	more than 30 days late.		Termination Date:	Te Termination	☐ Amendment ☐	Annual (May 15)	Report Type
	be assessed againgt			Employee _	District: 3rd	House of Representatives	
	A \$200 penalty shall	ice: U.S. AUT	Employing Office:	Officer Or	State: CT	✓ Member of the U.S.	Filer
· -	_{(Fr≀∵} (Office Use Only)	(Daytime Telephone)	(Daytime) 	(Full Name)	
M	2010 HAY 17 PM 12: 15	202-225-3661 2010	202-2:		auro	Rosa L. DeLauro	
	LEGISI ATIVE RESOURCE CLIMIT	recisi					
THO THO	CELIVERED	s, and employees	For use by Members, officers, and employees		OSURE STATEMENT	CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT	CALENDAR YE
70	HAND	Page 1 of 10	FORM A]ji	EPRESENTATI	UNITED STATES HOUSE OF REPRESENTATIVES	UNITED ST

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

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If yes, complete and attach Schedule 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 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 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 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 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?
			Yes		Yes			i 	Ύes
	Yes 🗸 No		Yes 🗸 No 🗌		Yes 🗸 No		Yes U No	,	Yes V No
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schedule attached for each "Yes" response.	Each question in this part must be answered and the appropriate	If yes, complete and attach Schedule IX.	Did you have any reportable agreement or arrangement with an outside IX. entity?	If yes, complete and attach Schedule VIII.	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	If yes, complete and attach Schedule VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)?	exempt)? If yes, complete and attach Schedule VI.	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$335 and not otherwise
	appı		Yes		Yes		Yes		8
	opria		Yes No		Yes 🖳 No 🗌		Yes No 🗸	1	Yes No S
	ate	:	<u> </u>		0		0		ō

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

SCHEDULE I - EARNED INCOME

Name Rosa L. DeLauro

Page 2 of 10

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 preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

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	BLOCK A	вгоск в	BLOCK C	BLOCK D	вгоск є
Ass	Asset and/or Income Source	Year-End	Type of Income	Amount of Income	Transaction
a fair market and (b) any o than \$200 in land, provide mutual funds retirement plin in which you investments) in the accour plans that are and its value that is not puits activities, information, Exclude: You debt owed to	a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other assets or sources of income which generated more than \$200 in "unearned" income during the year. For rental property or land, provide a complete address. Provide full names of stocks and mutual funds (do not use ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) that are self directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value and income information on each asset in the account that exceeds the reporting threshold. For retirement plans that are not self-directed, name the institution holding the account and its value at the end of the reporting period. For an active business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. For additional information, see the instruction booklet. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child,	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA". For all other assets including all IRAs, indicate the type of income by checking the appropriate box below. Dividends and Interest, even if reinvested, should be listed as income. Check "None" if asset did not generate any income during the calendar year.	accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, including all IRAs, indicate the category of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was earned or generated.	had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
Exclude: You debt owed to parent or sib savings acco	Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent or sibling; any deposits totaling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.		anny to salone you.		
If you so cho that of your s in the option:	If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.				
JĽ	Bank of America Checking	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
JT	Bank of America Checking	None	None	NONE	
JT	Chase Home Finance-Escrow	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	Citizens Bank-Scholarships	\$1,001 - \$15,000	None	NONE	
SP	Greenberg Quinlan Rosner Research Inc. 67% Owner 10 G Street, NE WDC 20002 Polling/Consulting	\$5,000,001 - \$25,000,000	See Statement I	NONE	

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۲ ٦ \vdash \exists SP **_** Ę SP SP 9425 Sunset Drive Miami, FL 60% Owner Sun Surveys LLC ML-Evergreen Asset Allocation Fd ML-Blackrock Global JH Rtrmt-Lifecycle 2015 ML-PIMCO Total Return ML-Ivy Asset Strategy ML-Columbia Marsico 21st ML-Blackrock Global Strategic Consulting WDC 20002 ML-PIMCO Total Return ML-MMFunds ML-MMFunds ML-lvy Asset Strategy Greenberg Research Inc. 100% Owner 10 G Street, NE \$15,001 -\$50,000 \$15,001 -\$50,000 \$15,001 -\$50,000 \$15,001 -\$50,000 None None None None \$1 - \$1,000 \$1 - \$1,000 \$1,001 - \$15,000 DIVIDENDS \$1,000,000 \$1 - \$1,000 \$500,001 -Name Rosa L. DeLauro None None None None None None See Statement II DIVIDENDS TAL GAINS **DIVIDENDS/CAPI** INTEREST DIVIDENDS DIVIDENDS NONE \$1 - \$200 \$1,001 - \$2,500 NONE NONE NONE NONE \$1 - \$200 NONE \$1 - \$200 \$201 - \$1,000 NONE \$201 - \$1,000 ש PS U S S S ס Page 4 of 10

Phone Surveys

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME ۲ ŞP SP **United Bank Checking** Retirement TIAA CREF-CREF Stock Retirement TIAA CREF- TIAA Traditional TIAA CREF- TIAA TIAA CREF- CREF Stock Retirement Traditional Retirement \$50,001 -\$100,000 \$100,001 -\$250,000 \$15,001 -\$50,000 \$100,000 \$50,001 -\$50,001 -\$100,000 Name Rosa L. DeLauro None **CAPITAL GAINS** INTEREST INTEREST INTEREST NONE \$1 - \$200 \$1,001 - \$2,500 \$15,001 - \$50,000 \$2,501 - \$5,000 S(part) ש Page 5 of 10

SCHEDULE IV - TRANSACTIONS

Name Rosa L. DeLauro

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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.

	Type of	Capital Gain in Excess		
Asset	Transaction	of \$200?	Date	Amount of Transaction
JH- Rtrmt-Lifecycle 2015	ם פ	N/A	VAR	\$15,001 - \$50,000
ML-Blackrock Global	S	N _o	VAR	\$15,001 - \$50,000
ML-Evergreen Asset Allocation Fd	Ø	N _o	4/27/09	\$15,001 - \$50,000
ML-Ivy Asset Strategy	ס	N/A	4/28/09	\$15,001 - \$50,000
ML-lvy Asset Strategy	Ø	Z o	VAR	\$15,001 - \$50,000
ML-PIMCO Total Return	0	N/A	VAR	\$1,001 - \$15,000
ML-PIMCO Total Return	ס	NA	VAR	\$1,001 - \$15,000
ML-PIMCO Total Return	ס־	N/A	6/30/09	\$1,001 - \$15,000
ML-PIMCO Total Return	ס	N/A	4/30/09	\$15,001 - \$50,000
ML-PIMCO Total Return	S	No	11/30/09	\$1,001 - \$15,000
TIAA CREF-CREF Stock Retirement	S(part)	Yes	12/15/09	\$15,001 - \$50,000
	Asset JH- Rtrmt-Lifecycle 2015 ML-Blackrock Global ML-Evergreen Asset Allocation Fd ML-Ivy Asset Strategy ML-Ivy Asset Strategy ML-PIMCO Total Return ML-PIMCO Total Return ML-PIMCO Total Return ML-PIMCO Total Return TIAA CREF-CREF Stock Retirement	Retirement S(p)	Type of Transaction P S S Retirement S(part)	Type of Transaction Capital Gain in Excess of \$2007 S N/A VAF P N/A VAF P N/A 4/23 P N/A VAF P N/A VAF P N/A VAF P N/A VAF N/A VAF N/A Retirement S(part) Yes 12/-

SCHEDULE IV - TRANSACTIONS

Name Rosa L. DeLauro

Page 7 of 10

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	SP, DC,
TIAA CREF-TIAA Traditional Retirement	Asset
P	Type of Transaction
N/A	Capital Gain in Excess of \$200?
12/15/09	Date
\$15,001 - \$50,000	Amount of Transaction

SCHEDULE V - LIABILITIES

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, yourspouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

Name Rosa L. DeLauro

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SP, DC,	Creditor	Type of Liability	Amount of Liability
SP	TIAA CREF Carol Stream, IL 60197	Loan	\$15,001 - \$50,000
SP	Pacific Life Omaha,NE 68103	Loan	\$100,001 - \$250,000
SP	Bank of America Wilmington, DE 19886	Loan	\$50,001 - \$100,000

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SCHEDULE VIII - POSITIONS

Name Rosa L. DeLauro

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Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fratemal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Honorary Board Member	Women's Campaign School at Yale University
Honorary Board Member	Special Olympics
Honorary Board Member	Sisters Journey
National Advisory Board	Roosevelt Institution
National Advisory Board	National Research Center for Women & Families
Member	CT International Women's Forum
Honorary Board Member	Women's Health Research at Yale
Distinguished Board Member	National Organization of Italian American Women
Board of Trustees	Kennedy Center
Board of Directors (ex-oficio)	The Governor's Prevention Partnership
Honorary Board of Directors	Cancer Schmancer Movement
Congressional Advisory Council	The Faith and Politics Institute

SCHEDULE VIII - POSITIONS

Name Rosa L. DeLauro

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Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fratemal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Advisory Board	The Perry House: Doorway to Stratford
Member	Order of the Sons of Italy in America
Member	Italian American Historical Society of CT
Member	NAACP
Member	The Arts Council of Greater New Haven
Member	Delta Kappa Gamma Society (Honor Society of Women Educators)
Life Member	Hadassah, Wapawuag,CT Valley-West Rock Chapter

Rosa L. DeLauro 49 Huntington Street New Haven, CT 06511

House of Representatives, CT, 3rd District

VLLVCHWEALS: BYSIS OF VALUON

Statement I, Schedule III, Page 3:

Greenberg Quinlan Rosner Research Inc. – Ownership value based on an independent business valuation.

Statement II, Schedule III, Page 4:

Greenberg Research, Inc. - Ownership value based on an independent business valuation.