

UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT

FORM A
For use by Members, officers, and employees

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HAND DELIVERED

LEGISLATIVE RESOURCE CENTER

MICHAEL H. MICHAUD
(Full Name)

202-225-6306
(Daytime Telephone)

2013 APR 24 PM 1:57
(Office Use Only)

MC

Filer ☒ Member of the U.S. House of Representatives State: ME District: 02

☐ 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 \$350 and not otherwise exempt)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, complete and attach Schedule I.		VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 from one source)?	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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, complete and attach Schedule II.		IX. Did you have any reportable agreement or arrangement with an outside entity?	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?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
If yes, complete and attach Schedule III.			
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 checked="" type="checkbox"/> No <input type="checkbox"/>		
If yes, complete and attach Schedule IV.			
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.			

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

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

IPO-- Did you purchase any shares that were allocated as a part of an Initial Public Offering?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Trusts-- 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 <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 Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

SCHEDULE I - EARNED INCOME

Name MICHAEL H. MICHAUD

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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
International Association of Machinists	Pension Income	\$2,232

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name MICHAEL H. MICHAUD

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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
<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 reportable asset or source of income which generated more than \$200 in "unearned" income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use ticker symbols.)</p> <p>For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.</p> <p>For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and a city and state.</p> <p>For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.</p> <p>Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 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.</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 with your spouse (JT), in the optional column on the far left.</p> <p>For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.</p>	<p>Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used.</p> <p>If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."</p> <p>* This column is for assets held solely by your spouse or dependent child.</p>	<p>Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.</p>	<p>For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below.</p> <p>Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.</p> <p>* This column is for income generated by assets held solely by your spouse or dependent child.</p>	<p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
<p>Michaud & Michaud Partnership (50% interest), properties as follows</p>				
<p>109 Main Street, East Millinocket, ME</p>	<p>\$15,001 - \$50,000</p>	<p>RENT</p>	<p>\$5,001 - \$15,000</p>	
<p>111 Main Street, East Millinocket, ME</p>	<p>\$15,001 - \$50,000</p>	<p>RENT</p>	<p>\$5,001 - \$15,000</p>	
<p>6.5 acres of land, Medway, ME</p>	<p>\$1,001 - \$15,000</p>	<p>None</p>	<p>NONE</p>	
<p>Ameriprise One Financial accounts as follows:</p>				
<p>Money Market</p>	<p>\$15,001 - \$50,000</p>	<p>INTEREST</p>	<p>\$1 - \$200</p>	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name MICHAEL H. MICHAUD

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PIMCO Total Return - C	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
Col Port Bldr Mod - A	None	None	\$201 - \$1,000	S
Columbia Capital Alloc Moderate CI A	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	P
Columbia Capital Alloc Conservative CI L	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	P
Ameriprise Variable Universal Life as follows:				
Fixed Account money market	\$1 - \$1,000	INTEREST	\$1 - \$200	
VP Mod Aggressive C-12	\$50,001 - \$100,000	DIVIDENDS	\$201 - \$1,000	P
IRA Ameriprise as follows:		TAX-DEFERRED		
Midcap Value A	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
J Hancock GLB OPPS - A	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
Pimco Total Return - D	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
Templeton Global Bond - A	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
J Hancock High Yield - A	\$1,001 - \$15,000	TAX-DEFERRED	NONE	
Columbia Value & Restructuring	\$1 - \$1,000	TAX-DEFERRED	NONE	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name MICHAEL H. MICHAUD

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Fidelity Advisor High Income Advantage CI A	\$1,001 - \$15,000	TAX-DEFERRED	NONE	P
Ameriprise Roth Conversion IRA as follows:		TAX-DEFERRED		
Fid Adv High Inc Adv - A	\$15,001 - \$50,000	TAX-DEFERRED	NONE	
Col Port Bldr Mod Agg - A	\$15,001 - \$50,000	TAX-DEFERRED	NONE	
M&M Partnership, Augusta, ME (50% interest)	\$50,001 - \$100,000	RENT	\$201 - \$1,000	
Maine State Retirement Pension Plan	\$15,001 - \$50,000	None	NONE	
East Mill FCU accounts	\$1,001 - \$15,000	INTEREST	\$1 - \$200	

SCHEDULE IV - TRANSACTIONS

Name MICHAEL H. MICHAUD

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Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.

* This column is for assets solely held by your spouse or dependent child.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	Col Port Bldr Mod - A	S	No	8-27-12	\$15,001 - \$50,000
	Columbia Capital Alloc Conservative CI L	P	N/A	8-27-12	\$15,001 - \$50,000
	Columbia Capital Alloc Moderate CI A	P	N/A	8-27-12	\$15,001 - \$50,000
	Columbia Value & Restructuring	P	N/A	8-27-12	\$1,001 - \$15,000
	Fidelity Advisor High Income Advantage CI A	P	N/A	8-27-12	\$1,001 - \$15,000
	VP Mod Aggressive C-12	P	N/A	10-2-12	\$1,001 - \$15,000

SCHEDULE IX - AGREEMENTS

Name MICHAEL H. MICHAUD

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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
June 2011	International Association of Machinists Pension Plan	National Pension Plan
Dec 2000	Maine State Employees Retirement Plan	Maine State Retirement