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UNITED 1	STATE	UNITED STATES HOUSE OF REPRESENTATIVES 2023 FINANCIAL DISCLOSURE REPORT		Form A For Use by Members, Officers, and Employees	and Employees	LEGISLATIVE IN	LEGISLAME RESOURCE CENTER	
						2024 MAY	2024 HA (PTISE Use Only) ML	M
Name; Hon. Dorts O. Matsul	n. Dorts O	Matsui	Daytime Telephone: 202-225-7163	none: 202-225-7163		A \$200 Penging and Individual who file	्रिसिट्सिट्सिट्सिट्सिट्सिट्सिट्सिट्सिट्सिट	nst any i late.
FILER	X	Member of the U.S.  State: CA  House of Representatives District: 7		Officer or Employee	zer or Employing Office: Noyee	Staff Fil	Staff Filer Type: (If Applicable) Shared Principal Assistant	ible)
REPORT	X	2023 Annual (Due: May 15, 2024)	Amendment		Termination Date of Termination:	ination:		
PRELIMINA	RY INF	PRELIMINARY INFORMATION - ANSWER EACH OF T	THESE QUESTIONS					
A. Did you, yo a. Own any end of th b. Receive asset du	our spouse reportable reporting more than ring the re	<ul> <li>A. Did you, your spouse, or your dependent child:         <ul> <li>a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? <u>or</u></li> <li>b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?</li> </ul> </li> </ul>	Yes No	F. Did you have any re outside entity during th year up through the da	F. Did you have any reportable agreement or arrangement withan outside entity during the reporting period or in the current calendar year up through the date of filing?	rraggement with an he current calendar	No No	X
B. Did you, yo exchange any exceeding \$1	ur spouse / securities ,000 during	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?	×es No	G. Did you, your spouse reportable gift(s) totaling source during the reportable properties.	G. Did you, your spouse, or your dependent child receive any reportable glif(s) totaling more than \$480 in value from a single source during the reporting period?	receive any from a single	Yes No	X
C. Did you or you honoraria, or pen reporting period?	your spou pension/IR od?	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 No		see, or your dependent child receive any imbursements for travel totaling more than single source during the reporting period?	ld receive any sling more than porting period?	Yes No	X
D. Did you, yo liability (more	then \$10,0	D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000),at any point during the reporting period?	× 88 .	I. Did any individual or lieu of paying you for a 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?	ration to charity in article during the	Yes	X
E. Did you ho	td any repo calendar y	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	× <sub>8</sub>	1111	CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	SCHEDULE IF \	OU ANSWER "	YES"
IPO AND	EXCLUSION	ISION OF SPOUSE, DEPENDENT,	OR TRUST	INFORMATION - AN	NSWER EACH OF	THESE	QUESTIONS	
IPO - Did you contact the Co	purchase xmmittee o	IPO - Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you contact the Committee on Ethics for further guidance.	al Public Offering during the		answered "yes" to this question, please		Yees No X	
TRUSTS - De from this repo	stails regar	TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" from this report details of such a trust that benefits you, your spouse, or dependent child?	mittee on Ethics and certain pendent child?	_	need not be disclosed. Have you excluded		Yes No X	
EXEMPTION all three tests	- Have you for exempt	EXEMPTION - Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	arned" fricome, transactions neutred with the Committee		or your dependent child because they meet		Yes No	

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### SCHEDULE C - EARNED INCOME

Name: Hon. Doris O. Matsui Page 8 2

List the source, type the source and amount in executors williary income LIMIT'S are addition, certain type	List the source, type, and amount of estimed 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 speuse earned income exceeding \$1,000. See exemples below.  EXCLUDE: Milliany pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.  INCOME LIMITS and PROMIBITED INCOME: The 2024 limit on outside earned income for Members and employees compensated at or above the "sentor staff" rate was \$31,815. The 2024 limit is \$31,815. In addition, certain types of freems (notably honoraria, director afters, and payments for professional services involving a fiduciary paid totally partitisted.	nment) totaling \$200 or more during the nelsw. Suctel Security Act. If at or above the "sentor staff" (ate was \$3) Indicately are totally partition.	eporting period. For a spouse, liet 1,815 . The 2024 limit is \$31,815, In
	Source (include date of receipt for honoraria)	Туре	Amount
	Kaena Sizie	Approved Teaching Fee	\$8,000
Examptes:	Sing of Maryland	Legislative Penaton	600,868
	Cluff Was Roundiethie (Oct. 2)	Spouse Speech	\$1,000
	Ontario County Board of Education	Spouse Salary	AW
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#### SCHEDULE D - LIABILITIES

Name: Hon. Doris O. Matsui

Page 9 of 13

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. "Cotunn K is for liabilities held solely by your spouse or dependent child." 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 are personally liable); and liabilities owed 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

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	apite	meri	Example			
	Capital One	American Express	First Benk of Wilmington, DE	Creditor		
	12/23	12/23	6/20	Date Liability Incurred MO/YR		
	Credit Card	Credit Card	Mortgage on Rentel Property, Dover, DE	Type of Liability		
				\$10,001- \$15,000	*	
	×			\$15,001- \$50,000	8	l
		×		\$50,001- \$100,000	c	
			×	\$100,001- \$250,000	0	
				\$250,001- \$500,000	E.	Amount of Liability
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				\$1,000,001- \$5,000,000	6	labilit
				\$5,000,001- \$25,000,000	=	Y
			i	\$25,000,001- \$50,000,000	-	
				Over \$50,000,000	-	
				Over \$1,000,000* (Spouse/DC Liability)	<b>*</b>	

#### 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	Position Name of Organization
Regent	Smithsonian Board of Regents
Advisory Board Member	Smithsonian National Museum of American History
Member of Advisory Council	Smithsonian National Museum of African American History and Culture
At-large Director (advisory in nature)	Greater Sacramento Economic Council

#### SCHEDULE F - AGREEMENTS

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; Name: Hon. Doris O. Matsui Page. ð o 13

employer.	or deterral of payments by a former or current employer other than the U.S. go	continuation or deterral 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
		•

#### **SCHEDULE G - GIFTS**

Report the source (by name), a brief description, and the value of all gifts totaling more than \$480 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 lobbylst or foreign agent), local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$192 or less need not be added towards the \$480 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) 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)	\$500
	-		

# SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

Name: Hon. Doris O. Matsui

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identify the source and list travel titnerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$480 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and relimbursed by the sponsor.

EXCLUDE: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Fereign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to

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	Government of China (MECSEA)	Aug. 6-11	DC-entro (projection	₹	4	2
cumpes	Habitat for Humanity (Charity Fundralesy)	Mar. 3-4	DC-Boelen-DC	~	۲	Y
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						Examples	Evennine.		List the source, aci confidential list of c	SCHEDULE LIEU OF HC
						XYZ Magazine	Association of American Associations, Washington, DC	Source	List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to confidential list of charties receiving such payments must be filed directly with the Committee on Ethics.	SCHEDULE I - PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA
									nent made by the sponso tree on Ethics.	
·				·		Artide	Speach	Activity		Name: Hon. Doris O. Matsui
						Aug. 13, 2023	Feb. 2, 2023	Date	n in lieu of paying an ho	
						\$500		Amount	e charitable organization in lieu of paying an honorarium to you. A separate	Page 12 of 13

		NOTE NUMBER
		Spouse has interests in six charitable remainder trusts as described in Section 664 of the Internal Revenue Code. The Trusts make distributions to spouse for his lifetime and terminate at his death with the balance passing to charitable organizations. The distributions are a fixed percentage of the Trusts' annually determined value. The Trust distributions are reported as income for spouse. The underlying Trust investments are also reported.