

**UNITED STATES HOUSE OF REPRESENTATIVES  
2023 FINANCIAL DISCLOSURE STATEMENT**

Form A  
For Use by Members, Officers, and Employees

Name: Hon. Michael Guest

Daytime Telephone: 202-225-5031

**HAND DELIVERED**

LEGISLATIVE RESOURCE CENTER  
(Office Use Only)  
2024 AUG -8 PM 3:24

A \$200 penalty shall be assessed against any individual who does not file this statement by the deadline.

FILER STATUS:  Member of the U.S. House of Representatives  
 State: MS District: 03  
 REPORT TYPE:  2023 Annual (Due: May 15, 2023)  Amendment

Officer or Employee:  Employee  Employing Office:  
 Staff Filer Type: (If Applicable)  
 Share  Principal Assistant  
 Termination Date of Termination:

**PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS**

<p>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? or                  b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?</p>	<p>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?</p>
<p>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?</p>	<p>G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$415 in value from a single source during the reporting period?</p>
<p>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?</p>	<p>H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$415 in value from a single source during the reporting period?</p>
<p>D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?</p>	<p>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?</p>
<p>E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?</p>	<p>ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"</p>

**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 "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?

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.





















































**SCHEDULE A - ASSETS & "UNEARNED INCOME"**

Name: Hon. Michael Guest

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SP, DC, JT	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	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					
		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*																										
	TRUST-KF (KFT) - Kennedy Investments LP			X																		Partnership Income																		
	TRUST-KF (LNC) - Lincoln National Corporation			X												X																								P
	TRUST-KF (LOW) - Lowe's Companies, Inc.			X												X																								P
	TRUST-KF (MCD) - McDonald's Corporation			X												X																								P
	TRUST-KF (MDT) - Medtronic plc			X												X																								P
	TRUST-KF (MSFT) - Microsoft Corporation			X												X																								P
	TRUST-KF (NEE) - Nextera Energy, Inc.			X												X																								P
	TRUST-KF (NVDA) - NVIDIA Corporation			X												X																								P
	TRUST-KF (ORCL) - Oracle Corporation			X												X																								P
	TRUST-KF (SWX) - Southwest Gas Holdings, Inc.			X												X																								P
	TRUST-KF (T) - AT&T Inc.			X												X																								S

\* Spouse/DC Asset over \$1,000,000\*









**SCHEDULE B - TRANSACTIONS**

Name: Hon. Michael Guest

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SP, DC, JT		Asset	Type of Transaction				Check Box if Capital Gain Exceeded \$200	Date	MO/DA/YR or Quarterly, Monthly, or Bi-weekly, if applicable	Amount of Transaction										
SP	DC, JT		Purchase	Sale	Partial Sale	Exchange				A \$1-\$15,000	B \$15,001-\$50,000	C \$50,001-\$100,000	D \$100,001-\$250,000	E \$250,001-\$500,000	F \$500,001-\$1,000,000	G \$1,000,001-\$5,000,000	H \$5,000,001-\$25,000,000	I \$25,000,001-\$50,000,000	J Over \$50,000,000	K Over \$1,000,000* (Spouse/DC Asset)
	Example	Meta Corp Stock			X			3/9/17			X									
		LPL-INV - (PONPX) PIMCO Income P	X					05/22/2023		X										
		LPL-INV - (PONPX) PIMCO Income P	X					12/04/2023		X										
		LPL-INV - (QQQ) PowerShares QQQ Trust, Series 1	X					05/22/2023		X										
		LPL-INV - (QQQ) PowerShares QQQ Trust, Series 1	X					12/04/2023		X										
		LPL-INV - (QWLD) SPDR MSCI World Strategefactors ETF	X					12/04/2023		X										
		LPL-INV - (RWK) Oppenheimer Revenue Weighted ETF Trust - Oppenheimer Mid Cap Revenue ETF	X					04/17/2023		X										
		LPL-INV - (RWK) Oppenheimer Revenue Weighted ETF Trust - Oppenheimer Mid Cap Revenue ETF		X				05/22/2023		X										
		LPL-INV - (SCHD) Schwab US Dividend Equity ETF	X					05/22/2023		X										
		LPL-INV - (TSILX) Thornburg Strategic Income I	X					12/04/2023		X										
		LPL-INV - (XMANO) Invesco S&P MidCap Momentum ETF				X		05/22/2023		X										
		LPL-RIIRA - (AMBFX) American Funds American Balanced F2	X					05/19/2023		X										
		LPL-RIIRA - (AMCFX) American Funds AMCAP F2	X					05/19/2023		X										
		LPL-RIIRA - (AMEFX) American Funds Inc Fund of Amer F2	X					04/17/2023		X										
		LPL-RIIRA - (AMEFX) American Funds Inc Fund of Amer F2		X				05/19/2023		X										
		LPL-RIIRA - (AVUV) Avantis US Small Cap Value ETF			X			04/17/2023		X										
		LPL-RIIRA - (AVUV) Avantis US Small Cap Value ETF		X				05/19/2023		X										
		LPL-RIIRA - (CEVZX) Columbia Global Equity Value Z		X				05/19/2023		X										
		LPL-RIIRA - (DGCIX) Delaware Corporate Bond Inst		X				05/19/2023		X										
		LPL-RIIRA - (DGT) SPDR Global Dow ETF	X					04/17/2023		X										
		LPL-RIIRA - (DGT) SPDR Global Dow ETF	X					05/19/2023		X										
		LPL-RIIRA - (DGT) SPDR Global Dow ETF	X					11/28/2023		X										

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.

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.













**SCHEDULE C - EARNED INCOME**

Name: **Hon. Michael Guest**

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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 2017 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,765. The 2018 limit is \$28,050. 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
Keene State	Approved Teaching Fee	\$8,000
State of Maryland	Legislative Pension	\$18,000
Examples: CM War Roundtable (Oct. 2)	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	N/A
MISSISSIPPI COURT COLLECTIONS, INC.	SPOUSE SALARY	N/A
PERS OF MISSISSIPPI	RETIREMENT	88412
RBC Capital Markets LLC	Spouse - IRA DISTRIBUTION	N/A

**SCHEDULE D - LIABILITIES**

Name: Hon. Michael Guest

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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 \$10,001-\$15,000	B \$15,001-\$50,000	C \$50,001-\$100,000	D \$100,001-\$250,000	E \$250,001-\$500,000	F \$500,001-\$1,000,000	G \$1,000,001-\$5,000,000	H \$5,000,001-\$25,000,000	I \$25,000,001-\$50,000,000	J Over \$50,000,000	K Over \$1,000,000* (Spouse/DC liability)	
	Example First Bank of Wilmington, DE	5/15	Mortgage on Rental Property, Dover, DE				X								
	CITIZENS BANK	6/20	MORTGAGE ON PERSONAL RESIDENCE						X						

**SCHEDULE E - POSITIONS**

Name: Hon. Michael Guest

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
NONE	

**SCHEDULE F - AGREEMENTS**

Name: **Hon. Michael Guest** Page (F) 1 of 1

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; continuation 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
1/1/1984	The State of Mississippi and me	Participant in Public Employees' Retirement System of Mississippi (PERS) and Mississippi Deferred Compensation Plan

**SCHEDULE G - GIFTS**

Name: Hon. Michael Guest

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Report the source (by name), a brief description, and the value of all gifts totaling more than \$390 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, 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 \$156 or less need not be added towards the \$390 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
<i>Example:</i> Mr. Joseph Smith, Arlington, VA Mississippi State University	Silver Platter (for demonstration of personal friendship received from the Committee on Ethics) Dependent child received a scholarship/grant from Mississippi State University in 2023	3400 7100
Mississippi State University	Dependent child received a scholarship/grant from Mississippi State University in 2023	3000
CFL SCHOLARSHIP	Dependent child received a scholarship/grant in 2023	\$2000
EAGLE SCOUT SCHOLARSHIP	Dependent child received a scholarship/grant in 2023	\$750
STAR STUDENT SCHOLARSHIP	Dependent child received a scholarship/grant in 2023	\$750
STUDENT BODY PRESIDENT SCHOLARSHIP	Dependent child received a scholarship/grant in 2023	750
NATIONAL MERIT FINALIST SCHOLARSHIP	Dependent child received a scholarship/grant in 2023	\$750
BOYS STATE SCHOLARSHIP	Dependent child received a scholarship/grant in 2023	\$1500
MS BOYS STATE SCHOLARSHIP	Dependent child received a scholarship/grant in 2023	\$500
University of Mississippi School of Law	Dependent child received a scholarship/grant from Mississippi State University in 2023	11855



**SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS**

Name: Hon. Michael Guest

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Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$390 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 reimbursed 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 Foreign 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 the filer.

Source	Date(s)	City of Departure-Destination-City of Return	Lodging? (Y/N)	Food? (Y/N)	Family Member Included? (Y/N)
Example: Government of Che (REGSA) Member for Humanity (Charity fundraiser)	Aug. 6-11 Mar. 2-4	DC-Wa-DC DC-Asso-DC	Y Y	Y Y	N Y
The Aspen Institute Inc. (Congressional Program)	8/28/28 to 9/1/23	Jackson, MS to Oslo/Bergen Norway to Jackson, MS	Y	Y	Y

**SCHEDULE I - PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA**

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List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of paying an honorarium to you. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Washington, DC	Speech	Feb. 2, 2017	\$2,000
	XYZ Magazine	Article	Aug. 13, 2017	\$500
	NONE			

**FILER NOTES  
(Optional)**

Name: Hon. Michael Guest

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NOTE NUMBER		NOTES
001	Schedule A - RIRA listed in 2022CY FD was cashed out in 2023.	
002	Schedule A - CAIBX - AF (DI) was transferred into TR-D1 in 2023.	
003	Schedule A - 8059AXXK2 - This asset was transferred into this account (KINV-CP) and therefore no purchase transaction.	
004	Schedule A - 805279MIK1 - This asset was transferred into this account (TRUST-KF) and therefore no purchase transaction.	
005	Schedule A - Kennedy Inv LP - This is part of the trust (TRUST-KF) and in 2023 there was value and income that just exceeded the threshold amounts after discounting for percentage ownership.	
006	Schedule B - WTRG - This asset was sold after transfer into ROTH IRA. RIRA was TOD to the Member's spouse. The account was fully distributed to spouse later in the year. Therefore, there is no SCH A asset.	
007	Schedule B - PFE - This asset was sold after transfer into ROTH IRA. RIRA was TOD to the Member's spouse. The account was fully distributed to spouse later in the year. Therefore, there is no SCH A asset.	
008	Schedule B - KMI - This asset was sold after transfer into ROTH IRA. RIRA was TOD to the Member's spouse. The account was fully distributed to spouse later in the year. Therefore, there is no SCH A asset.	