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	Yes _ No 🗸	child	actions, or liabilities of a spouse or dependent child	arned" income, trans	Have you excluded from this report any other assets, "unearned" income, transactions, or lecause they meet all three tests for exemption?	Exemptions Have you exc	Ex
	Yes : No •	epted endent	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?	Committee on Stand is report details of su	ding "Qualified Blind Trusts" approved by the not be disclosed. Have you excluded from th	Trusts Details regar trusts" need child?	Tru
	SN	ESTIO	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS	ORMATION	E, DEPENDENT, OR TRUST INF	USION OF SPOUSE	EXCL
	į	, e	schedule attached for each "Yes" response	sche	edule V.	If yes, complete and attach Schedule V.	If yo
	the appropriate	ed and t	Each question in this part must be answered and the appropriate	No Fach	thave any reportable liability (more Yes	Did you, your spouse, or a dependent child than \$10,000) during the reporting period?	V. than
		!	If yes, complete and attach Schedule IX.	If yes,	edule IV.	If yes, complete and attach Schedule IV.	If ye
	Yes No 🗸	n outside	Did you have any reportable agreement or arrangement with an outside entity?	No VIX. entity?	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting Yes	you, your spouse, or dependent ortable asset in a transaction excord?	IV. reporta
	: 		If yes, complete and attach Schedule VIII.	If yes,	edule III.	If yes, complete and attach Schedule III.	If yo
	Yes No	filing in the	Did you hold any reportable positions on or before the date of filing in the current calendar year?	No VIII. current	rold any reportable asset worth Yes	Did you, your spouse, or a dependent child more than \$200 in the reporting period or I more than \$1,000 at the end of the period?	III. mor
_	 - -		If yes, complete and attach Schedule VII.	If yes,	edule II.	If yes, complete and attach Schedule II.	_ If ye
	or Yes No V	able travel than \$305	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$305 from one source)?	No VII. reimbui	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?	Did any individual or organization make a donation to charity in you for a speech, appearance, or article in the reporting period?	li. you
	:	!	If yes, complete and attach Schedule VI.	If yes, co	edule I.	If yes, complete and attach Schedule I.	If ye
	Yes No ✓	able gift in otherwise	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$305 and not otherwise exempts)	No VI. the rep	g., salaries or fees) of \$200 Yes ✓	Did you or your spouse have "earned" income (e. or more from any source in the reporting period?	l. orn
			SN	THESE QUESTIONS	ANSWER EACH OF	PRELIMINARY INFORMATION	PREL
	more than 30 days late.	more late.	l ermination Date:	Termination	Amendment	ort Annual (May 15)	Report Type
	anyone who files	anyo		:			
A STATEMENT	A \$200 penalty shall be assessed against	A \$20 be as	Employing Office:	Officer Or Employee	Member of the U.S. State: IA House of Representatives District: 01	·	Filer Status
	(Office) Use வரி) பூர்க்க	(C)	(Daytime Telephone)	. :	(Full Name)		
PH 2: 32	CUUB MAY 15 PH 2: 32	76	202-225-2911	; ;	Bruce L. Braley		
JINS, Souring	TO THE DESCRIPTION OF THE PERSON OF THE PERS						
	LEGISI ATIVE		FORM A Page 1 of 4 For use by Members, officers, and employees	0)	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2007	IED STATES HO	FINAN
		لـ				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- - -

SCHEDULE I - EARNED INCOME

Name Bruce L. Braley

Page 2 of 4

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.

Waterloo Community School District	Source
Spouse Salary	Туре
N/A	Amount

Calamos Growth Fund	Calamos Growth & Income Fund Class A	Baron Asset Fund	American Funds Income Fund of America Class F	American Funds Growth Fund of America Class F	Allianz NF J Dividend Value Fund Class A	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.	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.	Asset and/or Income Source 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.	
None	\$1,001 - \$15,000	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$1,001 - \$15,000			PLOCK B Year-End 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 and is included only because it is generated income, the value should be "None."	Name Bruce L. Braley
None/CAPITAL GAINS	DIVIDENDS/CAPI \$1,001 - \$2,500 TAL GAINS	CAPITAL GAINS	DIVIDENDS/CAPI TAL GAINS	DIVIDENDS/CAPI TAL GAINS	DIVIDENDS/CAPI TAL GAINS			Type of Income Check all columns that apply. Check "None" if asset did not generate any income during the calendar year. If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	Sraley
\$2,501 - \$5,000	\$1,001 - \$2,500	\$201 - \$1,000	\$2,501 - \$5,000	DIVIDENDS/CAPI \$5,001 - \$15,000 TAL GAINS	\$201 - \$1,000			Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income. Check "None" if no income was earned.	
W	! : · !	ס	; .	ļ	! 			BLOCK E Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.	Page 3 of 4

SCHED	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Bruce L. Braley	3raley		Page 4 of 4
	Columbia Mid Cap Value Fund A	\$15,001 - \$50,000	DIVIDENDS/CAPI TAL GAINS	\$201 - \$1,000	 -
	Davis New York Venture Fund Class A	\$100,001 - \$250,000	DIVIDENDS	\$1,001 - \$2,500	! ; ;
	Davis Opportunity Fund	None	None	NONE	o
	Fam Value Fund	None	None	NONE	o
	FT Templeton Global Bond A	\$1,001 - \$15,000	DIVIDENDS/CAPI TAL GAINS	\$201 - \$1,000	
	Hartford Mid Cap Fund Class A	\$15,001 - \$50,000	DIVIDENDS/CAPI TAL GAINS	\$2,501 - \$5,000	
	Lord Abbett Affiliated Fund	None	DIVIDENDS/CAPI TAL GAINS	\$1,001 - \$2,500	S
	Oppenheimer Global Fund Class A	\$15,001 - \$50,000	DIVIDENDS/CAPI TAL GAINS	\$1,001 - \$2,500	
	Pepsico, Inc.	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	:
	T Rowe Price Equity Income Fund	\$1,001 - \$15,000	DIVIDENDS/CAPI TAL GAINS	\$201 - \$1,000	 - - -
_	T Rowe Price Growth Stock Fund, Inc.	\$1,001 - \$15,000	DIVIDENDS/CAPI TAL GAINS	\$201 - \$1,000	
	Thornburg International Value Fund Class A	\$15,001 - \$50,000	DIVIDENDS/CAPI TAL GAINS	\$201 - \$1,000	P(add)
	Thornburg International Value Fund Class I	None	DIVIDENDS/CAPI TAL GAINS	\$1,001 - \$2,500	· σ
	UBS RMA Money Market Portfolio	\$1,001 - \$15,000 DIVI	DIVIDENDS	\$1 - \$200	