



Filing ID #10001554

# FINANCIAL DISCLOSURE REPORT

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## FILER INFORMATION

**Name:** Mr. Bill Foster  
**Status:** Member  
**State/District:** IL11

## FILING INFORMATION

**Filing Type:** Annual Report  
**Filing Year:** 2013  
**Filing Date:** 05/8/2014

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
BMO-Harris Bank (savings, checking and money market accounts)	JT	\$250,001 - \$500,000	Interest	\$201 - \$1,000	<input type="checkbox"/>
Congressional Federal Credit Union (savings and checking)	JT	\$500,001 - \$1,000,000	Interest	\$1 - \$200	<input type="checkbox"/>
CREF Inflation-Linked Bond	SP	\$50,001 - \$100,000	None		<input type="checkbox"/>
CREF Stock Fund	SP	\$100,001 - \$250,000	None		<input type="checkbox"/>
CREF Stock Fund		\$250,001 - \$500,000	None		<input type="checkbox"/>
Fidelity Contrafund	SP	\$100,001 - \$250,000	None		<input type="checkbox"/>
Fidelity Intermed Bond	SP	\$50,001 - \$100,000	None		<input type="checkbox"/>
Fidelity Magellan	SP	\$50,001 -	None		<input type="checkbox"/>

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
\$100,000					
Northwestern Mutual Insured Bank Deposit IRA		None	None		<input checked="" type="checkbox"/>
DESCRIPTION: Northwestern Mutual Insured Bank Deposit IRA was transferred to Thrift Savings Plan G Fund.					
Payment by ETC from Promissary note for payments over time arising from sale of interest in ETC Inc.		None	Capital Gains, Interest	\$100,001 - \$1,000,000	<input type="checkbox"/>
DESCRIPTION: Payment by ETC from Promissary note for payments over time arising from sale of interest in ETC Inc.					
Promissary note for payments over time arising from sale of interest in Electronic Theatre Controls,		\$5,000,001 - \$25,000,000	None		<input type="checkbox"/>
DESCRIPTION: Promissary note for payments over time arising from sale of interest in Electronic Theatre Controls, Inc (ETC) Middleton WI. Promissary note is payable by ETC.					
Teachers Federal Credit Union (savings, money market and checking)	SP	\$50,001 - \$100,000	Interest	\$201 - \$1,000	<input type="checkbox"/>
Thrift Savings Plan G Fund		\$100,001 - \$250,000	None		<input type="checkbox"/>
Thrift Savings Plan G Fund	SP	\$100,001 - \$250,000	None		<input type="checkbox"/>
Thrift Savings Plan G Fund		\$50,001 - \$100,000	None		<input checked="" type="checkbox"/>
DESCRIPTION: Northwestern Mutual Insured Bank Deposit IRA was transferred to Thrift Savings Plan G Fund.					
Thrivent Large Cap Stock Fund-A	SP	\$250,001 - \$500,000	Dividends	\$5,001 - \$15,000	<input type="checkbox"/>
Thrivent Mid Cap Stock Fund-A	SP	\$100,001 - \$250,000	Dividends	\$1,001 - \$2,500	<input type="checkbox"/>
Thrivent Money Market Fund-A	SP	\$1,001 - \$15,000	Dividends	\$1 - \$200	<input type="checkbox"/>
Thrivent Partner Worldwide Allocation Fund-A	SP	\$15,001 - \$50,000	Dividends	\$201 - \$1,000	<input type="checkbox"/>
TIAA Real Estate	SP	\$50,001 - \$100,000	None		<input type="checkbox"/>
TIAA Traditional Retirement Annuity		\$250,001 - \$500,000	None		<input type="checkbox"/>

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
TIAA Traditional Retirement Annuity	SP	\$100,001 - \$250,000	None		<input type="checkbox"/>

SCHEDULE B: TRANSACTIONS

Asset	Owner	Date	Tx. Type	Amount	Cap. Gains > \$200?
Northwestern Mutual Insured Bank Deposit IRA		08/19/2013	S	\$50,001 - \$100,000	<input type="checkbox"/>
LOCATION: US DESCRIPTION: Northwestern Mutual Insured Bank Deposit IRA was transferred to Thrift Savings Plan G Fund.					
Thrift Savings Plan G Fund		08/19/2013	P	\$50,001 - \$100,000	
LOCATION: US DESCRIPTION: Northwestern Mutual Insured Bank Deposit IRA was transferred to Thrift Savings Plan G Fund.					

SCHEDULE C: EARNED INCOME

Source	Type	Amount
Brookhaven National Laboratory	spouse salary	N/A

SCHEDULE D: LIABILITIES

None disclosed.

SCHEDULE E: POSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE G: GIFTS

None disclosed.

SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS

None disclosed.

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

None disclosed.

## EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

**IPO:** Did you purchase any shares that were allocated as a part of an Initial Public Offering?

☐ Yes ☒ No

**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 ☒ No

**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 ☒ No

## COMMENTS

## CERTIFICATION AND SIGNATURE

☒ I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

**Digitally Signed:** Mr. Bill Foster , 05/8/2014