

**UNITED STATES HOUSE OF REPRESENTATIVES**

**2007 FINANCIAL DISCLOSURE STATEMENT**

**FORM A**

For use by Members, officers, and employees

**HAND DELIVERED**

LEGISLATIVE RESOURCE CENTER

2007 MAY 15 PM 1:07

OFFICE OF THE CLERK  
U.S. HOUSE OF REPRESENTATIVES  
(Office Use Only)

THOMAS PETER LANTOS

(Full Name)

2413 RAYBURN HOB WASH, DC 20515

(Mailing Address)

202 225-3531

Daytime Telephone:

**Filer Status**

Member of the U.S. House of Representatives

State: CA District: 12

Officer or Employee

Employing Office:

**Report Type**

Annual (May 15)

Amendment

Termination Termination Date:

**A \$200 penalty shall be assessed against anyone who files more than 30 days late.**

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

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$305 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$305 from one source)? If yes, complete and attach Schedule VII.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	<b>Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.</b>	

**EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS**

<b>TRUSTS</b> —Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct 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 <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>EXEMPTION</b> —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 <input type="checkbox"/> No <input checked="" type="checkbox"/>

**CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED**

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

<b>Certification</b>	<b>Signature of Reporting Individual</b>	<b>Date (Month, Day, Year)</b>
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Thomas P. Lantos	5/15/07

**SCHEDULE I - EARNED INCOME**

<b>SOURCE</b>	<b>TYPE</b>	<b>AMOUNT</b>
California Teachers Association	Pension	\$ 14,150
California Public Employees	Pension	\$ 15,347



**SCHEDULE IV - TRANSACTIONS**

ASSET	TYPE OF TRANSACTION	DATE	AMOUNT OF TRANSACTION											
			\$1K-\$15K	\$15K-\$50K	\$50K-\$100K	\$100K-\$250K	\$250K-\$500K	\$500K-\$1MM	\$1MM-\$5MM	\$5MM-\$25MM	\$25MM-\$50MM	Over \$50MM		
United Airlines (stock - loss)	SALE	2/23/2006	X											
United Airlines (stock - loss)	SALE	2/23/2006	X											
United Airlines (stock - loss)	SALE	2/23/2006		X										
United Airlines (stock - loss)	SALE	2/23/2006				X								

**SCHEDULE V - LIABILITES**

		TYPE OF LIABILITY	AMOUNT OF TRANSACTION										
			\$10K-\$15K	\$15K-\$50K	\$50K-\$100K	\$100K-\$250K	\$250K-\$500K	\$500K-\$1MM	\$1MM-\$5MM	\$5MM-\$25MM	\$25MM-\$50MM	Over \$50MM	
Owed by	Creditor												
SP	Countrywide Home Loans	Mortgage - (4596 Perry St, Denver, CO)					x						
SP	First Horizon Home Loans	Mortgage - (35 River Walk Way, Lowell, MA)				x							

**SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS**

<u>Source</u>	<u>Date(s)</u>	<u>City of Departure-Destination-City of Return</u>	<u>Lodging</u>	<u>Food</u>	<u>Family Member Included?</u>	<u># of days NOT at sponsor's expense</u>
Cleveland Hungarian Revolution 50th Anniversary Committee	Oct 19-Oct 23	San Francisco-Cleveland RT (spouse ticket only)	YES	NO	YES	N/A

**SCHEDULE VIII - POSITIONS**

<b>Position</b>	<b>Name of Organization</b>
International Advisory Board (uncompensated)	Peres Peace Center
Board Member (uncompensated)	William Davidson Institute - U. of Michigan Business School