

UNITED STATES HOUSE OF REPRESENTATIVES
2008 FINANCIAL DISCLOSURE STATEMENT
For 2007 Calendar Year Reporting Period

Form A
 For use by Members, officers, and employees

HAND DELIVERED

Janice D. Skutovsky

(Full Name)

(847) 612-5673

(Daytime Telephone)

LEGISLATIVE RESOURCE CENTER

2009 MAY 15 PM 5:06

OFFICE OF THE CLERK
 HOUSE OF REPRESENTATIVES (Use Only)

MC

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: <u>Illinois</u>	District: <u>9</u>	<input type="checkbox"/> Officer or Employee	Employing Office:	Termination Date:
Report Type	<input checked="" type="checkbox"/> Annual (May 15)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination			

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? If yes, complete and attach Schedule I.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VII. 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 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 \$305 from one source)? If yes, complete and attach Schedule VII.	Yes <input checked="" type="checkbox"/> No <input 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 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"/>
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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Name Tanice D. Schukowsky

Page 3 of 11

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

[illegible]

Page 4 of 11

For additional assets and unearned income, use next page.

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Name Tanice D. Schafowsky

Page 5 of 11

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Year-End Value of Asset							BLOCK C Type of Income				BLOCK D Amount of Income											BLOCK E Transaction
SP, DC, JT		A None	C \$1,001 – \$15,000	E \$50,001 – \$100,000	G \$250,001 – \$500,000	I \$1,000,001 – \$5,000,000	K \$25,000,001 – \$50,000,000	DIVIDENDS	RENT	CAPITAL GAINS	Other Type of Income (Specify)	I None	II \$1 – \$20	III \$201 – \$1,000	IV \$1,001 – \$2,500	V \$2,501 – \$5,000	VI \$5,001 – \$15,000	VII \$15,001 – \$50,000	VIII \$50,001 – \$100,000	IX \$100,001 – \$1,000,000	X \$1,000,001 – \$5,000,000	XI Over \$5,000,000	P, S, E	
	American High Interest Trust Class A		X											X										
	Intermediate Bond Fund Amer.		X											X										
	Morgan Stanley - Dean Witter Tax Exempt Securities Trust Class I							/																
	Openheimer & Co. Advantage Primary Liquidity Fund (Cash/Act)		X																					
JT	Putnam College Advantage 1998		X									X												
JT	" " " 2000		X									X												
JT	" " " 2001		X									X												
JT	" " " 2001		X									X												
	Lo Salle Banking - checking		X																					
	Northwestern Mutual Money Market (Deposit held at NMT Bank)		X																					
SP	Private Bank - checking		X																					
SP	AG Edwards Deposit Program																							
SP	Thornburg Mortgage, Inc.		X																					
SP	Putnam Equity, Inc.		X																					
SP	Thornburg Investment Trust																							
SP	AMCAP Fund Inc.														X									
SP	CACAMOS Investments		X																					
SP	Hartford Mutual Funds		X																					

Page 6 of 11[illegible]

SCHEDULE IV—TRANSACTIONS

Name Janice D. Schutowsky Page 7 of 11

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.

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.				Type of Transaction	Date	Amount of Transaction										
SP, DC, JT	Asset		SALE	(MO/DAY/YR) or Quarterly, Monthly, or Bi-weekly, if applicable	A	B	C	D	E	F	G	H	I	J	K	
SP	Example: Mega Corporation Common Stock (partial sale)		X	10-12-07			X									
SP	Putnam Equity Inc. (Partial Sale)		X	12-04-07												
SP	MFS Series Trust 1		X	10-29-07												
SP	AG Edwards Deposit Program - inherited			8-28-07												
SP	Thornburg Mortgage, Inc. - inherited			8-28-07												
SP	Putnam Equity, Inc. - inherited			8-28-07			X									
SP	Thornburg Investment Trust - inherited			8-28-07			X									
SP	AMCAP Fund Inc. - inherited			8-28-07			X									
SP	Calamos Investments - inherited			8-28-07												
SP	Hartford Mutual Funds - inherited			8-28-07												
SP	Putnam International Mut. Funds - inherited			8-28-07												
SP	MFS Series Trust 1			8-28-07												

Name Janice D. Schakowsky Page 8 of 11

[illegible]

Report the source, a brief description, and the value of all gifts totalling more than \$305 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 \$122 or less need not be added towards the \$305 disclosure threshold.

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

[illegible]

Use additional sheets if more space is required.

Page 9 of 11

Source	Date(s)	City of Departure—Destination— City of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Number of days <u>not</u> at sponsor's expense
Chicago Chamber of Commerce	Mar. 2	DC—Chicago—DC	N	N	N	None
Roycroft Corporation	Aug. 6-11	DC—Los Angeles—Cleveland	Y	Y	Y	2 Days

[illegible]

SCHEDULE VIII—POSITIONS

Name Janice D. Schakowsky Page 10 of 11

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 non profit 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; and positions solely of an honorary nature.

Position	Name of Organization
Advisory Board	Wilber Wright College - HIV/STI Prevention Education
Founding Board of Directors	Illinois Women's Institute for Leadership
Hon. Board of Directors	Friends of Bad Kadiwin
Hon. Committee	Women Employed, Working Women for Change Initiative

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

Name Janice D Schatowsky	Page 11 of 11
-----------------------------	------------------

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities; and positions solely of an honorary nature

Position	Name of Organization
Policy Council	Citizen Action/ Illinois
Advisory Board	Midwest Palliative and Hospice Care Center
"	Interfaith House
"	Between Friends
"	Ted Fund
"	Women's Treatment Center

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.

[illegible]