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late.		☐ Termination	Amendment	Type Annual (May 15)	۔ اور
more than 30 d	Termination Date:			1	5
anyone who file		Employee	District: 10		Str
A \$200 penalty	Employing Office:	Officer Or	State: GA	Eiler ✓ Member of the U.S.	<u>ת</u>
Office Subject	(Daytime Telephone)		ne)	(Full Name)	
	202-225-4101		un, Jr.	Paul C. Broun, Jr.	
2009 K					
MOUNT	For use by Members, officers, and employees		LOSURE STATEM	CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT	CAL
	FORM A Page 1 of 8		REPRESENT	UNITED STATES HOUSE OF REPRESENTATIVES	S

HAND DELIVERED MC 11 ANN RESOURCE CENTER 2009 MAY 27 AN IO: 17

Office SUBBLOARD REPRESENTATIVES

200 penalty shall assessed against

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_	Туре	C	Annual (May 15)		Amendment	_	Termination	l g	inati	g		late.	1		1	L
밁	RELIMINA	낏	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	- A	ISWER EACH	핚	ᅻ	ES	m O	E	STIONS					
-	Did you or you or more from	ur spo	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	(e.g., s:	laries or fees) of \$200	Yes V No		<u>\$</u>		.≤	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)?		Yes No 🗸		₹	<u> </u>
	If yes, comp	ete a	If yes, complete and attach Schedule I.						<u> </u>		omplete and attach					
	Did any indivi	dual o	Did any individual or organization make a donation to charity in lieu of	tion to	charity in lieu of			·		≦ _	Did you, your spouse, or a dependent child receive any reportable trave	e travel	Ϋ́ρ p	Yas No W	5	[]
=	paying you to	raspo	paying you for a speech, appearance, or article in the reporting period: If you commisse and attach Schedule II,	in the	reporting period r	Yes		2 6			\$335 from one source)? \$135 from one source)? If yes, complete and attach Schedule VII.		;	[
;	Did you, your more than \$20	Spous in t	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	eive "LI	nearned" income of ortable asset worth	Yes V No	⟨	5		¥ E-	Did you hold any reportable positions on or before the date of tiling in the VIII. current calendar year?	ing in the	Yes	Yes 🗸 No 🗌	Š	
	more than \$1,	000 at	more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.				[If yes, complete and attach Schedule VIII.	.				
₹	Did you, your reportable as:	spous	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting	hase, si	ing the reporting	Yes V	<u>S</u>	₹		×	Did you have any reportable agreement or arrangement with an outside entity?	Outside	Yes	Yes U No V	8	
	period? If yes, comp	lete a	period? If yes, complete and attach Schedule IV.						├	_	if yes, complete and attach Schedule IX.					
.<	Did you, your (more than \$1	spous 0,000)	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	e any n	eportable liability	Yes V No	<u> </u>	&	.Ш.		Each question in this part must be answered and the appropriate	and the) app	gor	riate	
	If ves. comp	ete a	If yes, complete and attach Schedule V.						\vdash		schedule attached for each "Yes" response.					L
미		2	F SPOUSE DEP		ENT. OR TRU	SI	킦	읾	š	딍	EXCLUSION OF SPOUSE DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS	NOIT	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
Ţ	(00000	(֓֞֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֓֓֓֓֓֓֜֜֜֜֜֜			l	l	l	l						

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.

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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?

Trusts-

SCHEDULE I - EARNED INCOME

Name Paul C. Broun, Jr.

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	ABILITY - Sec	
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.	n any source (other than the filer's current employme he source and amount of any honoraria; list only the	nt by the U.S. Government) totaling \$200 or more source for other spouse earned income exceeding
Source	Туре	Amount
Optimal Communicators, Inc.	Spouse Translator Services	N/A
Optimal Transport, Inc.	Spouse Translator Services	N/A
Anna L. McCoy	Spouse Translator Services	N/A
Global Trans Services	Spouse Translator Services	N/A
Georgia Legislative Retirment System	Death Beneficiary	\$2,526

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DC Fidelity Advisors New Insights Class C	Fidelity Advisors New Insights Class C	Fidelity Advisor New Insights Class C (SEP IRA)	Fidelity Advisor New Insights Class C (Rollover IRA)	Fidelity Advisor Japan Class C	DC American Capital World Growth & Income Fund Class C	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.	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.	ASSET AND/OF Income Source 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 \$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.	
\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1 - \$1,000	\$1,001 - \$15,000			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."	Nazioni di Contra di Contr
Dividends/CAPIT AL GAIN Distributions	Dividends//CAPIT AL GAINS	Dividends	CAPITAL GAINS/DIVIDEN DS	DIVIDENDS/CAPI TAL GAINS	DIVIDENDS			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 retinvested, should be listed as income. Check "None" if asset did not generate any income during the calendar year.	
\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200			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, 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.	
								BLOCK E Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.	

SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name	Paul C. Broun, Jr.		Page 4 of 8
DC	First Eagle Global Class C	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
DC	First Eagle Global Class C	\$1,001 - \$15,000	00 CAPITAL GAIN Distributions/DIVI DENDS	\$201 - \$1,000	
	First Eagle Global Class C (Rollover IRA)	\$1,001 - \$15,000	00 DIVIDENDS	\$1 - \$200	
	First Eagle Global Class C (SEP IRA)	\$1,001 - \$15,000	00 DIVIDENDS/CAPI TAL GAINS	\$201 - \$1,000	
	Fiserve Trust Money Market Account (IRA)	\$1,001 - \$15,000	00 Interest	\$1 - \$200	
DC	John Hancock Classic Value Class C	\$1,001 - \$15,000	00 Capital Gains Distribution	\$1 - \$200	
	McIntosh Commercial Bank S- Corporation Stock (Only Asset Held in 33.33% Membership Interest in Broun Brother's Investments)	\$250,001 - \$500,000	LLC Company Membership Interest	\$1,001 - \$2,500	
	Rydex US Government Core Moneymarket Investor	\$1 - \$1,000	Dividends	\$1 - \$200	
8	Rydex US Government Core Moneymarket Investor	\$15,001 - \$50,000	Dividends	\$201 - \$1,000	
	Rydex US Government Core Moneymarket Investor (Rollover IRA)	\$1,001 - \$15,000	00 DIVIDENDS	\$1 - \$200	
	Synovus Financial Corporation, Inc. (Stock Held in Rollover IRA)	\$1,001 - \$15,000	00 Dividends	\$1 - \$200	
DC	Thornburg Investment Income Builder Fund Class C	\$1,001 - \$15,000	00 Dividends	\$201 - \$1,000	

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SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Paul C. Broun, Jr.	roun, Jr.		Page 5 of 8
DC	Thornburg Investment Income Builder Fund Class C	\$1,001 - \$15,000 Capital Gains Distributions	Capital Gains Distributions	\$1 - \$200	
	Total Systems Services, Inc. (Stock Held Rollover IRA)	\$1 - \$1,000	Dividends	\$1 - \$200	
	Wachovia Corp. (Stock Held in Rollover IRA)	\$1 - \$1,000	Dividends	\$1 - \$200	

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SCHEDULE IV - TRANSACTIONS

Name Paul C. Broun, Jr.

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or other su transactio out. If onl	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.	nt child during the reporting Include transactions that re- ur dependent child, or the p ale"). See example below.) year of any real property, sufted in a loss. Provide a urchase or sale of your pe	any real property, stocks, bonds, commodities futures, a loss. Provide a brief description of any exchange or sale of your personal residence, unless it is rented
SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
SP	Commercial Building	S	2/28/2008	\$250,001 - \$500,000

Name Paul C. Broun, Jr.

Page 7 of 8

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, 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.

SCHEDULE VIII - POSITIONS

Name Paul C. Broun, Jr.

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

Position	Name of Organization
Limited Liability Company Member	Broun Brothers Investments, LLC

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