

UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT

For use by Members, officers, and employees

HAND DELIVERED

FORM A

Page 1 of 2

Representative Steven L. Kagen
(Full Name)

(202) 225-5665
(Daytime Telephone)

2010 MAY -6 PM 4:50
(Office Use Only)

Filer Status: ☒ Member of the U.S. House of Representatives

State: WI District: 8

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?	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 \$335 and not otherwise exempt)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II. If yes, complete and attach Schedule I. 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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. If yes, complete and attach Schedule VI. 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)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
III. If yes, complete and attach Schedule II. 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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VIII. If yes, complete and attach Schedule VII. Did you hold any reportable positions on or before the date of filing in the current calendar year?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
IV. If yes, complete and attach Schedule III. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	IX. If yes, complete and attach Schedule VIII. Did you have any reportable agreement or arrangement with an outside entity?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
V. If yes, complete and attach Schedule IV. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	X. If yes, complete and attach Schedule IX.	

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"/>
Exemptions- 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? Do not answer "yes" unless you have first consulted with the Committee on Standards of Official Conduct.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

SCHEDULE III -ASSETS AND "UNEARNED" INCOME

BLOCK A		BLOCK B													BLOCK C								BLOCK D											BLOCK E
Asset and/or Income Source		Value of Asset													Type of Income								Amount of Income											Transaction
<p>Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other asset or source 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 any 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.</p> <p>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.</p> <p>If you so choose, you may indicate that an asset or income source is that of your spouse (JT), in the optional column on the far left.</p>		<p>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 during the reporting year and is included only because it generated income, the value should be "None."</p>													<p>Check all columns that 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 calendar year.</p>								<p>For retirement plans or 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.</p>											<p>Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year. If only a portion of an asset is sold, please indicate as follows: (S) (partial) See below for example</p>
SP, JT		A	B	C	D	E	F	G	H	I	J	K	L	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAIN	ORIGINAL ISSUE DISCOUNT	EXCEPTED TRUST/BLIND TRUST	Other Type of Income (Specify)	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	P, S, E	
		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									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		

Name Rep. Steven L. Kagen

Page 2 of 7

Name	Ben Steven Kaden	Page 3 of 7
------	--------------------	-------------

[illegible]

Page 4 of 7

BLOCK A		BLOCK B													BLOCK C									BLOCK D											BLOCK E
Asset and/or Income Source		Value of Asset at close of reporting year.													Type of Income									Amount of Income											Trans- action
		A	B	C	D	E	F	G	H	I	J	K	L										I	II	III	IV	V	VI	VII	VIII	IX	X	XI		
		None																						None											
		\$1-\$1,000																						\$1-\$200											
		\$1,001-\$15,000																						\$201-\$1,000											
		\$15,001-\$50,000																						\$1,001-\$2,500											
		\$50,001-\$100,000																						\$2,501-\$5,000											
		\$100,001-\$250,000																						\$5,001-\$15,000											
		\$250,001-500,000																						\$15,001-50,000											
		\$500,001-\$1,000,000																						\$50,001-\$100,000											
		\$1,000,001-\$5,000,000																						\$100,001-\$1,000,000											
		\$5,000,001-\$25,000,000																						\$1,000,001-\$5,000,000											
		\$25,000,001-\$50,000,000																						Over \$5,000,000											
		Over \$50,000,000																																	
		NONE																																	
		DIVIDENDS																																	
		RENT																																	
		INTEREST																																	
		CAPITAL GAIN																																	
		ORIGINAL ISSUE DISCOUNT																																	
		EXCEPTED TRUST/BLIND TRUST																																	
		Other Type of Income (Specify)																																	
															</																				

Page 5 of 7

[illegible]

SCHEDULE 1V - TRANSACTIONS

Name Rep. Steven L Kagen

Page 6 of 7

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. 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.

Capital Gains - If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on schedule III.

SP, DC

JT	Asset	Type			Date (MO/DAY/YR) or Quarterly, Monthly, or Bi-weekly, if applicable	Amount of Transaction										
		PURCHASE	SALE	EXCHANGE		Check Box if Capital Gain exceeded \$200	B	C	D	E	F	G	H	I	J	K
							\$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									
	3M Company common stock	X			03/16/09		X									
	Grafton WI Corp RFDG Purp 4.00% due 06/01/2025	X			08/25/09					X						
	General Electric Company common stock	X			03/16/09		X									
	New Richmond WI School District Go 4.250%, due 04/01/2028	X			11/03/09					X						
	Proctor & Gamble Co common stock	X			03/16/09		X									
	Puerto Rico Commwl Hwy 5.250% due 07/01/09	X			04/24/09				X							
	Suntrust Bank Atlanta Ga. 4%, due 5/28/14	X			05/15/09				X							
	Wisconsin Health & Edl Facs, 5.250%, due 11/15/24	X			04/09/09					X						
	Streettracks Gold Trust ETF (partial sale)	X			12/22/09	X										
	Puerto Rico Commwl 5.25% due 07/01/09	X			07/10/09				X							
	Chicago Ill Wtr Rev 0.00%	X			11/02/09				X							
	Waupun Wis G/O Sch Dist 4.75%	X			04/01/09				X							
	Capital One FSB Falls Church, due 3/13/09	X			03/13/09	X			X							

Name Rep. Steven L Kagen

Page 7 of 7

Date	Parties To	Terms of Agreement
January 2, 2007	Steven L Kagen & Kagen Allergy Clinic, S.C.	Steven L Kagen, M.D. may be employed by the Kagen Allergy Clinic, S.C. from time to time during official holidays while serving as a U.S. Representative, at no compensation, and any and all revenue generated from such activity shall be the sole property of Kagen Allergy Clinic, S.C.
		Compensation to Steven L. Kagen shall be restricted to (a) paying for his medical malpractice insurance coverage and (b) any ordinary overhead - related expenses for his service to Kagen Allergy Clinic, S.C.
		patients. Steven L. Kagen did not earn any money working for Kagen Allergy Clinic, S.C. in 2009.
		Steven L. Kagen received pass-through payments of accounts receivable for services rendered prior to becoming a member of the U.S. Congress.