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### FILER INFORMATION

Name:	Hon. Emanuel Cleaver
Status:	Member
State/District:	MO05

#### FILING INFORMATION

Filing Type:	Annual Report			
Filing Year:	2023			
Filing Date:	05/14/2024			

# SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Allianz Life Insurance Company, 10% Bonus Powerdex Elite Annuity [IH] Description: Pension Plan RMB	SP	\$100,001 - \$250,000	Pension benefit	\$5,001 - \$15,000	
Allianz Life Insurance Company, Simple Retirement Plan (IRA) [IH] DESCRIPTION: IRA RMB	SP	\$50,001 - \$100,000	Tax-Deferred		
Allianz/Virtus Funds IRA [IH]	SP	\$1,001 - \$15,000	Pension benefit	\$2,501 - \$5,000	
Fidelity [FN]	SP	\$15,001 - \$50,000	None		
John Hancock Life Insurance [FN] DESCRIPTION: Annunity Payment	SP	\$15,001 - \$50,000	Annuity Payment	\$1,001 - \$2,500	
John Hancock Life Insurance [FN]	SP	\$1,001 - \$15,000	Annuity Payment	\$201 - \$1,000	
Kansas City Employee Pension PLan [PE]		Undetermined	Pension RMB	\$15,001 - \$50,000	

DESCRIPTION: Pension Distribution

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Kansas City Employee Pension PLan [PE]		Undetermined	Pension RMB	\$15,001 - \$50,000	
DESCRIPTION: Pension Distribution					
New England Life Annuity [FN]	SP	\$1,001 - \$15,000	None		
The General Board and Health Benefits of the United Methodist Church - Clergy Retirement Security Program ⇒ U.S. Equity [PE]		\$50,001 - \$100,000	Interest	None	
The General Board and Health Benefits of the United Methodist Church - Personal Investment ⇒ Fixed Income [PE]		\$100,001 - \$250,000	Interest	None	
The General Board and Health Benefits of the United Methodist Church - Personal Investment ⇒ Inflation Protection [PE]		\$50,001 - \$100,000	Interest	None	
The General Board and Health Benefits of the United Methodist Church - Personal Investment ⇒ International Equity [PE]		\$50,001 - \$100,000	Interest	None	

\* Investment vehicle details available at the bottom of this form. For the complete list of asset type abbreviations, please visit <u>https://fd.house.gov/reference/asset-type-codes.aspx</u>.

### **SCHEDULE B: TRANSACTIONS**

None disclosed.

# **SCHEDULE C: EARNED INCOME**

None disclosed.

#### **SCHEDULE D: LIABILITIES**

Owner	Creditor	Date Incurred	Туре	Amount of Liability
JT	Liberty Bank	November 2008	Mortgage on Personal Residence	\$250,001 - \$500,000
JT	Bank of America	April 2009	Personal Liability	\$1,000,001 - \$5,000,000

# **SCHEDULE E: POSITIONS**

Position	Name of Organization
Board Member	Jazz District Renaissance Corporation
Board Member	Jazz District Redevelopment Corporation

### **SCHEDULE F: AGREEMENTS**

None disclosed.

### **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 Inistitute	08/10/2023	08/13/2023	Kansas City, MO - Biloxi, MS - Kansas City, MO	0			
Congressional Black Caucus Inistitute	03/30/2023	04/2/2023	Kansas City, MO - Santa Monica, CA - Kansas City, MO	0		<b>~</b>	

# Schedule I: Payments Made to Charity in Lieu of Honoraria

None disclosed.

# SCHEDULE A AND B INVESTMENT VEHICLE DETAILS

- The General Board and Health Benefits of the United Methodist Church Clergy Retirement Security Program LOCATION: US
- The General Board and Health Benefits of the United Methodist Church Personal Investment LOCATION: US

#### **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. Emanuel Cleaver , 05/14/2024