

**HAND DELIVERED**

**UNITED STATES HOUSE OF REPRESENTATIVES**  
**CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT**

**FORM A** Page 1 of 7  
For use by Members, officers, and employees

Eni F. H. Faleomavaega

(Full Name)

202-225-8577

(Daytime Telephone)

**Filer Status** ☒ Member of the U.S. House of Representatives

State: AS  
District: 1

☐ Officer Or Employee

Employing Office:

**Report Type** ☒ Annual (May 15)

☐ Amendment

☐ Termination

Termination Date:

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

**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? If yes, complete and attach Schedule I.	Yes <input type="checkbox"/> No <input checked="" 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)? If yes, complete and attach Schedule VI.	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? If yes, complete and attach Schedule II.	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)? If yes, complete and attach Schedule VII.	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? If yes, complete and attach Schedule III.	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? If yes, complete and attach Schedule VIII.	Yes <input checked="" type="checkbox"/> No <input 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? If yes, complete and attach Schedule IV.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	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? If yes, complete and attach Schedule V.	Yes <input checked="" type="checkbox"/> No <input 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 Ethics 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 Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Eni F. H. Faleomavaega

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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 reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use ticker symbols.)</p> <p>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 for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.</p> <p>For rental or other real property held for investment, provide a complete address.</p> <p>For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.</p> <p>Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any derivative holding of non-voting common stock in a nonexempt reporting company.</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 accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.</p>	<p>For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed 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>
AMERIPRISE TRUST - IRA: Columbia Income Opps-A (AIOAX)		\$1,001 - \$15,000	DIVIDENDS	\$1,001 - \$2,500	Reinvests
JT	Residential rental property, Henderson, NV	\$100,001 - \$250,000	RENT	\$15,001 - \$50,000	
SP	Ameriprise Cash	\$1,001 - \$15,000	DIVIDENDS	NONE	
SP	RiverSource Retirement Advisor Variable Annuity	\$50,001 - \$100,000	N/A	N/A	P
SP	RiverSource Retirement Advisor Advantage Plus VA	\$100,001 - \$250,000	N/A	N/A	
SP	Capital One Bank (USA), N.A.: Money market account	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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SP	AMERIPRISE TRUST - IRA: 1. Ameriprise Insured Money Market	\$1 - \$1,000	DIVIDENDS	NONE	
SP	2. INVESCO Energy Fund-A (IENAX)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	Reinvests
SP	3. Columbia Income Opps-A (AIOAX)	\$15,001 - \$50,000	DIVIDENDS/CAP ITAL GAINS	\$1,001 - \$2,500	Reinvests
SP	4. Wells Fargo High Income-A (SHBAX)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	Reinvests
SP	5. John Hancock Large Cap Equity Fund (TAGRX)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	Reinvests

# 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
	AMERIPRISE TRUST - IRA: Columbia Income Opportunities Fund-A (AIOAX)	P	N/A	Monthly	\$1,001 - \$15,000
SP	RiverSource Life Insurance - RiverSource Retirement Advisor Variable Annuity	P	N/A	Monthly	\$1,001 - \$15,000
SP	AMERIPRISE TRUST - IRA: Columbia Income Opportunities Fund-A (AIOAX)	P	N/A	Monthly	\$1,001 - \$15,000

# SCHEDULE V - LIABILITIES

Name Eni F. H. Faleomavaega

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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.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
	Congressional Federal Credit Union: VISA	December 2010	Credit Card	Below reportable amount.
	USAA MasterCard	December 2010	Credit Card	Below reportable amount.
JT	Aurora Home Loans	November 2006	Mortgage on residence, Provo, UT (guarantors)	\$250,001 - \$500,000

**SCHEDULE VIII - POSITIONS**

Name **Eni F. H. Faleomavaega**

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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
President & Director (uncompensated)	The Faleomavaega Community Service Foundation

# FOOTNOTES

Name: Eni F. H. Faleomavaega

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Number	Section / Schedule	Footnote	This note refers to the following item
1	Schedule III	Ameriprise Trust Company 10 Ameriprise Financial Center Minneapolis, MN 55474-9900	Ameriprise Trust - IRA accounts
2	Schedule III	This is a variable annuity with no owner directed management. Issued by RiverSource Life Insurance Company, 9549 Ameriprise Financial Center, Minneapolis, MN 55474.	RiverSource Retirement Advisor Variable Annuity
3	Schedule III	This is a variable annuity with no owner directed management. Issued by RiverSource Life Insurance Company, 9549 Ameriprise Financial Center, Minneapolis, MN 55474.	RiverSource Retirement Advisor Advantage Plus VA
4	Schedule III	Capital One Bank (USA), N.A. P.O. Box 61540 New Orleans, LA 70161	Capital One Bank (USA), N.A.: Money market account
5	Schedule IV	Dividends and capital gain distributions reinvest automatically in both the member's and his spouse's IRA accounts	Columbia Income Opportunity Fund-A (AIOAX)
6	Schedule IV	Systematic investment.	RiverSource Retirement Advisor Variable Annuity
7	Schedule V	The member and his wife co-signed this note for their daughter on 11/06/2006.	Aurora Home Loans
8	Schedule VIII	The Faleomavaega Community Service Foundation has limited activity.	President & Director (uncompensated)
9	Schedule III	Columbia Income Opportunities Fund-A was previously RVS Income Opportunities Fund-A (AIOAX)	Ameriprise Trust Company - IRA accounts
10	Schedule III	INVESCO Energy Fund-A was previously AIM Energy Fund-A (IENAX)	INVESCO Energy Fund-A (IENAX)