

# UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT

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

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Luis V. Gutierrez  
(Full Name)

(202) 225-8203  
(Daytime Telephone)

2009 AUG 13 PM 4:56  
(Office Use Only)

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**HAND DELIVERED**

<b>Filer Status</b>	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: IL District: 04	<input type="checkbox"/> Officer Or Employee	Employing Office:	<b>NOTE: If FILER STATUS is "Officer Or Employee", a \$200 penalty shall be assessed against anyone who files late.</b>
<b>Report Type</b>	<input checked="" type="checkbox"/> Annual (May 15)	<input type="checkbox"/> Amendment	<input type="checkbox"/> 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?	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 \$335 and not otherwise exempt)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, complete and attach Schedule I.		If yes, complete and attach Schedule VI.	
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"/>	VII. 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 <input checked="" type="checkbox"/> No <input type="checkbox"/>
If yes, complete and attach Schedule II.		If yes, complete and attach Schedule VII.	
III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$1,000 at the end of the period?	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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, complete and attach Schedule III.		If yes, complete and attach Schedule VIII.	
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"/>	IX. Did you have any reportable agreement or arrangement with an outside entity?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, complete and attach Schedule IV.		If yes, complete and attach Schedule IX.	
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"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	
If yes, complete and attach Schedule V.			

## 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? Do not answer "yes" unless you have first consulted with the Committee on Standards of Official Conduct.	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
Ramirez & Company	Spousal Income	N/A

# 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. 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.	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, 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.
JT 535 Marina Street, Rio Grande, Puerto Rico	\$250,001 - \$500,000	None	NONE	
JT 615 Vistamar Street Rio Grande, Puerto Rico	\$100,001 - \$250,000	RENT	\$5,001 - \$15,000	
JT Corus Bank	\$50,001 - \$100,000	INTEREST	\$1,001 - \$2,500	
JT Corus Bank	\$100,001 - \$250,000	INTEREST	\$2,501 - \$5,000	
JT First Eagle Global Fund Chicago, Illinois	None	CAPITAL GAINS	\$1,001 - \$2,500	S
JT Great American Insurance Co. Annuity	\$50,001 - \$100,000	INTEREST	\$2,501 - \$5,000	

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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JT	National City Bank Checking Account (Previously listed as Mid-America)	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
JT	National City Bank Money Market	\$50,001 - \$100,000	INTEREST	\$1,001 - \$2,500	
JT	National City Bank Money Market	\$50,001 - \$100,000	INTEREST	\$2,501 - \$5,000	
JT	National City Bank Money Market Account (Previously listed as Mid-America)	\$100,001 - \$250,000	INTEREST	\$2,501 - \$5,000	
JT	National City Bank Money Market	\$50,001 - \$100,000	INTEREST	\$1,001 - \$2,500	
JT	National City Bank CD	\$50,001 - \$100,000	INTEREST	\$1,001 - \$2,500	
JT	National City Bank CD	\$50,001 - \$100,000	RENT	\$1,001 - \$2,500	
JT	National City Bank CD	\$50,001 - \$100,000	INTEREST	\$1,001 - \$2,500	
JT	National City Bank CD	\$50,001 - \$100,000	INTEREST	\$1,001 - \$2,500	
JT	New York Life Insurance Co Annuity	\$100,001 - \$250,000	INTEREST	\$1 - \$200	
JT	TransAmerica Asset Allocation C Shares	\$15,001 - \$50,000	None	NONE	

# 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	Date	Amount of Transaction
JT	First Eagle Global Fund Chicago, Illinois	S	Sept. 2009	\$50,001 - \$100,000

# 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
PR Chamber of Commerce	June 26- 30th	DC-SanJuan-Chicago	Y	Y	Y	1
Latino Institute	May 9-11	DC-SantoDomingo-DC	Y	Y	Y	0
Illinois Hispanic Chamber of Commerce	Feb. 29- March 3	Chicago-San Juan-Chicago	Y	Y	Y	1
New Jersey Conference on Dominican Affairs	Feb 10	Chicago-New Jersey-Chicago	N	N	N	0
Franklin Center for Global Policy Exchange	Nov. 9 - Nov 14	Chicago-Amsterdam-Chicago	Y	Y	Y	0