

**HAND
DELIVERED**

UNITED STATES HOUSE OF REPRESENTATIVES

FORM A

Page 1 of 9

CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT

For use by Members, officers, and employees

Joseph D. Courtney

(Full Name)

(Daytime Telephone) U.S. House of Representatives

(Office Use Only)

2013 MAY 14 AM 11:54

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representative	State: CT District: 2	<input type="checkbox"/> Officer Or Employee	Employing Office:	A \$200 penalty shall be assessed against anyone who files more than 30 days late.
Report Type	<input checked="" type="checkbox"/> Annual (May 15)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Termination Date:	

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 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 \$350 and not otherwise exempt)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, complete and attach Schedule I.		If yes, complete and attach Schedule VI.	
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?	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 \$50 from one source)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, complete and attach Schedule II.		If yes, complete and attach Schedule VII.	
III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$1,000 at the end of the period?	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?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If yes, complete and attach Schedule III.		If yes, complete and attach Schedule VIII.	
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?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, complete and attach Schedule IV.		If yes, complete and attach Schedule IX.	
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	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.	
If yes, complete and attach Schedule V.			

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

IPO--	Did you purchase any shares that were allocated as a part of an Initial Public Offering?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Trusts--	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"/>
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 Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

SCHEDULE I - EARNED INCOME

Name Joseph D. Courtney

Page 2 of 9

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
St. Francis Hospital and Medical Center	Spouse Salary	N/A
Windman Hospital	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Joseph D. Courtney

Page 3 of 9

BLOCK A Asset and/or Income Source <small>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 source of income which generated more than \$200 in "unearned" income during the year. Provide complete names of stocks and mutual funds (do not use ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds. For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and a city and state. 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. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or savings accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. 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 with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.</small>	BLOCK B Year-End Value of Asset <small>Indicate value of asset 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." * This column is for assets held solely by your spouse or dependent child.</small>	BLOCK C Type of Income <small>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.</small>	BLOCK D Amount of Income <small>For assets for which you checked "Tax-Deferred" in Block C, 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. * This column is for income generated by assets held solely by your spouse or dependent child.</small>	BLOCK E Transaction <small>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</small>
401(a) Plan-Invesco Van Kampen Equity and Income	None	TAX-DEFERRED	NONE	S
403(b) American Century Mid Cap Value Inst	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
403(b) Guaranteed Income Fund	\$15,001 - \$50,000	TAX-DEFERRED	NONE	
403(b) Hartford Dividend Growth Y	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
403(b) ING Mid Cap Opportunities	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
403(b) ING T Rowe Price Growth Equity Portfolio	\$1,001 - \$15,000	TAX-DEFERRED	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Joseph D. Courtney

Page 4 of 9

403(b) Lincoln Multi-Fund Variable Annuity Fixed Account	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
403(b) Mainstay Large Cap Growth I	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
403(b) MFS New Discovery R4	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
403(b) Oakmark International I	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
403(b) Oppenheimer International Growth Y	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
403(b) PIMCO Total Return Institutional Fund	\$15,001 - \$50,000	TAX-DEFERRED	NONE	
403(b) William Blair Small Cap Value I	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
Commonwealth Annuity and Life "Exceptional Life Policy"	\$1,001 - \$15,000	None	NONE	
Def. Cont. Plan-American Balanced Fund	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
Def. Cont. Plan-MetLife Stable Value Fund	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
Def. Cont. Plan-Russell LifePoint Growth Strategy	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
Def. Cont. Plan-Washington Mutual Investors Fund	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
IRA-American Blackrock Focus Growth (MCFX)	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
IRA-American Growth Fund of America CI C and F1 (GFACX)	\$15,001 - \$50,000	TAX-DEFERRED	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Joseph D. Courtney

Page 5 of 9

IRA-American Small Cap World (SMCVX)	\$15,001 - \$50,000	TAX-DEFERRED	NONE	
IRA-Blackrock Large Cap (MCLRX)	\$15,001 - \$50,000	TAX-DEFERRED	NONE	
IRA-Invesco Global Core (AWSCX)	\$15,001 - \$50,000	TAX-DEFERRED	NONE	
IRA-J Hancock Financial Inds (FIDAX)	\$15,001 - \$50,000	TAX-DEFERRED	NONE	
IRA-Lord Abbett Classic Large Stock CI C (LLRCX)	\$15,001 - \$50,000	TAX-DEFERRED	NONE	
IRA-Lord Abbett Small Cap Blend (LSBCX)	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
IRA-Merrill cash/money accounts	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
IRA-Putnam International Growth Fund (PIOCX)	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
Manulife Financial (fn)	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
Mass Mutual Whole Life Policy (fn)	\$1,001 - \$15,000	None	NONE	
Rockville Financial (RCKB)(fn)	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
Templeton World Fund Class A	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	

SCHEDULE IV - TRANSACTIONS

Name Joseph D. Courtney

Page 6 of 9

Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. 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.

* This column is for assets solely held by your spouse or dependent child.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	401(a) Plan-Invesco Van Kampen Equity and Income (fn)	S	N/A	6-30-11	\$1,001 - \$15,000

SCHEDULE V - LIABILITIES

Name Joseph D. Courtney

Page 7 of 9

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. Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); 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. *This column is for liabilities held solely by your spouse or dependent child.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
	Chase Bank	July 2011	Mortgage on personal residence (not rented)	\$50,001 - \$100,000

SCHEDULE VII - POSITIONS

Name Joseph D. Courtney

Page 8 of 9

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, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member (uncompensated)	Connecticut Health Policy Project

FOOTNOTES

Name Joseph D. Courtney

Page 9 of 9

Number	Section / Schedule	Footnote	This note refers to the following item
1	Schedule III	Inadvertently omitted from prior reports.	Mass Mutual Whole Life Policy
2	Schedule III	These are small dividend reinvestment plans that were inadvertently omitted from prior reports.	Manulife Financial, Rockville Financial
3	Schedule IV	Transaction should have appeared on 2011 report.	401(a) Plan-Invesco Van Kampen Equity and Income