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UNITED STATES HOUSE OF REPRESENTATIVES
2025 FINANCIAL DISCLOSURE REPORT

FORM B
For New Members Candidates and New Employees

Name Derek Fleming **Daytime Telephone** _____

FILER STATUS

☐ New Member of or Candidate for U S House of Representatives — State Ma — District 05
Candidates – Date of Election 11/03/2026

☐ Check if Amendment (Office Use Only)

☐ New Officer or Employee
Employing Office _____ Staff Filer Type (If Applicable) Shared ☐ Principal Assistant ☐

Period Covered January 1 2026 to June 2026

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 durng 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 durng 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 Derek Fleming

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NOV 09 2026

BLOCK A

Assets and/or Income Sources

Identify (a) each asset held for investment or production of income and with a fair market value exceeding $1 000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than $200 in "unearned" income during the year

Provide complete names of stocks and mutual funds (do not use only ticker symbols)

For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds

For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over $5 000 list every financial institution where there is more than $1 000 in interest-bearing accounts.

For rental and other real property held for investment, provide a complete address or description e g rental property and a city and state

For an ownership interest in a privately held business that is not publicly traded state the name of the business the nature of its activities and its geographic location in Block A.

Exclude Your personal residence including second homes and vacation homes (*unless* there was rental income during the reporting period) and any financial interest in or income derived from, a federal retirement program including the Thrift Savings Plan

If you report a privately traded fund that is an Excepted Investment Fund please check the EIF box.

If you so choose you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or jointly held with anyone (JT) in the optional column on the far left.

For a detailed discussion of Schedule A requirements please refer to the instruction booklet.

BLOCK B

Value of Asset

Indicate value of asset at close of the reporting period If you use a valuation method other than fair market value please specify the method used

If an asset was sold during the reporting period and is included only because it generated income the value should be None

Column M is for assets held by your spouse or dependent child in which you have no interest

BLOCK C

Type of Income

Check all columns that apply For accounts that generate tax-deferred income (such as 401(k), IRA, or 529 accounts) you may check the "Tax-Deferred column **Dividends interest, and capital gains even if reinvested must be disclosed as income for assets held in taxable accounts** Check None If the asset generated no income during the reporting period.

BLOCK D

Amount of Income

For assets for which you checked Tax Deferred in Block C you may check the "None column For all other assets indicate the category of income by checking the appropriate box below **Dividends interest and capital gains even if reinvested must be disclosed as income for assets held in taxable accounts** Check None If no income was earned or generated

Column XII is for assets held by your spouse or dependent child in which you have no interest.

SP DC JT		EIF	A None	B $1-$1 000	C $1,001-$15 000	D $15,001-$50 000	E $50,001-$100 000	F $100,001 $250,000	G $250,001-$500 000	H $500,001-$1 000,000	I $1 000 001-$5,000,000	J $5 000 001-$25 000,000	K $25,000,001-$50,000 000	L Over $50 000 000	M 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)	Current Year I None	II $1-$200	III $201-$1 000	IV $1,001-$2,500	V $2,501-$5,000	VI $5 001-$15,000	VII $15 001-$50,000	VIII $50 001-$100,000	IX $100 001-$1 000 000	X $1 000,001-$5,000 000	XI Over $5,000 000	XII Spouse/DC Income over $1,000,000*	Preceding Year I None	II $1-$200	III $201-$1 000	IV $1 001-$2,500	V $2,501-$5,000	VI $5 001-$15 000	VII $15,001-$50,000	VIII $50 001-$100 000	IX $100,001-$1 000,000	X $1 000 001 $5,000 000	XI Over $5,000 000	XII Spouse/DC Income over $1 000 000*
	Examples: Mega Corp Stock						X										X								X													X									
	Simon & Schuste				Indefinite																		Royalties					X												X						
	ABC Hedge Fund	X							X														Partnership Income						X												X					
	Thrive Cafe Inc Arlington MA						X									X								X												X											
	Personal Banking Santander Bank						X												X							X																					
	Crypto Retail				X															X				X												X											

Use additional sheets if more space is required

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SCHEDULE A – ASSETS & "UNEARNED INCOME"

Name Derek Fleming | **Page** 3 of 5

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BLOCK A: Assets and/or Income Sources			BLOCK B: Value of Asset												BLOCK C: Type of Income							BLOCK D: Amount of Income																			
																							Current Year												Preceding Year							
			A	B	C	D	E	F	G	H	I	J	K	L	M								J	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	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	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED 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*
SP DC JT	ASSET NAME	EIF																																									
	Chainlink				X															X			X																					
	Ethereum				X															X			X																					
	Crypto IRA						X													X					X																			
	Bitcoin					X														X					X																			
	Ethereum					X														X					X																			
	Chainlink					X														X				X																			
	LPL Financial IRA					X											X			X		X				X													X					
	Target date fund																																											

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SCHEDULE C – EARNED INCOME

Name	Derek Fleming	Page 4 of 5

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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 file OGE Form 278e 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
Thrive Cafe Inc		Salary	$26 000	$37 000
Raybeam Inc	Spouse (Michelle Fleming)	Salary	$222 000	$200 000

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SCHEDULE D – LIABILITIES

Name	Derek Fleming	Page 5 of 5

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 dependentchildren

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	5/25	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
CEO	Thrive Cafe Inc

Use additional sheets if more space is required.

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