



Filing ID #10036455

FINANCIAL DISCLOSURE REPORT

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

FILER INFORMATION

Name: Tom Tiffany
Status: Congressional Candidate
State/District: WI07

FILING INFORMATION

Filing Type: Candidate Report
Filing Year: 2020
Filing Date: 06/15/2020

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
billboard [RP] LOCATION: Town of Nokomis/Oneida, WI, US		\$1,001 - \$15,000	Rent	\$5,001 - \$15,000	\$5,001 - \$15,000
Covantage Credit Union Savings [BA]		\$50,001 - \$100,000	Interest	\$201 - \$1,000	\$1 - \$200
Muhlenkamp Fund [MF]		\$1,001 - \$15,000	Tax-Deferred		
Oakmark Fund [MF]		\$1,001 - \$15,000	Tax-Deferred		
Park City Credit Union Savings [BA]		\$1,001 - \$15,000	Interest	\$1 - \$200	\$1 - \$200
River Valley Bank Checking [BA]		\$15,001 - \$50,000	None		
River Valley Bank Savings [BA]		\$1,001 - \$15,000	Interest	\$1 - \$200	\$1 - \$200
State of Wisconsin [PE]		\$50,001 - \$100,000	None		
Tomorrows Scholar [5P] LOCATION: WI	DC	\$1,001 - \$15,000	None		

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
Willow, Inc. [PS]		\$50,001 - \$100,000	None		
DESCRIPTION: C Corporation					

* For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
State Senator	Salary	N/A	\$52,000.00
Wisconsin Valley Improvement Company	Damtender	N/A	\$12,000.00
Town of Little Rice	Spouse salary	N/A	\$10,880.00
DANCO Plumbing and Heating	Spouse salary	N/A	\$4,800.00

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
DC	MOHELA	2016-2019	Student Loan	\$15,001 - \$50,000

SCHEDULE E: POSITIONS

Position	Name of Organization
President	Willow, Inc.

SCHEDULE F: AGREEMENTS

Date	Parties To	Terms of Agreement
January 2011	Myself and the State of Wisconsin	State pension plan.

SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

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: Tom Tiffany , 06/15/2020