

# UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2007

**FORM A**  
For use by Members, officers, and employees

**HAND DELIVERED**

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U.S. HOUSE OF REPRESENTATIVES  
RESOURCE CENTER

Timothy Vincent Johnson

(Full Name)

212-225-2371

(Daytime Telephone)

2009 MAY -9 PM 3:35

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U.S. HOUSE OF REPRESENTATIVES  
RESOURCE CENTER

MC

**Filer Status**  
☒ Member of the U.S. House of Representatives  
State: IL District: 15

☐ Officer Or Employee  
Employing Office:

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

**Report Type**  
☒ Annual (May 15) ☐ Amendment ☐ Termination  
Termination Date:

## 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? <b>If yes, complete and attach Schedule I.</b>	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 \$305 and not otherwise exempt)? <b>If yes, complete and attach Schedule VI.</b>	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? <b>If yes, complete and attach Schedule II.</b>	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)? <b>If yes, complete and attach Schedule VII.</b>	Yes <input type="checkbox"/> No <input checked="" 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? <b>If yes, complete and attach Schedule III.</b>	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? <b>If yes, complete and attach Schedule VIII.</b>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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? <b>If yes, complete and attach Schedule IV.</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? <b>If yes, complete and attach Schedule IX.</b>	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? <b>If yes, complete and attach Schedule V.</b>	Yes <input type="checkbox"/> No <input checked="" 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

<b>Trusts--</b> 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"/>
<b>Exemptions--</b> 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"/>

**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
State of Illinois	Legislative Pension	\$62,674

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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BLOCK A 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.  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.  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.	BLOCK 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."	BLOCK C 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)	BLOCK D 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.	BLOCK E Transaction  Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
1st Mid-Illinois Bank & Trust Certificate of Deposit	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
Bank of Rantoul Certificate of Deposit	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
Busey Bank of St. Joseph Certificate of Deposit	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
Central Illinois Bank of Sidney Certificate of Deposit	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
First National Bank in Paxton Certificate of Deposit	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
First National Bank of Ogden Certificate of Deposit	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	

**SCHEDULE III - ASSETS AND "UNEARNED" INCOME**

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Longview State Bank Certificate of Deposit	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
Main Street Bank & Trust Certificate of Deposit	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
Philo Exchange Bank Certificate of Deposit	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
Sidell State Bank Certificate of Deposit	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
Tuscola National Bank Certificate of Deposit	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
Villa Grove State Bank Certificate of Deposit	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
AMCAP Fund	\$15,001 - \$50,000	CAPITAL GAINS	\$1,001 - \$2,500	
AMCAP Fund	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	
Capmark Bk Midvale Utah Certificate of Deposit	\$15,001 - \$50,000	None	NONE	P
DWS High Income Fund	\$15,001 - \$50,000	DIVIDENDS	\$2,501 - \$5,000	
Eaton Vance Tax Managed Growth	None	CAPITAL GAINS	\$5,001 - \$15,000	S
Farm Bur Bk Certificate of Deposit	\$50,001 - \$100,000	INTEREST	\$2,501 - \$5,000	
Federal Hm Ln Mtg Corp Government Bond	\$100,001 - \$250,000	INTEREST	\$2,501 - \$5,000	
Federal Home Ln Bks Cons Bds Government Bond	\$100,001 - \$250,000	INTEREST	\$2,501 - \$5,000	

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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Fidelity Advisor Diversified International	\$100,001 - \$250,000	CAPITAL GAINS	\$15,001 - \$50,000	
Fidelity Advisor Diversified International	\$100,001 - \$250,000	DIVIDENDS	\$2,501 - \$5,000	
Fidelity Advisor Equity Income	\$100,001 - \$250,000	CAPITAL GAINS	\$15,001 - \$50,000	
Fidelity Advisor Equity Income	\$100,001 - \$250,000	DIVIDENDS	\$1,001 - \$2,500	
Fidelity Advisor Leveraged Company	\$50,001 - \$100,000	CAPITAL GAINS	\$1,001 - \$2,500	P
Fidelity Advisor Leveraged Company	\$50,001 - \$100,000	DIVIDENDS	\$201 - \$1,000	P
Fidelity Advisor Mid Cap Stock	\$50,001 - \$100,000	CAPITAL GAINS	\$5,001 - \$15,000	
Fidelity Advisor Mid Cap Stock	\$50,001 - \$100,000	DIVIDENDS	\$2,501 - \$5,000	
Fidelity Advisor New Insights	\$50,001 - \$100,000	CAPITAL GAINS	\$1,001 - \$2,500	
Fidelity Advisor Small Cap Fund	\$50,001 - \$100,000	CAPITAL GAINS	\$1,001 - \$2,500	
Fidelity Advisor Small Cap Value	\$50,001 - \$100,000	CAPITAL GAINS	\$2,501 - \$5,000	
Hartford Capital Appreciation Fund	\$15,001 - \$50,000	CAPITAL GAINS	\$1,001 - \$2,500	
Hartford Capital Appreciation Fund	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
I Shares TRS Russell 2000 Index Fund	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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Sun America Money Market	None	DIVIDENDS	\$2,501 - \$5,000	S
Dreyfus Cash Mngt Plus Inv Sh	\$50,001 - \$100,000	DIVIDENDS	\$201 - \$1,000	P
Lasalle Bk Midwest Ntl Assn Certificate of Deposit	None	INTEREST	\$2,501 - \$5,000	S
Washington Mut Bk Certificate of Deposit	None	INTEREST	\$5,001 - \$15,000	S
FiServe Securities	None	None	NONE	S
National Financial Services	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	P
Fidelity Advisor Equity Growth	None	CAPITAL GAINS	\$5,001 - \$15,000	S
406 E. Colorado, Urbana, IL House Sale	None	CAPITAL GAINS	\$2,501 - \$5,000	S

# 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 or series of transactions exceeded \$1,000. Include transactions that resulted in a loss. 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. Provide a brief

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Eaton Vance Tax Managed Growth	S	07-17-07	\$50,001 - \$100,000
	Fidelity Advisor Leveraged Company	P	01-16-07	\$50,001 - \$100,000
	Fidelity Advisor Equity Growth	S	01-16-07	\$50,001 - \$100,000