

UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT

Form A
For use by Members, officers, and employees

Name: Francisco "Quico" Canseco

Daytime Telephone: 210-260-4137

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: <u>TX</u> District: <u>23</u>	<input type="checkbox"/> Officer or Employee	Employing Office:
Report Type	<input checked="" type="checkbox"/> Annual (May 15, 2012)	<input checked="" type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Termination Date:

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

LEGISLATIVE RESOURCE CENTER
2012 SEP 12 PM 6:03
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
YES

HAAND DELIVERED

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 \$350 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 \$350 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 checked="" type="checkbox"/> No <input 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 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"/>
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 Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

For payments to charity in lieu of honoraria, use Schedule II.

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For additional assets and unearned income, use next page

Continuation Sheet (if needed)

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Continuation Sheet (if needed)

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Continuation Sheet (if needed)

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SCHEDULE IV—TRANSACTIONS

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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.

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.		Type of Transaction			Check Box if Capital Gain Exceeded \$200	Date (MO/DA/YR) or Quarterly, Monthly, or Bi-weekly, if applicable	Amount of Transaction												
							A \$1,001- \$15,000	B \$15,001- \$50,000	C \$50,001- \$100,000	D \$100,001- \$250,000	E \$250,001- \$500,000	F \$500,001- \$1,000,000	G \$1,000,001- \$5,000,000	H \$5,000,001- \$25,000,000	I \$25,000,001- \$50,000,000	J Over \$50,000,000			
SP, DC, JT	Asset																		
SP	Example: Mega Corporation Common Stock (partial sale)		X				10-12-11		X										
SP	GREENVILLE NC CTF'S PARTN		X		X		5-2-11		X										
SP	ORION FUTURES FUND LP CLASS A		X		X		11-30-11			X									
SP	BRISTOL ENERGY FUND LP (PARTIAL SALE)		X		X		11-30-11		X										
SP	DAVIS NY VENTURE FN INC		X				5-23-11		X										
SP	EUROPACIFIC GROWTH FUND CLASS F1 (PARTIAL)		X				1-18-11	X											
SP	EUROPACIFIC GROWTH FUND CLASS F1		X		X		5-23-11	X											
SP	HARBOR INTERNATIONAL FUND INSTL SHARES (PARTIAL)		X		X		11-1-11	X											
SP	LAZARD EMERGING MKTS EQUITY PORT INSTL SHS (PARTIAL)		X				11-1-11	X											
SP	NEW WORLD FUND CLASS F1 (PARTIAL)		X				11-1-11	X											
SP	PIONEER REAL ESTATE SHARES FUND Y (PARTIAL)		X				11-1-11	X											
SP	THORNBURG INTERNATIONAL VALUE FUND CL I (PARTIAL)		X				1-18-11	X											
SP	THORNBURG INTERNATIONAL VALUE FUND CL I (PARTIAL)		X				11-1-11	X											
SP	AAA CAPITAL ENERGY FUND LP	X					12-1-11			X									
SP	BHM DISCRETIONARY FUTURES FUND	X					7-1-11		X										
DC-1	BLACKROCK GLOBAL ALLOCATION FD INC CL A (PARTIAL)		X		X		1-25-11	X											
SP	HARBOR INTERNATIONAL FUND INSTL SHARES (PARTIAL)		X		X		1-18-11	X											

SCHEDULE V— LIABILITIES

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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 it is rented out); 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. **NOTE:** Pending legislation may require Members to report mortgages on personal residences.

SP, DC, JT	Creditor	Date Liability Incurred Mo/Year	Type of Liability	Amount of Liability										
				A	B	C	D	E	F	G	H	I	J	
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main St., Dover, DE	\$10,001- \$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	
SP	Morgan Stanley Smith Barney	May 2009	Line of Credit					X						
	Hondo National Bank	Nov 2009	Personal liability		X									
	Canseco Investments	Jan 2010	Loan against ownership interest			X								

SCHEDULE VI— GIFTS

Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year. **Exclude:** Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$140 or less need not be added towards the \$350 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
<i>Example:</i> Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	\$375
None		

SCHEDULE VII—POSITIONS

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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 other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

Position	Name of Organization
DIRECTOR	VOCES ACTION
DIRECTOR	CANSECO FOUNDATION
MEMBER	CANSECO INVESTMENTS
DIRECTOR	FMC DEVELOPERS, INC.

SCHEDULE IX—AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	