

UNITED STATES HOUSE OF REPRESENTATIVES

FORM A
For use by Members, officers, and employees

HAND

DELIVERED

CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT

Peter J. Visclosky

(Full Name)

202-225-2461

(Daytime Telephone)

2010 MAY 14 PM 12:24

OFFICE USE ONLY

LEGISLATIVE RESOURCE CENTER

Filer Status
☒ Member of the U.S. House of Representatives
State: IN District: 01

☐ 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.

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"/>
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 \$335 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 \$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. 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 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. 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 type="checkbox"/> No <input checked="" type="checkbox"/>		
If yes, complete and attach Schedule V.			

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

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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
U.S. House of Representatives Committee on Oversight and Government Reform	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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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>
DC	Dodge & Cox Stock Fund	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$1 - \$200	S
DC	Dodge & Cox Stock Fund	\$50,001 - \$100,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	P
	Merrill Lynch Bank U.S.A.	\$100,001 - \$250,000	INTEREST	\$1 - \$200	
DC	Mutual Quest Fund	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	S
DC	Mutual Quest Fund	\$50,001 - \$100,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	
	Northwest Indiana Bancorp	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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DC	People's Bank, Savings Account	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC	People's Bank, Savings Account	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	People's Bank, Savings Account	\$100,001 - \$250,000	INTEREST	\$201 - \$1,000	
	Congressional Federal Credit Union	\$1 - \$1,000	None	NONE	
SP	403(B) 7 - Vanguard 500 Index Fund Investment	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	403(B) 7 - Morgan Growth Fund Investment	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	
SP	403(B) 7 - Vanguard Strategic Equity Fund	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	403(B) 7 - Vanguard Wellington Fund Investment	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	403(B) 7 - Vanguard Selected Value Fund	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	Bank of America	\$50,001 - \$100,000	INTEREST	\$201 - \$1,000	
SP	IRA Sentinel Sustainable Core Opportunities	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Merrill Lynch Ready Assets	\$1,001 - \$15,000	DIVIDENDS/INTE REST	\$1 - \$200	
SP	Pepsico	\$100,001 - \$250,000	DIVIDENDS	\$2,501 - \$5,000	
SP	Roth IRA - Sentinel Sustainable Core Opportunities	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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SP	Roth IRA - Sentinel Sustainable Growth Opportunities	\$1,001 - \$15,000	DIVIDENDS	NONE	
SP	Roth IRA - Vanguard International Value Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Vanguard Tax-Managed Small-CAP	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	
SP	Vanguard Total International Stock Index	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	

SCHEDULE IV - TRANSACTIONS

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Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
DC	Mutual Quest Fund	P	No	Monthly from 01/15/09 to 12/15/09	\$1,001 - \$15,000
SP	Ownership in real estate (personal residence)	P	N/A	6/19/09	\$100,001 - \$250,000

SCHEDULE VIII - 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 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
Trustee	The Visclosky Foundation P.O. Box 10847 Merrillville, Indiana 46411