

# UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

**FORM A** Page 1 of 7  
For use by Members, officers, and employees

Bruce Lowell Braley  
(Full Name)

202-225-2911  
(Daytime Telephone)

**Filer Status**  
☒ Member of the U.S. House of Representatives  
State: IA  
District: 01

☐ 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.

**HAND DELIVERED**  
(Office Use Only)

## 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 \$335 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 \$335 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 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 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"/>	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

<b>Trusts-</b> 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 benefiting you, your spouse, or dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Exemptions--</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? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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**SCHEDULE I - EARNED INCOME**

Name Bruce Lowell Braley

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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 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.

Source	Type	Amount
Waterloo Community School District	Spouse Salary	N/A

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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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
<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 reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use ticker symbols.)</p> <p>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 for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.</p> <p>For rental or other real property held for investment, provide a complete address.</p> <p>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.</p> <p>Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deductible totaling \$5,000 or less in a personal exemption or</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 and is included only because it is generated income, the value should be "None."</p>	<p>Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.</p>	<p>For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), 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. Check "None" if no income was earned or generated.</p>	<p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
PEPSICO, INC		\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	
AMANA MUTUAL FUNDS TRUST INCOME FUND		\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
COLUMBIA MID CAP VALUE FUND A		\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	S(part)
DAVIS NEW YORK VENTURE FD CL A		\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	S(part)
EUROPACIFIC GROWTH FUND CL F		\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
AMERICAN FUNDS GROWTH FUND OF AMERICA CLASS F		\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	S(part)

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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HARTFORD MID CAP FUND CLASS A	\$1,001 - \$15,000	DIVIDENDS	NONE		S(part)
IVY FUNDS PACIFIC OPPORTUNITIES FUND CLASS A	\$1,001 - \$15,000	DIVIDENDS	NONE		
LAZARD EMERGING MARKETS PORTFOLIO RETAIL SH	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200		
LOOMIS SAYLES FUNDS II INVT GRADE BOND FD CL A	\$1,001 - \$15,000	CAPITAL GAINS	\$201 - \$1,000		
NEUBERGER BERMAN EQUALITY TR SOCIALLY RESPONSIVE TR	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200		
PIMCO FUNDS TOTAL RETURN ED CLASS A	\$1,001 - \$15,000	CAPITAL GAINS	\$201 - \$1,000		
TEMPLETON GLOBAL BOND FL CLASS A	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000		
THORNBURG INVT TR INTERNATIONAL VALUE FD CLASS A	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200		
INSURED BANK PROGRAM	\$1,001 - \$15,000	INTEREST	\$1 - \$200		
BARON ASSET FUND	None		NONE		S
GATEWAY TRUST INDEX PLUS FUND CLASS A	None		NONE		S
JPMORGAN TRUST I HIGHBRIDGE STATISTICAL	None		NONE		S
T ROWE PRICE GROWTH STOCK	None		NONE		S

**SCHEDULE III - ASSETS AND "UNEARNED" INCOME**

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EQUITY COMPASS MANAGED ACCOUNT / Not Self Directed	\$100,001 - \$250,000	CAPITAL GAINS	\$2,501 - \$5,000	P
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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	Capital Gain In Excess of \$200?	Date	Amount of Transaction
	BARON ASSET FUND	S	Yes	2-19-10	\$1,001 - \$15,000
	COLUMBIA MID CAP VALUE FUND A	S	No	2-19-10	\$15,001 - \$50,000
	DAVIS NEW YORK VENTURE FD CL A	S	Yes	2-19-10	\$15,001 - \$50,000
	EQUITY COMPASS MANAGED ACCOUNT / Not Self Directed	P	N/A	2-19-10	\$100,001 - \$250,000
	GATEWAY TRUST INDEX PLUS FUND CLASS A	S	Yes	2-19-10	\$1,001 - \$15,000
	GROWTH FUND OF AMERICA CL F	S	Yes	2-19-10	\$50,001 - \$100,000
	HARTFORD MID CAP FUND CLASS A	S	No	2-19-10	\$1,001 - \$15,000
	JPMORGAN TRUST I HIGHBRIDGE STATISTICAL	S	No	2-19-10	\$1,001 - \$15,000
	T ROWE PRICE GROWTH STOCK	S	Yes	2-19-10	\$1,001 - \$15,000

**SCHEDULE V - LIABILITIES**Name **Bruce Lowell Braley**

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, 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.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
	COMMUNITY NATIONAL BANK	July 2010	Bridge Loan- Paid off 9/8/2010	\$10,001 - \$15,000