

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT

Form A

For use by Members, officers, and employees

Name: Michael E. McMahonDaytime Telephone: 718-351-1062
**HAND
DELIVERED**

(Office Use Only)

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: _____ District: _____	<input type="checkbox"/> Officer or Employee	Employing Office: _____
Report Type	<input checked="" type="checkbox"/> Annual (May 17, 2010)	<input type="checkbox"/> Amendment	<input type="checkbox"/> 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? 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 a 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
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 ☐ 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? Do not answer "yes" unless you have first consulted with the Committee on Standards of Official Conduct.

 Yes ☐ No ☒

SCHEDULE I - EARNED INCOME

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. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

Source		Type	Amount
Examples		Approved Teaching Fee	\$6,000
Keene State		Legislative Pension	\$9,000
State of Maryland		Spouse Speech	\$1,000
Civil War Roundtable (Oct. 2nd)		Spouse Salary	NA
Ontario County Board of Education			
O'Leary + Spero		deferred compensation for services prior to current employment	120,000.-
Metropolitan Life Insurance Co.		deferred compensation annuity for services rendered prior to current employment	21,012.-
(previously listed in partnership compensation)			
TA Financial Life Insurance		deferred compensation annuity for services rendered prior to current employment	77,748.-
(previously listed in partnership compensation)			
New York State Office of Court Administration		Spouse Salary	N/A

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. A green envelope for transmitting the list is included in each Member's filing package.

[illegible]

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Michael E. McMahon

Page 4 of 15

BLOCK A Asset and/or Income Source		BLOCK B Value of Asset													BLOCK C Type of Income					BLOCK D Amount of Income											BLOCK E Transaction	
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 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.		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."													Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "N/A." 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.					For retirement plans or accounts that do not allow you to choose specific investments, you may write "N/A." For income from 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.											Indicate if the asset that purchases (F), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.	
		A	B	C	D	E	F	G	H	I	J	K	L	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	Other Type of Income (See instruction booklet for details)	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	S (partial)
		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	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	Other Type of Income (See instruction booklet for details)	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	S (partial)
SP Mega Corp. Stock	Simon & Schuster																															
DC Examples	St. Bank of Pakistan KY Assets																															
ST Citibank - Cash					X																											
ST Residential Financial Lf Fin																																
ST CIGNA Corp Stock																																
ST Merrill Lynch Investment																																
See addendum #1																																

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Michael E. McMahon

Page 5 of 13

BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income	BLOCK D Amount of Income											BLOCK E Transaction
	A	B	C	D	E	F	G	H	I	J	K	L		I	II	III	IV	V	VI	VII	VIII	IX	X	XI	
	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	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	
Merrill Lynch IRA (Security Basic and SEP now combined) - See addendum #2								X					X (reinvested)						X (reinvested)						P+S (partial)
De Merrill Lynch UGMA for son Joseph - See addendum #3				X									X	X (reinvested)					X (reinvested)						P+S (partial)
Real Estate held for rental at 25 Manor Road Steubenville NY Previously deeded partnership asset and income							X						X												

SCHEDULE IV - TRANSACTIONS

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 child, 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 or loss of \$200, check the "capital gains" box and disclose this income on Schedule III.

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 child, 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.		Type of Transaction			Check Box if Capital Gain Exceeded \$200	Date MO/DAY/YR or Quarterly Monthly or Bi-weekly if applicable	Amount of Transaction										
SP, DC, JT SP	Asset Example: Mega Corporation Common Stock (partial sale)	PURCHASE	SALE	EXCHANGE			B \$1,001- \$15,000	C \$15,001- \$50,000	D \$50,001- \$100,000	E \$100,001- \$250,000	F \$250,001- \$500,000	G \$500,001- \$1,000,000	H \$1,000,001- \$5,000,000	I \$5,000,001- \$25,000,000	J \$25,000,001- \$50,000,000	K Over \$50,000,000	
JT	Letus Vance Tea Menage Fund		X			4/1/09	X										
JT	First Eagle US Fund	X				4/1/09	X										
	American Income Fund		X			1/1/09	X										
	CD Cole Taylor Bank		X			1/1/09	X										
	Letus Vance Large Cap		X			1/1/09	X										
	Van Kampen Equity		X			1/1/09	X										
	Franklin Income		X			1/1/09	X										
	CD American Chtr Bank	X				2/1/09	X										
	1 Shares J&P Global	X				1/1/09	X										
	1 Shares US Aero	X				1/1/09	X										
	Inv Asset Steady Y	X				3/1/09	X										
	Lord Abbots Short	X				3/1/09	X										
	Market Vectors Agribusiness	X				1/1/09	X										

SCHEDULE IV - TRANSACTIONS

Name Michael E. McMahon Page 7 of 13

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 child, 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.

SP, DC, JT	Asset	Type of Transaction			Check Box if Capital Gain Exceeded \$200	Date (MO/DAY/YR) or Quarterly, Monthly, or Bi-weekly if applicable	Amount of Transaction										
		PURCHASE	SALE	EXCHANGE			B	C	D	E	F	G	H	I	J	K	
SP	Example: Mega Corporation Common Stock (partial sale)		X			10-12-09		X									
DC	CDGE Capital Financial	X				3rd Qtr 09			X								
DC	Blackrock Global	X				1st Qtr 09	X										
DC	Evergreen Asset	X				3rd Qtr 09	X										
DC	American Income Fund		X			1st Qtr 09	X										
DC	Pimco Corp Only Fund		X			1st Qtr 09		X									
DC	Venue Capital Equity		X			1st Qtr 09		X									

Page 11 of 13

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Continuation Sheet (if needed)

Page 12 of 13

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Name: Michael E. McDonald Page 13 of 13

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