

UNITED STATES HOUSE OF REPRESENTATIVES
2008 FINANCIAL DISCLOSURE STATEMENT
 For ~~2008~~ **2008** Calendar Year Reporting Period

Form A
 For use by Members, officers, and employees

Virgil H. Goode, Jr

540-483-5558

JAN 21 2009
 REVENUE CENTER
 0901000 AM 11:19

(Full Name) (Daytime Telephone)

(Office Use Only)

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: <u>Virginia</u> District: <u>Fifth</u>	<input type="checkbox"/> Officer or Employee	Employing Office:	Termination Date: <u>1-3-09</u>
Report Type	<input type="checkbox"/> Annual (May 15)	<input type="checkbox"/> Amendment	<input checked="" type="checkbox"/> Termination		

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 type="checkbox"/> No <input checked="" 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 type="checkbox"/> No <input checked="" 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 checked="" 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 type="checkbox"/> No <input checked="" type="checkbox"/>
IV. Did you, your spouse, or a 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 type="checkbox"/> No <input checked="" type="checkbox"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

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

TRUSTS —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"/>
EXEMPTION —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"/>

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SCHEDULE III--ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name

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BLOCK A		BLOCK B													BLOCK C						BLOCK D											BLOCK E
Asset and/or Income Source		Year-End Value of Asset													Type of Income						Amount of Income											Transaction
		A	B	C	D	E	F	G	H	I	J	K	L	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	Other Type of Income (Specify)	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	
																					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	
SP	Altira com. stock														X																	
SP	Kraft com. stock														X																	
SP	Philip Morris Internat														X																	split from Altira
SP	Sun Trust com. stock														X																	
SP	Cardinal com. stock														X																	
SP	Combined checking, savings, money market, VA														X																	part purchased
SP	Wachovia com. stock														X																	part purchased
SP	Wachovia com. stock														X																	
SP	J.P. Morgan Chase com. stock														X																	
SP	AT T common stock														X																	part purchased
SP	Alcatel Lucent com. stock														X																	
SP	BBT common stock														X																	
SP	Scott & Stringfellow IRA cash														X																	
SP	SunTrust IRA cash														X																	
SP	Congressional Fed Cr Union														X																	
SP	Federal Thrift Sav. Plan														X																	
SP	American Elect com. stock														X																	
SP	Occidental Com. stock														X																	
SP	DCH-Medra Com. stock														X																	
SP	EXXON Com. stock														X																	
SP	Coca Cola com. stock														X																	

Continuation Sheet (if needed)

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Continuation Sheet (if needed)

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SCHEDULE IV—TRANSACTIONS

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Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction			Date	Amount of Transaction										
		PURCHASE	SALE	EXCHANGE		B	C	D	E	F	G	H	I	J	K	
SP	Example: Mega Corporation Common Stock (partial sale)		X		10-12-07		X									
SP	Philip Morris International	split from Altia			3-31-08		Altia									
	Philip Morris International	split from Altia			3-31-08		Altia									
JT	Smith and Wesson common stock	X			11/1/08	X										
JT	FORD Motor common stock	X			11/11/08	X										
JT	General Electric common stock	X			11/20/08	X										
JT	Quest Communication com. st.	X			5/13/08	X										
JT	Krispy Kreme, com. stock	X			5/19/08	X										
JT	Bank of America com. stock	X			1/14/08	X										
	Sun Trust ptd stock	X			6/25/08		X									
	Virginia Pub. Sch Auth BOND	REDEEMED			8/1/08	X										
	ATT INC common stock	X			10/16/08	X										
	Pfizer INC common stock	X			10/16/08	X										
	Reynolds AM, common stock	X			10/16/08	X										
	General Elect. common stock	X			11/21/08	X										
	General Motors common stock	X			10/10/08	X										
	Charter Comm. common stock	X			10/10/08	X										

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Asset	
SP, DC, JT	
SP	Example: Mega Coporation Common Stock (partial sale)

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