

UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT

FORM A
For use by Members, officers, and employees

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John J. Duncan, Jr.
(Full Name)

202-225-5435
(Daytime Telephone)

2010 MAY 17 AM 9:06

U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

LEGISLATIVE RESOURCE CENTER

AND
VERED

Filer Status	✓ Member of the U.S. House of Representatives	State: TN	Officer Or Employee	Employing Office:
Report Type	✓ Annual (May 15)	Amendment	Termination	Termination Date:
<p>A \$200 penalty shall be assessed against anyone who files more than 30 days late.</p>				

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 ✓	No	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	No ✓
II. If yes, complete and attach Schedule I. 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	No ✓	VII. If yes, complete and attach Schedule VI. 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	No ✓
III. If yes, complete and attach Schedule II. Did you, your spouse, or a dependent child receive "unearned" income of more than \$1,000 at the end of the period?	Yes ✓	No	VIII. If yes, complete and attach Schedule VII. Did you hold any reportable positions on or before the date of filing in the current calendar year?	Yes	No ✓
IV. If yes, complete and attach Schedule III. 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 ✓	No	IX. If yes, complete and attach Schedule VIII. Did you have any reportable agreement or arrangement with an outside entity?	Yes	No ✓
V. If yes, complete and attach Schedule IV. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	Yes	No ✓	X. If yes, complete and attach Schedule IX.		

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	No ✓
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	No ✓

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
Lincoln Memorial University Director of Major Gifts and Contributions	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>
<p>S-B Hilliard Lyons-IRA Fidelity Value Fund</p>	<p>\$1,001 - \$15,000</p>	<p>Dividends</p>	<p>\$1 - \$200</p>	
<p>S-B Hilliard Lyons-IRA Fidelity Fund Inc.</p>	<p>\$1,001 - \$15,000</p>	<p>Dividends</p>	<p>\$1 - \$200</p>	
<p>S-B Hilliard Lyons-IRA Income Fund of America</p>	<p>\$15,001 - \$50,000</p>	<p>Div.-Cap.G.</p>	<p>\$1,001 - \$2,500</p>	
<p>S-B Hilliard Lyons-IRA BB&T Stock</p>	<p>\$15,001 - \$50,000</p>	<p>Dividends</p>	<p>\$1,001 - \$2,500</p>	
<p>State of TN. Pension Fund</p>	<p>\$1,001 - \$15,000</p>	<p>N/A</p>	<p>N/A</p>	
<p>S-B Hilliard Lyons-MM Good Gov. Fund</p>	<p>\$1,001 - \$15,000</p>	<p>Interest</p>	<p>\$1 - \$200</p>	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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Congressional Credit Un. Checking & Savings	\$15,001 - \$50,000	Interest	\$201 - \$1,000	
BB&T Stock	\$50,001 - \$100,000	Dividends	\$2,501 - \$5,000	S
Toronto Dominion-Stock	None	Capital Gains	\$2,501 - \$5,000	S
Pfizer Inc. - Stock IRA	\$1,001 - \$15,000	Dividends	\$1 - \$200	
Home Depot-Stock	None	None	NONE	S
Citigroup Cap. VIII-Stock	\$15,001 - \$50,000	Dividends	\$1,001 - \$2,500	
Southern Company-Stock	None	Capital Gains	\$5,001 - \$15,000	S
BankEast Corp.-Stock	\$15,001 - \$50,000	None	NONE	
Citibank So. Dakota MM-IRA	None	Interest	\$1 - \$200	S
BankEast-CD	\$15,001 - \$50,000	Interest	\$1,001 - \$2,500	S(part)
Gap Inc.-Stock	\$1,001 - \$15,000	Dividends	\$1 - \$200	
International Paper Co.-Stock	None	None	NONE	S
Walgreen Company-Stock	\$1,001 - \$15,000	Dividends	\$1 - \$200	
J.M. Smucker Co.-Stock	None	Capital Gains	\$1,001 - \$2,500	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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Philip Morris Intl. Inc.-Stock	\$1,001 - \$15,000	Dividends	\$1 - \$200	
Permian Basin Royalty Trust	\$1,001 - \$15,000	Dividends	\$201 - \$1,000	
Northrop Grumman Corp.-Stock	\$1,001 - \$15,000	Dividends	\$1 - \$200	
Altria Group, Inc.-Stock	\$1,001 - \$15,000	Dividends	\$1 - \$200	
Lowes Companies-Stock IRA	\$1,001 - \$15,000	Dividends	\$1 - \$200	
Manitowoc Company, Inc.- Stock	None	Capital Gains	\$201 - \$1,000	S
Host Hotels & Resorts-Stock	\$1,001 - \$15,000	Dividends	\$1 - \$200	S(part)
Fairholme Funds Inc. Mutual Funds	None	None	NONE	S
Boeing Company-Stock	\$1,001 - \$15,000	Dividends	\$201 - \$1,000	
ALCOA Inc. - Stock	None	Capital Gains	\$1,001 - \$2,500	S
Nuveen Multst Tr. III Mutual Fund	None	Capital Gains	\$201 - \$1,000	S
Coca-Cola - Stock	None	Capital Gains	\$1,001 - \$2,500	S
Oshkosh Corp.-Stock	None	Capital Gains	\$5,001 - \$15,000	S
Hilliard Lyons -IRA Good Govt. Fund	\$15,001 - \$50,000	Interest	\$201 - \$1,000	P

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
	Hilliard Lyons -IRA	P		4-10-09	\$15,001 - \$50,000
	Good Govt. Fund				
	Alcoa Inc.-Stock	S	Yes	8-10-09	\$1,001 - \$15,000
	Fairholm Funds Inc. Mutual Funds	S	No	8-11-09	\$1,001 - \$15,000
	Host Hotels &Resorts-Stock	S(part)	No	8-11-09	\$1,001 - \$15,000
	International Paper Co.-Stock	S	No	8-11-09	\$1,001 - \$15,000
	Manitowoc Company Inc.-Stock	S	Yes	8-11-09	\$1,001 - \$15,000
	Oshkosh Corp.-Stock	S	Yes	8-11-09	\$1,001 - \$15,000
	J.M. Smucker Company-Stock	S	Yes	8-10-09	\$1,001 - \$15,000
	Toronto Dominion	S	Yes	9-17-09	\$1,001 - \$15,000
	Home Depot-Stock	S	No	8-10-09	\$1,001 - \$15,000
	Southern Company-Stock	S	Yes	8-10-09	\$1,001 - \$15,000

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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
	Coca-Cola-Stock	S	Yes	8-10-09	\$15,001 - \$50,000
	Nuveen Multst Tr. III Mutual Fund	S	Yes	8-11-09	\$15,001 - \$50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

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Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 received by you, 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 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 sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under 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 spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
Assoc. Gen. Con of Mississippi	Feb.5-6	DC-Panama City-Knoxville	Y	Y	N	None