

# UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT

FORM A  
For use by Members, officers, and employees

MAY 17 2010

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Elijah E. Cummings  
(Full Name)

410-685-9199  
(Daytime Telephone)

Filer Status  
☒ Member of the U.S. House of Representative

State: MD  
District: 07

☐ 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.

2010 MAY 24 PM 12:47  
OFFICE OF THE CLERK  
(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?	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)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II. If yes, complete and attach Schedule I. 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 checked="" type="checkbox"/> No <input type="checkbox"/>	VII. If yes, complete and attach Schedule VI. 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)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
III. If yes, complete and attach Schedule II. 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?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. If yes, complete and attach Schedule VII. 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"/>
IV. If yes, complete and attach Schedule III. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	IX. If yes, complete and attach Schedule VIII. Did you have any reportable agreement or arrangement with an outside entity?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
V. If yes, complete and attach Schedule IV. 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.	

## 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 <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 Standards of Official Conduct.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

**SCHEDULE I - EARNED INCOME**

Name Elijah E. Cummings

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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
Global Policy Solutions, LLC - Spouse	Spouse Salary	N/A
National Association of Counties	Board Service - Spouse	\$15,000
Women's Funding Network	Speaking Honorarium - Spouse	\$500
The Praxis Project, Inc.	Proposal Review - Spouse	\$500
OMG Center for Collaborative Learning	Speaking Honorarium - Spouse	\$500
University of Texas Health Science Center	Advisory Board Honorarium - Spouse	\$1,500

# SCHEDULE II - PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

Name Elijah E. Cummings

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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. Employees may request a green envelope from the Clerk or use a plain envelope that is appropriately labeled.

Source	Activity	Date	Amount
State Farm	Speech	3/4/09	\$2,000
PG County Black Chamber of Commerce	Speech	4/18/09	\$500
Dorothy Lyons	Speech	4/18/09	\$100
Omicron Delta Epsilon	Speech	4/20/09	\$1,310
Morning Star Baptist Church	Speech	5/1/09	\$500
University of Phoenix	Speech	5/16/09	\$2,000
Howard Community College	Speech	5/22/09	\$250
United Baptist Church	Speech	6/14/09	\$750
Trinity Presbyterian Church	Speech	6/19/09	\$200
Columbia Chapter, National Epicurians	Speech	6/27/09	\$500
National Forum, Black Public Administrators	Speech	10/09/09	\$1,300
Women Power, Inc.	Speech	10/24/09	\$250

**SCHEDULE II - PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA**

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Source	Activity	Date	Amount
Cherry Hill United Methodist Church	Speech	10/25/09	\$300
Methodist Church Respite Day Conference	Speech	10/26/09	\$2,000
Hughes Memorial United Methodist Church	Speech	11/22/09	\$700
Howard University Rankin Chapel	Speech	12/06/09	\$1,000

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Elijah E. Cummings

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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 assets or sources 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.</p> <p>Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent or sibling; any deposits totaling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.</p> <p>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 (JT), in the optional column on the far left.</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 plans or accounts that do not allow you to choose specific investments, you may write "NA". 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 the calendar year.</p>	<p>For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For 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.</p>	<p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
SP	1830 11th St., NW, Ste 1, Washington, DC 20001	\$500,001 - \$1,000,000	RENT	\$50,001 - \$100,000	
	2014 Madison Ave. Baltimore, MD 21217	\$250,001 - \$500,000	RENT	\$5,001 - \$15,000	
SP	2221 St. Paul St., Baltimore, MD 21218 (Rental Property)	\$250,001 - \$500,000	RENT	\$15,001 - \$50,000	
	2225 St. Paul Street Baltimore, MD 21218	None	None	NONE	
	Elijah Cummings, PA Baltimore, MD 2	None	No income per House Rules. Continued Existence for resolving claims only.	NONE	

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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Other: (Please specify)  
Consulting  
Income/Other:  
(Please specify)

SP	Global Policy Solutions, LLC Washington, DC	\$250,001 - \$500,000	Other: (Please specify) Consulting Income/Other: (Please specify)	N/A - See, Schedule I	
	Merrill Lynch (401k) Blackrock Global	\$1,001 - \$15,000	Other:	\$2,501 - \$5,000	
SP	Merrill Lynch (401k) Blackrock Large CAP	\$1,001 - \$15,000	Other:	\$1,001 - \$2,500	
SP	Merrill Lynch (401k) Blackrock Value	\$1,001 - \$15,000	Other:	\$2,501 - \$5,000	
SP	Merrill Lynch (401k) Davis NY Venture	\$1,001 - \$15,000	Other	\$2,501 - \$5,000	
SP	Merrill Lynch (401k) Evergreen Core Bond CLC	\$1,001 - \$15,000	Other:	\$5,001 - \$15,000	
SP	TIAA CREF (403b) CREF Growth	\$1,001 - \$15,000	Other:	\$201 - \$1,000	
SP	TIAA CREF (403b) CREF Stock	\$1,001 - \$15,000	Other:	\$2,501 - \$5,000	
SP	TIAA CREF (403b) TIAA Real Estate	\$1,001 - \$15,000	Other: (loss)	NONE	
SP	TIAA CREF (403b) TIAA Traditional	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
SP	TIAA CREF(403b) CREF Bond Market	\$1,001 - \$15,000	Other:	\$1 - \$200	
SP	TIAA CREF(403b) CREF Global Equities	\$1,001 - \$15,000	Other: (Loss)	\$201 - \$1,000	
SP	Vanguard (403)(b)(7) 500 Index Fund Inv	\$1,001 - \$15,000	Other:	\$1 - \$200	

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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SP	Vanguard (403)(b)(7) Asset Allocation Fund Inv	\$1,001 - \$15,000	Other:	\$2,501 - \$5,000	
SP	Vanguard (403)(b)(7) Windsor Fund Investor	\$1,001 - \$15,000	Other:	\$5,001 - \$15,000	
SP	Wright Patman Roth IRA Congressional Federal Credit Union	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	

# SCHEDULE V - LIABILITIES

Name Elijah E. Cummings

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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	Type of Liability	Amount of Liability
	CitiMortgage, Inc OFallon, Missouri	Mortgage on 2014 Madison Ave., Baltimore, MD	\$15,001 - \$50,000
	CitiBank Home Line of Credit POBox 7690006 Dan Antonio, TX	Home Equity Mortgage	\$50,001 - \$100,000
SP	First Horizon, Tennessee	1st Mortgage on 1830 11th St., NW, Washington, DC	\$250,001 - \$500,000
SP	National City Bank, Ohio	2nd Mortgage on 1830 11th St., NW, Washington, DC	\$100,001 - \$250,000
SP	America's Servicing Company, Iowa	1st Mortgage on 2221 St. Paul St., Baltimore, MD 21218	\$250,001 - \$500,000
SP	EMC Mortgage Corp., Texas	2nd Mortgage on 2221 St. Paul St., Baltimore, MD 21218	\$50,001 - \$100,000



# **SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS**

Name **Elijah E. Cummings**

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Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
CBC Political Education Leadership Institute	Aug. 13-14	Baltimore-Tunica, MS- Baltimore - Lodging & Food ONLY (NOT Travel)	Y	Y	N	None

# SCHEDULE VIII - POSITIONS

Name Elijah E. Cummings

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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 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
Member	U.S. Naval Academy Board of Visitors
Member	Morgan State University Board of Regents
Member	Maryland Zoo Board of Trustees
Member	Baltimore Aquarium Board of Trustees
Member	Baltimore Area Council of the Boy Scouts of America Board of Directors
Member	Yale-Howard Nursing Partnership Center to Reduce Health DisparitiesAdvisory Committee