2012 MAY 15 PM 4: 28

more than 30 days	Termination Date:	☐ Termination	Amendment	Annual (May 15)		Report Type
; 	į	Employee	District: 1	House of Representatives		Status
Employing Office:	Employi	☐ Officer Or	State: AS	Member of the U.S.	<u>(</u>	Filer
(Daytime Telephone)			<u></u> <u>8</u>	(Full Name)		
202-225-8577			mavaega	Eni F. H. Faleomavaega		
For use by Members, officers, and employees	by Member	 	OSURE STATEM	CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT	RYEA	CALENDA
Page 1 of 10	FORM A	i	REPRESENT	UNITED STATES HOUSE OF REPRESENTATIVES	TS (UNITED

PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

		schedule attached for each "Yes" response.				If yes, complete and attach Schedule V.	
ropriate	app	Each question in this part must be answered and the appropriate	1	₹	Yes V No	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 IX.				if yes, complete and attach Schedule IV.	
Yes U No E	Yes	Did you have any reportable agreement or arrangement with an outside IX. entity?	Ŗ	₹ □	Yes V No	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting	N.
		If yee, complete and attach Schedule VIII.				If yes, complete and attach Schedule III.	
Yes 🕗 No 🗌	Yes	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?		8 □	Yes ☑ No ☐	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	
		If yes, complete and attach Schedule VII.				If yes, complete and attach Schedule II.	
Yes 🕢 No 🗌	Yes	Did you, your spouse, or a dependent child receive any reportable travel or le reimbursements for travel in the reporting period (worth more than \$350 from one source)?		중 (<)	Yes No 🗹	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 VI.				If yes, complete and attach Schedule I.	
Yes U No 🗸	8		<u></u>	ਨ ਵਿ}ਾ	Yes 🗌 No 🗸	Did you or your spouse have "sarmed" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS

Exemptions-	Trusts-
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 Ethics.	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 🗹	Yes No W

()
ת ק	ב כ
	η
Ξ	=
_	
7	
ć	n
ĕ	'n
ň	П
-	4
Ç	n
ì	>
S	į
Ē	,
Ē	7
ر	:
ב ב	
	֓֞֜֜֜֜֜֜֜֜֜֜֜֜֜֓֓֓֓֜֜֜֜֜֜֜֜֜֓֓֓֓֜֡֓֜֜֜֡֡֓֜֡֡֡֡֡֡
ק קיני	
てい	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME Name Eni F. H. Faleomavaega	BLOCK A BLOCK B BLOCK C BLOCK D	Asset and/or income Source Identify (a) each saset had for investment or production or difference with a stream of the reporting period, and (b) any other reportable saset or sources of income which generated more than \$200 in "meaned" income during the year. Provide complete names of sources and mutual funds (do not use ticker symbols.) Provide complete names of sources and mutual funds (do not use ticker symbols.) Provide complete names of sources and mutual funds (do not use ticker symbols.) Provide complete names of sources and mutual funds (do not use ticker symbols.) Provide complete names of sources and mutual funds (do not use ticker symbols.) Provide complete names of sources and mutual funds (do not use ticker symbols.) Provide complete names of sources and mutual funds (do not use ticker symbols.) Provide complete names of sources and mutual funds (do not use ticker symbols.) Provide complete names of sources and mutual funds (do not use ticker symbols.) Provide complete names of sources and mutual funds (do not use ticker symbols.) Provide complete names of sources and mutual funds (do not use ticker symbols.) Provide complete names of sources and mutual funds (do not use ticker symbols.) Provide complete names of sources and mutual funds (do not use ticker symbols.) Provide complete names of sources and mutual funds (do not use ticker symbols.) Provide complete names of sources and mutual funds (do not use ticker symbols.) Provide complete names of sources and mutual funds (do not use ticker symbols.) Provide complete names of sources and mutual funds (do not use ticker symbols.) Provide complete names of sources and mutual funds (do not use ticker symbols.) Provide name of the investment, possible of the second of the restriction hoding the necessary has been ticken and strict the necessary ticken the necessary of the necessary ticken the restriction in floors. Provided or other test provides and comment provides, and any financial instruction. Provided or other ticken ticken	Exclude: Your personal residence, including second hornes and vacation hornes (unless there was rental income during the reporting period); any deposits totaling \$6,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent chitd (DC), or is jointly held with your spouse (JT), in the optional column on the far left.	TRUST - IRA: \$15,001 - DIVIDENDS me Opps-A \$50,000	JT Residential rental property, \$100,001 - RENT \$15,001 - \$50,000 Henderson, NV \$250,000	SP Ameriprise Cash \$1,001 - DIVIDENDS NONE \$15,000	SP RIVERSOURCE Details Follow: N/A N/A RETIREMENT ADVISOR VARIABLE ANNUITY:	SP 1. Invesco Global Health II \$1,001 - None NONE \$15,000	SP 2. MFS Utilities Svc Cl \$1,001 - None NONE \$15.000
	BLOCK D	sthat do specific terrate tax- sepecific terrate tax- sepony of septial d, must be check the capital d, must be check the seamed				01 - \$50,000				
Page 2 of 10	BLOCK E	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year. P(reinvest)			P(reinvest)			7		

SP SP SP SP SP RIVERSOURCE RETIREMENT ADVISOR ADVANTAGE PLUS 6. COL VP Div Eq Inc Cl3 5. COL Global Infl Prot CI3 4. COL High Yield Bnd Cl3 3. COL VP Global Bnd Cl3 \$1,001 -\$15,000 \$1,001 -\$15,000 \$1,001 -\$15,000 \$1,001 -\$15,000 Details Follow: ne Eni F. H. Faleomavaega None None None None N NONE NONE NONE NONE Page 3 of 10

	VARIABLE ANNUITY:				
SP	1. Invesco Global Health II	\$15,001 - \$50,000	None	NONE	
SP	2. MFS Utilities Svc CI	\$15,001 - \$50,000	None	NONE	
SP	3. COL VP Global Bnd Cl3	\$15,001 - \$50,000	None	NONE	
SP	4. COL High Yield Bnd Cl3	\$15,001 - \$50,000	None	NONE	
SP	5. COL Global Infl Prot Cl3	\$15,001 - \$50,000	None	NONE	
SP	6. COL VP Div Eq Inc Cl3	\$1,001 - \$15,000	None	NONE	
SP	Capital One Bank (USA), N.A.: Money market account	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
SP	USBank, N.A.: Savings account	\$1,001 - \$15,000	INTEREST	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME SP SP SP SP SP SP SP 4. John Hancock Large Cap Equity Fund (TAGRX) 2. INVESCO Energy Fund-A (IENAX) Market AMERIPRISE TRUST COMPANY - IRA: 5. John Hancock Bond-A (JHNBX) (AIOAX) (SHBAX) 3. Columbia Income Opps-A 6. Wells Fargo High Income-A 1. Ameriprise Insured Money \$1,001 -\$15,000 \$1,001 -\$15,000 \$1,001 -\$15,000 None \$15,001 -\$50,000 \$1 - \$1,000 Details Follow: Name Eni F. H. Faleomavaega None **GAINS** N DIVIDENDS DIVIDENDS/CAP GAINS **DIVIDENDS/CAP DIVIDENDS** DIVIDENDS \$201 - \$1,000 NONE \$1,001 - \$2,500 NONE NONE N N \$201 - \$1,000 P, P(reinvest) P(reinvest) ഗ (part) P(reinvest),S Page 4 of 10

SCHEDULE IV - TRANSACTIONS

Name Eni F. H. Faleomavaega

Page 5 of 10

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,	Asset	Type of Transaction	Capital Gain In Excess of \$2007	Date	Amount of Transaction
	AMERIPRISE TRUST - IRA: Columbia Income Opps-A (AIOAX)	P	A/N	Monthly	\$1,001 - \$15,000
SP	RIVERSOURCE RETIREMENT ADVISOR VARIABLE ANNUITY: RiverSource Life Insurance	P	N/A	Monthly	\$1,001 - \$15,000
SP	AMERIPRISE TRUST COMPANY - IRA: Columbia Income Opps-A (AIOAX)	ס	N/A	Monthly	\$1,001 - \$15,000
SP	AMERIPRISE TRUST COMPANY - IRA: John Hancock Large Cap Equity Fund (TAGRX)	S	No	10-6-11	\$1,001 - \$15,000
SP	AMERIPRISE TRUST COMPANY - IRA: John Hancock Bond-A (JHNBX)	Р	N/A	10-6-11	\$1,001 - \$15,000

SCHEDULE V - LIABILITIES

Name Eni F. H. Faleomavaega

Page 6 of 10

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. NOTE: Pending legislation may require Members to report mortgates on personal residences.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
	Congressional Federal Credit Union: VISA Card	December 2011	Credit Card	\$10,001 - \$15,000
	USAA MasterCard	December 2011	Credit Card	\$15,001 - \$50,000
JT	Aurora Home Loans	November 2006	Mortgage on residence, Provo, UT	\$250,001 - \$500,000
JT	Wells Fargo Bank, N.A.	December 2007	Mortgage on personal residence, Provo, UT (not rented)	\$100,001 - \$250,000
JT	Bank of America, N.A.	March 2005	Mortgage on personal residence, Alexandria, VA (not rented)	\$100,001 - \$250,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Eni F. H. Faleomavaega Page 7 of 10

spouse or dependent child that is totally independent of his or her relationship to you. 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 sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under 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 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 Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$350 received by you,

3 Days	Υ	_ <	~	DC - Astana, Katzakhstan - Bahrain - DC	Oct. 9-18	Bahrain (MECEA, as administered by HDI)
None	Z	~	~	Ulaanbaatar, Mongolia - Beijing, China - DC	Aug. 28- Sep. 5	PRC (MECEA, as administered by US-ASIA Institute)
None	Z	Y	Υ	Salt Lake City-Ulaanbaatar, Mongolia	Aug. 23-28	Global Peace Festival Foundation
None	Z	٨	Υ	May 15-20 DC - Seoul, Korea - Pago Pago, AS	May 15-20	ROK (MECEA)
Days not at sponsor's expense	Was a Family Food? Member Included? (Y/N) (Y/N)	Food? (Y/N)	Lodging? (Y/N)	Point of Departure– Destination–Point of Return	Date(s)	Source

SCHEDULE VIII - POSITIONS

Name Eni F. H. Faleomavaega

Page 8 of 10

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.

President & Director The Fale	Position	
The Faleomavaega Community Service Foundation (uncompensated)	Name of Organization	

FOOTNOTES	S	Name Eni F. H. Faleomavaega	Page 9 of 10
 Number	Section / Schedule	Footnote	This note refers to the following item
 	Schedule III	Ameriprise Trust Company 10 Ameriprise Financial Center Minneapolis, MN 55474-9900	Ameriprise Trust: IRA accounts
 N	Schedule III	This is a variable annuity with no owner directed management. Issuer: RiverSource Life Insurance Company, 9549 Ameriprise Financial Center, Minneapolis, MN 55474	RiverSource Retirement Advisor Variable Annuity
 ယ	Schedule III	This is a variable annuity with no owner directed management. Issuer: RiverSource Life Insurance Company, 9549 Ameriprise Financial Center, Minneapolis, MN 55474	RiverSource Retirement Advisor Advantage Plus VA
4	Schedule III	COL VP Global Bnd Cl3 was previously RVS VP Global Bnd Cl3	RiverSource Retirement variable annuities
 5	Schedule III	COL High Yield Bnd Cl3 was previously RVS VP High Yield Bd Cl3	RiverSource Retirement variable annuities
 6	Schedule III	COL Global Infl Prot Cl3 was previously RVS Global Infl Prot Cl3	RiverSource Retirement variable annuities
 7	Schedule III	COL VP Div Eq Inc Cl3 was previously RVS Div Eq Inc Cl3	RiverSource Retirement variable annuities
8	Schedule III	Partial sale to pay fees below Schedule IV reporting criteria: Columbia Income Opps-A	Ameriprise Trust Company - IRA (SP)
 9	Schedule IV	Dividends and capital gain distributions reinvest automatically in both the member's and spouse's IRA accounts	Columbia Income Opportunity Fund-A (AIOAX)
 10	Schedule IV	Systematic investment.	RiverSource Retirement Advisor Variable Annuity
 11	Schedule V	The member and his wife co-signed this note for their daughter on 11/06/2006.	Aurora Home Loans

FOOTNOTES	Ö		Name Eni F. H. Faleomavaega		Page 10 of 10
Number	Section / Schedule		Footnote	This the fo	This note refers to the following item
12	Schedule VIII	The Faleomavaega	The Faleomavaega Community Service Foundation has limited activity.	Presid	President & Director
13	Schedule VII	The family member	The family member's travel was at own expense.	Bahra admin	Bahrain (MECEA, as administered by HDI)