i	Yes No 🗸	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.	sets, "unearned" income, tra	Have you excluded from this report any other assets, "unearned" income, transactions, or because they meet all three tests for exemption? Do not answer "yes" unless you have firs Standards of Official Conduct.	Exemptions-
	t Yes ☐ No ☑	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?	ved by the Committee on Sta ed from this report details of	Details regarding "Qualified Blind Trusts" approtrusts" need not be disclosed. Have you exclud child?	Trusts
	ONS	OR TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS	JST INFORMATION	EXCLUSION OF SPOUSE, DEPENDENT, OR TRI	EXCLUSION OF
		schedule attached for each "Yes" response.	sch	If yes, complete and attach Schedule V.	If yes, complete and
	nd the appropriate	Each question in this part must be answered and the appropriate	Yes 🕜 No 🗌 🛮 Ead	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	Did you, your spouse, or a dependent child V. than \$10,000} during the reporting period?
		If yes, complete and attach Schedule IX.	lf ye	if yes, complete and attach Schedule IV.	if yes, complete an
	side Yes 📑 No 🖍	Did you have any reportable agreement or arrangement with an outside entity?	Yes No 📋 IX. entity?	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?	IV. reportable asset in a to period?
		If yes, complete and attach Schedule VIII.	i lf ye	If yes, complete and attach Schedule III.	If yes, complete and
	in the Yes 🗸 No 🗌	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Yes V No VIII. cum	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?	Did you, your spouse, or a dependent child III. more than \$200 in the reporting period or to more than \$1,000 at the end of the period?
		If yes, complete and attach Schedule VII.	If ye	If yes, complete and attach Schedule II.	If yes, complete and
	ravel or \$335 Yes ✓ No	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 VII. reim	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?	II. you for a speech, appe
	ī	If yes, complete and attach Schedule VI.	lf ye	d attach Schedule I.	If yes, complete and attach Schedule I.
<u> </u>	yiftin Yes ∏ No ☑	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 V No VI. the 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?	Did you or your spous I. or more from any sour
		IONS	ANSWER EACH OF THESE QUESTIONS	PRELIMINARY INFORMATION ANSWER EACH	PRELIMINARY I
	more than 30 days late.	Termination Date: mu	☐ Termination	Annual (May 15)	Report Type
	be assessed against	The state of the s	Employee	House of Representatives District: 3rd	S
EMIATIVES	A \$200 penalty shall Emiliarives	Employing Office:	☐ Officer Or	Member of the U.S. State: CT	Filer V
THA MA	(Office Use Only)	(Daytime Telephone)		(Full Name)	,
Э. Л	2009 MAY 15 PH 2: 55	202-225-3661		Rosa L. DeLauro	
CE CENTER	TO SUATIVE RESOURCE CENTER				•
TIMEU	HARD WILLTLIEU	For use by Members, officers, and employees		CAENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT	CAENDAR YEAR
		FORM A Page 1 of 14	TATIVES	UNITED STATES HOUSE OF REPRESENTATIVES	UNITED STAT

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SCHEDULE I - EARNED INCOME

Name Rosa L. DeLauro

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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 Greenberg Quinlan Rosner Research, Inc. Spouse Salary N/A	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Spouse Salary	Source	Туре	Amount
	Greenberg Quinlan Rosner Research,Inc.	Spouse Salary	N/A

					
SP		T	JT	ΤŪ	ASSI Identify (a) ea a fair market and (b) any of than \$200 in ' land, provide mutual funds retirement pk in which you investments), in the accoun plans that are and its value that is not pul its activities, information, s Exclude: You debt owed to parent or sibll savings accou Government I If you so choo that of your s in the optiona
Greenberg Quinlan Rosner Research Inc. 67% Owner 10 G Street, NE WDC 20002	Citizens Bank-Scholarships	Chase Home Finance-Escrow	Bank of America Checking	Bank of America Checking	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.
\$5,000,001 - \$25,000,000	\$1,001 - \$15,000	\$15,001 - \$50,000	\$1,001 - \$15,000	\$15,001 - \$50,000	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 "Nome."
See Statement I	None	INTEREST	INTEREST	None	BLOCK C Type of Income 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.
NONE	NONE	\$1 - \$200	\$1 - \$200	NONE	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 lRAs, 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.
· ·		hu 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	•		BLOCK E Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.

Polling/Consulting

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ASSETS
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SP Sheet Value JH Rtrmt-Pimco Total Return JH Rtrmt-Int'l Value Fund JH Rtrmt-DWS RREEF Real Estate Greenberg Research Inc. 100% Owner 10 G Street,NE WDC 20002 JH Rtrmt-Mutual Beacon JH Rtrmt-Lord Abbett All Value JH Rtrmt-Lifecycle 2015 JH Rtrmt-Jennison Growth JH Rtrmt-Franklin Balance JH Rtrmt-All Cap Value Fund Growth JH Rtrmt-AIM Small Cap JH Rtrmt Small Cap Index Fund Strategic Consulting JH Rtrmt-Lord Abbett Mid Cap None \$250,001 -\$500,000 None \$1,001 - \$15,000 | See Statement II Name Rosa L. DeLauro None CAPITAL GAINS CAPITAL GAINS NONE NONE \$201 - \$1,000 NONE NONE NONE NONE NONE NONE NONE NONE NONE \$1,001 - \$2,500 PS PS PS PS T PS PS PS PS PS PS PS Page 4 of 14

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SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	ME Name Rosa L. DeLauro	eLauro		Page 5 of 14
SP ·	JH Rtrmt-Weitz Partners Value	None	None	NONE	PS
SP	JH-Rtrmt-Excelsior Value & Restruct	None	None	NONE	PS
	ML-Blackrock Enhanced Eq Yld	None	None	NONE	S
	ML-Blackrock Global	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	ק
JT	ML-Blackrock Global	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
JT	ML-CD Bank of Baroda NY	None	INTEREST	\$201 - \$1,000	S
	ML-CD Bank of Baroda NY	None	INTEREST	\$1 - \$200	ဟ
JT	ML-Columbia Marsico 21st	\$1,001 - \$15,000	None	NONE	
J	ML-Evergreen Asset Allocation Fd	\$15,001 - \$50,000	DIVIDENDS/ CAPITAL GAINS	\$2,501 - \$5,000	70
JT	ML-Evergreen Fds Em Mkts	None	CAPITAL GAINS	\$1 - \$200	S
JT	ML-lvy Asset Strategy	\$1,001 - \$15,000	DIVIDENDS/ CAPITAL GAINS	\$201 - \$1,000	ס
	ML-ivy Asset Strategy	\$15,001 - \$50,000	DIVIDENDS/ CAPITAL GAINS	\$1,001 - \$2,500	P
J	ML-MMFunds	\$50,001 - \$100,000	DIVIDENDS/INTE REST	\$1,001 - \$2,500	
	ML-MMFunds	\$1,001 - \$15,000	INTEREST/ DIVIDENDS	\$1 - \$200	

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME SP Sun Surveys LLC 60% Owner 9425 Sunset Drive Miami, FL Phone Surveys ML-Powershares ETF Trust None \$1,001 - \$15,000 | Ordinary Income Name Rosa L. DeLauro DIVIDENDS/ CAPITAL GAINS \$15,001 - \$50,000 \$201 - \$1,000 S Page 6 of 14

\$1 - \$200	INTEREST	\$250,001 - \$500,000	United Bank Checking	J
NONE	None	\$50,001 - \$100,000	TIAA CREF-CREF Stock Retirement	
\$1,001 - \$2,500	INTEREST	\$15,001 - \$50,000	TIAA CREF- TIAA Traditional Retirement	
\$2,501 - \$5,000	INTEREST	\$50,001 - \$100,000	TIAA CREF- TIAA Traditional Retirement	SP
NONE	None	\$50,001 - \$100,000	TIAA CREF- CREF Stock Retirement	SP

Name Rosa L. DeLauro

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:				
SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	JH Rtrmt-AlM Small Cap Growth	Р	Monthly	\$1,001 - \$15,000
SP	JH Rtrmt-AIM Small Cap Growth	S	10/29/2008	\$15,001 - \$50,000
SP	JH Rtrmt-AIM Small Cap Growth	S	7/17/2008	\$1,001 - \$15,000
SP	JH Rtrmt-All Cap Value Fund	S	10/29/2008	\$15,001 - \$50,000
SP	JH Rtrmt-All Cap Value Fund	ס	10/24/2008	\$15,001 - \$50,000
SP	JH Rtrmt-DWS RREEF Real Estate	P	Monthly	\$1,001 - \$15,000
SP	JH Rtrmt-DWS RREEF Real Estate	S	7/17/2008	\$1,001 - \$15,000
SP	JH Rtrmt-DWS RREEF Real Estate	S	10/29/2008	\$15,001 - \$50,000
SP .	JH Rtrmt-Excelsior Value & Restruct	S	10/29/2008	\$15,001 - \$50,000
SP	JH Rtrmt-Excelsior Value & Restruct	P	Monthly	\$1,001 - \$15,000
SP	JH Rtrmt-Excelsior Value & Restruct	S	7/17/2008	\$1,001 - \$15,000

Name Rosa L. DeLauro

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	JH Rtrmt-Franklin Balance Sheet	S	7/17/2008	\$1,001 - \$15,000
SP	JH Rtrmt-Franklin Balance Sheet	S	10/29/2008	\$15,001 - \$50,000
SP	JH Rtrmt-Franklin Balance Sheet	ס	Monthly	\$1,001 - \$15,000
SP	JH Rtrmt-Int'l Value Fund	S	10/29/2008	\$15,001 - \$50,000
SP	JH Rtrmt-Int'l Value Fund	דס	Monthly	\$1,001 - \$15,000
SP	JH Rtrmt-Int'l Value Fund	S	7/17/2008	\$1,001 - \$15,000
SP	JH Rtrmt-Jennison Growth	S	10/29/2008	\$15,001 - \$50,000
SP	JH Rtrmt-Jennison Growth	ד	Monthly	\$1,001 - \$15,000
SP	JH Rtrmt-Jennison Growth	S	7/17/2008	\$1,001 - \$15,000
SP	JH Rtrmt-Lifecycle 2015	T	Monthly	\$1,001 - \$15,000
SP	JH Rtrmt-Lifecycle 2015	ס	7/17/2008	\$50,001 - \$100,000

Name Rosa L. DeLauro

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SP, DC,		Type of		
JT	Asset	Transaction	Date	Amount of Transaction
ЯS	JH Rtrmt-Lifecycle 2015	P	10/29/2008	\$250,001 - \$500,000
SP	JH Rtrmt-Lord Abbett All Value	ַ ס	Monthly	\$1,001 - \$15,000
SP	JH Rtrmt-Lord Abbett All Value	S	7/17/2008	\$1,001 - \$15,000
SP	JH Rtrmt-Lord Abbett All Value	Ø	10/24/2008	\$15,001 - \$50,000
SP	JH Rtrmt-Lord Abbett Mid Cap Value	ס	Monthly	\$1,001 - \$15,000
<u>လ</u>	JH Rtrmt-Lord Abbett Mid Cap Value	S	10/29/2008	\$15,001 - \$50,000
SP	JH Rtrmt-Lord Abbett Mid Cap Value	S	7/17/2008	\$1,001 - \$15,000
SP	JH Rtrmt-Mutual Beacon	S	10/29/2008	\$15,001 - \$50,000
SP	JH Rtrmt-Mutual Beacon	g	10/24/2008	\$15,001 - \$50,000
SP	JH Rtrmt-Pimco Total Return	ס	Monthly	\$1,001 - \$15,000
SP	JH Rtrmt-Pimco Total Return	Ø	10/29/2008	\$15,001 - \$50,000

Name Rosa L. DeLauro

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	JH Rtrmt-Pimco Total Return	S	7/17/2008	\$1,001 - \$15,000
SP	JH Rtrmt-Small Cap Index Fund	U	Monthly	\$1,001 - \$15,000
SP	JH Rtrmt-Small Cap Index Fund	S	7/17/2008	\$1,001 - \$15,000
SP	JH Rtrmt-Small Cap Index Fund	S	10/29/2008	\$15,001 - \$50,000
SP	JH Rtrmt-Weitz Partners Value	S	7/17/2008	\$1,001 - \$15,000
SP	JH Rtrmt-Weitz Partners Value	ָּטּ	Monthly	\$1,001 - \$15,000
SP	JH Rtrmt-Weitz Partners Value	S	10/24/2008	\$15,001 - \$50,000
	ML-Blackrock Global	ס	12/17/2008	\$1,001 - \$15,000
	ML-Blackrock Enhanced Eq Yld	S	2/27/2008	\$1,001 - \$15,000
!	ML-CD Bank of Baroda NY	S	1/22/2008	\$1,001 - \$15,000
JT	ML-CD Bank of Baroda NY	S	1/22/2008	\$15,001 - \$50,000

Name Rosa L. DeLauro

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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.

JT ML-Evergreen Asset Allocation Fd P 1/2/2008 \$15,001 - 1000 - 1	SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
ML-Evergreen Asset Allocation Fd ML-Evergreen Fds EM Mkts S 6/19/2008 ML-Ivy Asset Strategy P VARIOUS ML-Powershares ETF Trust S VARIOUS	Ţ	ML-Evergreen Asset Allocation Fd	ק	1/2/2008	\$15,001 - \$50,000
ML-Ivy Asset Strategy ML-Ivy Asset Strategy P VARIOUS ML-Powershares ETF Trust S VARIOUS	ŢŢ	ML-Evergreen Asset Allocation Fd	ד	12/31/2008	\$1,001 - \$15,000
ML-Ivy Asset Strategy ML-Ivy Asset Strategy P 6/20/2008 ML-Powershares ETF Trust S VARIOUS	JT	ML-Evergreen Fds EM Mkts	S	6/19/2008	\$1,001 - \$15,000
ML-Ivy Asset Strategy P 6/20/2008 ML-Powershares ETF Trust S VARIOUS		ML-Ivy Asset Strategy	T	VARIOUS	\$15,001 - \$50,000
S VARIOUS	٦	ML-lvy Asset Strategy	ָ ס 	6/20/2008	\$1,001 - \$15,000
		ML-Powershares ETF Trust	S	VARIOUS	\$15,001 - \$50,000

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	Name
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SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling 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 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 or were paid by you and reimbursed by the sponsor. spouse or dependent child that is totally independent of his or her relationship to you.

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 not at sponsor's expense
	Mar. 2	DC—Chicago—DC	z	z	Z	None
Roycroft Corporation	Aug. 6–11	DC—Los Angeles—Cleveland	~	Υ	Y	2 Days
German Marshall Fund	3/14-3/16	Brussels	А	Y	Z	None
(US GUV TONELER TEAKET)					, mille mille may be the second of the secon	
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SCHEDULE VIII - POSITIONS

Name Rosa L. DeLauro

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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 any business enterprise, any nonprofit organization, any labor organization, or any honorary nature; and positions listed on Schedule I. educational or other institution other than the United States. Exclude: Positions held in any religious, social, fratemal, or political entities; positions solely of an

Position Name of Organization Fellow Timothy Dwight College-Yale University Member of Board of Directors Women's Campaign School-Yale University Honorary Board Member Special Olympics-Connecticut Honorary Board Member Sisters Journey Advisory Board Member Roosevelt Institution National Advisory Board National Research Center for Women & Families Member CT International Women's Forum		
of Board of Directors y Board Member y Board Member Board Member Advisory Board	Position	Name of Organization
y Board Member y Board Member Board Member Advisory Board	Fellow	Timothy Dwight College-Yale University
y Board Member y Board Member Board Member Advisory Board	Member of Board of Directors	Women's Campaign School-Yale University
y Board Member / Board Member Advisory Board	Honorary Board Member	Special Olympics-Connecticut
Board Member Advisory Board	Honorary Board Member	Sisters Journey
Advisory Board	Advisory Board Member	Roosevelt Institution
	National Advisory Board	National Research Center for Women & Families
	Member	CT International Women's Forum

SCHEDULE V - LIABILITIES

Name Rosa L. DeLauro

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, yourspouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

	<u></u>	SP, DC, JT	
The Lakes, NV	Diners Club	Creditor	
	Credit Card	Type of Liability	
	\$15,001 - \$50,000	Amount of Liability	

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Rosa L. DeLauro 49 Huntington Street New Haven, CT 06511

House of Representatives, CT, 3rd District

ATTACHMENTS: BASIS OF VALUATION

Statement I, Schedule III, Page 3:

Greenberg Quinlan Rosner Research Inc. – Ownership value based on an independent business valuation.

Statement II, Schedule III, Page 4:

Greenberg Research, Inc. – Ownership value based on an independent business valuation.