

UNITED STATES HOUSE OF REPRESENTATIVES
2025 FINANCIAL DISCLOSURE REPORT

FORM B

For New Members, Candidates, and New Employees

LEGISLATIVE RESOURCE CENTER

Page 1 of 15

Name Alan Grayson

Daytime Telephone

2026 JUL 29 PM 12 52

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

JUL 16 2026

(Office Use Only)

FILER
STATUS



New Member of or Candidate for
U.S. House of Representatives

State FL
District 7



Check if
Amendment

Candidates -- Date of Election



New Officer or Employee

Staff Filer Type (If Applicable)

Period Covered January 1

Employing Office Shared ☐ Principal Assistant ☐

to

A \$200 penalty shall be assessed against any individual who files more than 30-days late

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? or

b Receive more than \$200 in unearned income from any reportable asset during the reporting period?

Yes ☒ No ☐

E Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?

Yes ☒ No ☐

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 ☐

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 ☐ No ☒

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 ☒ No ☐

J Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?

Yes ☒ No ☐

ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER YES

THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS

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 ☐ No ☒

EXEMPTION - Have you excluded from this report any other assets, unearned income, or liabilities of a spouse or 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 ☐ No ☒

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name Alan Grayson

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SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name Alan_Grayson

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SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name

Alan Grayson

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of 15

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Name **Alaṅ Grayson**

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SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name

Alan Grayson

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SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name

Alan Grayson

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SP	DC	JT	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	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	TAX DEFERRED	Other Type of Income (Specify e.g. Partnership Income or Farm Income)	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 Income 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 Income over \$1,000,000																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
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SCHEDULE C – EARNED INCOME

Name **Alan Grayson**

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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 both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouses 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: Be advised that the outside earned income limit and prohibitions on types of income may apply to you after you are on House payroll. The 2025 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$33,285. The 2026 limit is \$33,855. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

Source (include date of receipt for honoraria)		Type	Amount	
			Current Year to Filing	Preceding Year
Examples	ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
	State of Maryland	Salary	\$20,000	\$76,000
	Civil War Roundtable (Oct. 2)	Spouse Speech	\$0	\$1,000
	Ontario County Board of Education	Spouse Salary	N/A	N/A
Legal Services		Services	\$375,354	\$791,540
Trustee, Jonas Trust		Services	\$0	\$4,500
Director, Rafael Holdings		Services	\$19,522	\$0
Keros Therapeutics		Spouse Salary		
Kyverna Therapeutics		Spouse Salary		

SCHEDULE D – LIABILITIES

Name

Alan Grayson

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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 children. Mark the highest amount owed during the reporting period. **New 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 children.

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)
	<i>Example</i>	First Bank of Wilmington, DE	5/25	Mortgage on Rental Property, Dover, DE			X							
	Nelnet	9/18	Student Loans						X					
	No Labels et al	5/22	Judgment						X					
	Chase	8/22	Charge Account				X							
	US Alliance	8/22	Charge Account		X									
	Bank of America	8/22	Charge Account			X								

SCHEDULE E – POSITIONS

Report all positions compensated or uncompensated 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. **New Members and second year candidates:** report positions held in the reporting period and the current calendar year. **First year candidates and new employees:** report positions held in the current calendar year and two previous years.

Position	Name of Organization
Manager	Sibylline Management
Partner	Sybilline Fund LP
Trustee	GSA Telecommunications Trust
Trustee	Grayson Foundation
Director	AMG TR P C

SCHEDULE D – LIABILITIES

Name

Alan Grayson

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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 children. Mark the highest amount owed during the reporting period. **New 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 children.

SP DC JT	Creditor	Date Liability Incurred MO/YR	Type of Liability	Amount of Liability										
				A \$10 001 to \$15 000	B \$15 001 to \$50 000	C \$50 001 to \$100 000	D \$100 001 to \$250 000	E \$250 001 to \$500 000	F \$500 001 to \$1 000 000	G \$1 000 001 to \$5 000 000	H \$5 000 001 to \$25 000 000	I \$25 000 001 to \$50 000 000	J Over \$50 000 000	K Over \$1 000 000 (Spouse/DC Liability)
	Example: First Bank of Wilmington, DE	5/25	Mortgage on Rental Property, Dover, DE				X							
	Citi	8/22	Charge Account			X								
	Discover	8/22	Charge Account		X									
	Alliant	8/22	Charge Account			X								
	X1	8/22	Charge Account			X								
	American Express	8/22	Charge Account			X								

SCHEDULE E – POSITIONS

Report all positions, compensated or uncompensated, 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. **New Members and second year candidates:** report positions held in the reporting period and the current calendar year. **First year candidates and new employees:** report positions held in the current calendar year and two previous years.

Position	Name of Organization

SCHEDULE D - LIABILITIES

Name

Alan Grayson

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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 children. **Mark the highest amount owed during the reporting period.** **New 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 children.

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				\$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)
	Ex: mpl First Bank of Wilmington, DE	5/25	Mortgage on Rental Property, Dover, DE				X							

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, 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. **New Members and second year candidates:** report positions held in the reporting period and the current calendar year. **First year candidates and new employees:** report positions held in the current calendar year and two previous years.

Position	Name of Organization
Director	GL CTR P C
Director	Grayson Consulting, Inc
Member	United Mobile Technologies, Inc
Trustee	Liora Jonas Family 2020 Trust
Director	Rafael Holdings, Inc

Partner -
Trustee

Grayson Family Limited Partnership LLLP
Alan Grayson Defined Benefit Plan

Use additional sheets if more space is required

SCHEDULE F – AGREEMENTS

Name Alan Grayson

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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 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

[none]

Date	Parties to Agreement	Terms of Agreement

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

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years This includes the names of clients and customers of any corporation firm partnership or other business enterprise if you directly provided the services generating a fee or payment of more than \$5 000 **Exclude** Payments by the U S government and any information considered confidential because of a privileged relationship recognized by law **Do not repeat the information listed on Schedule C**

Source (Name and City/State)	Brief Description of Duties
<i>Ex mple</i> Doe Jones & Smith Hometown State	Accounting Services
AGMA Security Service Hormigueros, PR	Legal Services
Brackley Electric, Bath, ME	Legal Services
Cannon, Reginald, Rochester, NY	Legal Services
CDS Services, Inc Murrietta, CA	Legal Services
CCS, Buchanan Dam, TX	Legal Services
Endosoft LLC, Schenectady, NY	Legal Services
Hexagon Mfg , North Kingstown, RI	Legal Services

SCHEDULE F – AGREEMENTS

Name

Alan Grayson

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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 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

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

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years This includes the names of clients and customers of any corporation firm partnership or other business enterprise if you directly provided the services generating a fee or payment of more than \$5 000 **Exclude** Payments by the U S government and any information considered confidential because of a privileged relationship recognized by law **Do not repeat the information listed on Schedule C**

Source (Name and City/State)	Brief Description of Duties
<i>Ex mpl</i> Doe Jones & Smith Hometown State	Accounting Services
IDR Centreville VA	Legal Services
Jonas Trust Orlando, FL	Trustee
Marquis Solutions LLC, Carmel, IN	Legal Services
Merrill Corp , Clearfield UT	Legal Services
Paragon Defense Solutions, Herndon VA	Legal Services
Purpose Built Families Ft Lauderdale FL	Legal Services
QYK Brands, LLC, Garden Grove CA	Legal Services

Use additional sheets if more space is required.

SCHEDULE F – AGREEMENTS

Name <u>Alan Grayson</u>	Page <u>15</u> of <u>15</u>
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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 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

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

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years This includes the names of clients and customers of any corporation firm partnership or other business enterprise if you directly provided the services generating a fee or payment of more than \$5 000 **Exclude** Payments by the U S government and any information considered confidential because of a privileged relationship recognized by law **Do not repeat the information listed on Schedule C**

Source (Name and City/State)	Brief Description of Duties
<i>Ex mple</i> Doe Jones & Smith Hometown State	Accounting Services
RCG of N C LLC Pinehurst, NC	Legal Services
SEKRI Corbin KY	Legal Services
Summitt Support Services Victoria TX	Legal Services
VDCI, Baltimore, MD	Legal Services
We See You Camden, NJ	Legal Services
Wondfo Bolingbrook IL	Legal Services
Rafael Holdings, Newark, NJ	Director