 41%

Here's how your entire account is invested:



Account Number
WILLIAM H. FLORES

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Activity Summary by Fund

Fund	Beginning Balance	Contributions and Additions	Withdrawals and Deductions	Interest Fund Transfers	Investment Gain/Loss	Ending Balance
G Fund	\$0.00	\$894.92	-\$894.92	\$0.00	\$0.00	\$0.00
F Fund	27,849.24	0.00	-59,204.05	-29,373.68	1,524.44	0.00
C Fund	97,789.15	0.00	-63,951.80	65,610.91	32,741.61	136,071.57
S Fund	91,670.96	0.00	0.00	-85,944.67	243.61	0.00
I Fund	85,701.26	0.00	-32,294.06	-1,965.96	3,966.71	63,652.69
L Income Fund	57,607.84	68,539.05	-32,294.06	-1,965.96	3,966.71	63,652.69
Total	\$360,618.64	\$67,432.97	-\$140,344.92	\$0.00	\$66,716.35	\$333,422.94

Share Summary by Fund

Fund	Beginning Balance	Investment Gain/Loss	Ending Balance	Beginning Shares	Ending Shares	Price
G Fund	\$0.00	\$0.00	\$0.00	\$16,3604	0.0000	\$16.5083
F Fund	27,849.24	1,524.44	0.00	19,7176	1,412.4055	21.1961
C Fund	97,789.15	17,239.98	113,498.68	47,2602	2,069.1646	55.9119
S Fund	91,670.96	32,741.61	136,071.57	66,2759	1,628.9557	74.2011
I Fund	85,701.26	243.61	85,944.67	32,7166	2,619.6097	35.3888
L Income Fund	57,607.84	3,966.71	63,652.69	21.1861	2,719.1383	22.2777
Total	\$360,618.64	\$66,716.35	\$333,422.94			

Your 2020 Loan Summary

Loan Number	Loan Issue Date	Beginning Principal	Amount of New Loan	Principal Repaid	Ending Principal	Interest Paid
0623/2016	06/23/2016	\$16,307.57	0.00	16,307.57	\$0.00	129.08
0730/2020	07/30/2020	\$0.00	79,450.00	5,204.47	\$74,245.53	196.98

* Principal repaid includes corrections to any loan disbursements or loan payments.

The Federal Retirement Thrift Investment Board submits an annual report to Congress each year on the operations of the Thrift Savings Plan, including participant demographics and contribution information. To read the report, visit tsp.frb.gov.

Sanders Opportunity Fund (Institutional) LP
PRELIMINARY 2020 SCHEDULE OF INVESTMENTS

Investment	Adjusted Value	% of Total	Net Assets
Big Tent Entertainment		0.0%	
Corporate Opportunities Fund (Inst), LP		3.3%	
Life Sciences Opportunity Fund		.8%	
Life Sciences Opportunity Fund II		2.0%	
SMH Private Equity Group		14.3%	
SMH Swiss Pharma, LLC		1.8%	
SMH Swiss Pharma II, LLC		10.1%	
SMH Sepham, LLC		8.0%	
SMH Sepham II, LLC			
SMH Nuphystra		2.2%	
SMH Nuphystra Srs C		0.6%	
SMH Ziliant LLC Srs B		33.2%	
SMH Ziliant LLC Srs C		8.5%	
Cash & Equivalents		25.2%	
Total Net Assets		100.0%	

Exhibit E

Account: William H. Flores	
Commitment Amount:	\$500,000
Funded Commitment:	\$468,644
Commitment Remaining:	\$ 0
Percent Ownership:	0.5246%
% of Capital Called:	93.7287%
% of Commitment Remaining:	0.0000%

Current Quarter	Year-to-Date	Inception-to-Date
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Beginning Capital ²	\$25,260	\$25,501	\$ 0
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Ending Capital	\$ 0	\$ 0	\$ 0
Transfer In/Out	0	0	0
Capital Contributions	521,732	0	0
Investment Gain (Loss)	(22,285)	(22,285)	(22,285)
Less Expenses/Fees	(401)	(642)	(80,078)
Net Gain (Loss)	(22,686)	(22,927)	(130,737)
Ending Capital Before Clawback	2,574	2,574	390,995
Clawback Amount	10,256	10,256	10,256
Distributions	(12,830)	(12,830)	(401,251)

¹ The fund is in dissolution and is winding up. As such, this will be your last Commitment Summary and Capital Account Statement for this fund.
² This amount includes any clawback amount payable to you.

TPH Partners II, L.P.

Schedule of Investments

December 31, 2020

Investments*	% of Interest	Cost	Fair Value	Percentage of Total Partners' Capital
Oil and Gas Development				
Member Units				
Elm Grove Resources, LLC				17.9
Principle Petroleum Partners LLC				11.1
TPHP Laurel Mountain, L.P.				64.8
TPHP Andoeh, L.P.				6.2
Total Energy				100.0

* All investments have substantially all operations in the United States of America.

See accompanying notes.

Exhibit 1

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TPH PARTNERS II, L.P.
COMMITMENT SUMMARY & CAPITAL ACCOUNT STATEMENT
(EXPRESSED IN US DOLLARS AND UNAUDITED)

FOR THE PERIOD:
Inception to December 31, 2020

Total Commitments: \$195,125,000

Account: William H. Flores			
Commitment Amount:	\$500,000	Percent Ownership:	0.2562%
Funded Commitment:	\$489,057	% of Capital Called:	97.8114%
Commitment Remaining:	\$10,943	% of Commitment Remaining:	2.1886%

				Current Quarter	Year-to-Date	Inception-to-Date
Beginning Capital				\$64,657	\$166,543	\$ 0
Transfer In/Out				0	0	0
Capital Contributions				0	9,806	490,366
Investment Gain (Loss)				118	(107,305)	(213,261)
Less Expenses/Fees				(1,580)	(5,850)	(76,030)
Net Gain (Loss)				(1,462)	(113,154)	(289,291)
Distributions				0	0	(126,234)
Carried Interest Paid				0	0	(11,647)
Ending Capital				\$63,195	\$63,195	\$63,195
Estimated Carried Interest						7,397
Ending Capital per U.S. GAAP						\$70,591

Exhibit C
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