Yes No 🗸	income, transactions, or liabilities of a spouse or dependent child	Have you excluded from this report any other assets, "unearned" income, transactions, or because they meet all three tests for exemption?	Exemptions Have you excluded because they represented the second of th
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?	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Of trusts" need not be disclosed. Have you excluded from this report details of such a trust child?	Trusts- Details regardi trusts" need no child?
NONS	MATION - ANSWER EACH OF THESE QUESTIONS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWI	EXCLUSION OF SPOUSE,
			if yes, complete and attach Schedule V
id the appropriate	Each question in this part must be answered and the appropriate	:hild have any reportable liability Yes ☐ No ☑	V. (more than \$10,000) during the reporting period?
j	If yes, complete and attach Schedule IX.	tule IV.	If yes, complete and attach Schedule IV.
Yes No	Did you have any reportable agreement or arrangement with an outside IX. entity?	lid purchase, sell, or exchange any ding \$1,000 during the reporting Yes V No	IV. reportable asset in a transaction exceeding \$1,000 during the reporting
	If yes, complete and attach Schedule VIII.	tule III.	If yes, complete and attach Schedule III.
Yes No 🗸	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	child receive "unearned" income of or hold any reportable asset worth Yes V No	Did you, your spouse, or a dependent child receive "unearned" income of III. more than \$200 in the reporting period or hold any reportable asset worth more than \$200 in the reporting period or hold any reportable asset worth more than \$200 in the reporting period or hold any reportable asset worth
· · · · · · · · · · · · · · · · · · ·	If yes, complete and attach Schedule VII.	tule II.	If yes, complete and attach Schedule II
avel or 1305 Yes ✔ No ☐	VII. reimbursements for travel in the reporting period (worth more than \$305 from one source)?	e a donation to charity in lieu of paying e in the reporting period? Yes ☐: No ☑	Did any individual or organization make a donation to charity in lieu of paying II. you for a speech, appearance, or article in the reporting period?
	If yes, complete and attach Schedule VI.	tule I.	If yes, complete and attach Schedule I.
Atin Yes No V	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$305 and not otherwise exempt)?	Income (e.g., salaries or fees) of \$200 Yes ☑ No ☐	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 l. or more from any source in the reporting period?
	QUESTIONS	TION ANSWER EACH OF THESE QUESTIONS	PRELIMINARY INFORMATION
late.	Termination	Amendment :	Type ( ) Annual (May 15)
more than 30 days	Termination Date:		Report
A \$200 penaity snaii be assessed against	Finding Cinco.	ntatives District:	Status  House of Representatives
TABLE OF REPRESENTATIONS			
(Office Ose Only)	(Daytime Telephone)	(Full Name)	
2000 NAY 15 PM 2: 08	202-225-3011	James David Matheson	Ja
EGISLATIVE RESOURCE CENTER	, EG		
ָרָרָנְיּאָרָנִיּיִּרְיִּהְיִּרְיִּהְיִּרְיִּהְיִּרְיִּהְיִּרְיִּהְיִּהְיִּהְיִּהְיִּהְיִּהְיִּהְיִּה	nbers, officers, and employees	FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2007	FINANCIAL DISCLOSURE STA
	FORM A Page 1 of 9	INITED STATES HOUSE OF BEDDESENTATIVES	I MITED STATES HOI
HAND			

## **SCHEDULE I - EARNED INCOME**

Name James David Matheson

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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	Туре	Amount
University of Utah	Spouse Salary	

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that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. If you so choose, you may indicate that an asset or income source is Government retirement programs. savings accounts; any financial interest in or income derived from U.S parent or sibling; any deposits totaling \$5,000 or less in personal debt owed to you by your spouse, or by your or your spouse's child, Exclude: Your personal residence(s) (unless there is rental income); any that is not publicly traded, state the name of the business, the nature of and its value at the end of the reporting period. For an active business plans that are not self-directed, name the institution holding the account a fair market value exceeding \$1,000 at the end of the reporting period, in the account that exceeds the reporting threshold. For retirement investments), provide the value and income information on each asset retirement plans (such as 401(k) plans) that are self directed (i.e., plans than \$200 in "unearned" income during the year. For rental property or and (b) any other assets or sources of income which generated more Information, see the instruction booklet. its activities, and its geographic location in Block A. For additional in which you have the power, even if not exercised, to select the specific mutual funds (do not use ticker symbols). For all IRAs and other Identify (a) each asset held for investment or production of income with and, provide a complete address. Provide full names of stocks and Asset and/or Income Source Fidelity Asset Manager 50% Moderate Allocation Alpine Dynamic Dividend Fund Moderate Plus Allocation Equitable Variable Life Insurance Mutual Fund: Equitable Variable Life Coin Collection Baron Partners Mutual Fund insurance Mutual Fund: **≥ ≿** \$15,001 \$15,000 \$1,001 -\$50,000 \$100,000 \$50,001 -\$50,000 \$15,001 -\$15,000 \$1,001 -\$15,000 at close of reporting the value should be value, please specify other than fair market valuation method year. If you use a it is generated income, included only because asset was sold and is the method used. If an Value of Asset Year-End Name James David Matheson **BLOCK B** None CAPITAL GAINS DIVIDENDS CAPITAL GAINS DIVIDENDS DIVIDENDS Check all columns that apply. Check "None" if CAPITAL GAINS DIVIDENDS DIVIDENDS Partnership income or a brief description in this categories, specify the any income during the asset did not generate CAPITAL GAINS block. (For example: type of income by writing than one of the listed calendar year. ∦f other Type of Income BLOCK C NONE \$2,501 - \$5,000 \$1,001 - \$2,500 \$1,001 - \$2,500 \$201 - \$1,000 \$1,001 - \$2,500 earmed category of income by other assets, indicate the "None" if no income was checking the appropriate accounts that do not allow listed as income. Check if reinvested, should be "NA" for income. For all you to choose specific For retirement plans or box below. Dividends, even investments, you may write Amount of Income PS(part) U U PS(part) S(part) Indicate if asset reporting year. \$1,000 in exceeding exchanges (E) (P), sales (S), or had purchases Transaction BLOCK E Page 3 of 9

TIAA CREF Lifecycle 2035	T. Rowe Price Small Cap Stock Fund	Qualcomm Stock	Northeast Investors Trust	Garmin Stock	Fidelity Value Discovery Fund	Fidelity UNIQUE 2015 Portfolio	Fidelity Spartan US Equity Fund	Fidelity Municipal Income Fund (formerly Spartan Muni Income Fund)	Fidelity Low Priced Stock Fund	Fidelity Freedom Fund 2035	Fidelity Export and Multinational Fund	Fidelity Cash Reserves	Fidelity Balanced Fund	SCHEDULE III - ASSETS AND "UNEARNED" INCOME
\$50,001 - \$100,000	\$1,001 - \$15,000	\$50,001 - \$100,000	\$1,001 - \$15,000	\$15,001 - \$50,000	\$1,001 - \$15,000	\$50,001 - \$100,000	\$50,001 - \$100,000	\$1,001 - \$15,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$15,001 - \$50,000	\$15,001 - \$50,000	Name James David Matheson
None	DIVIDENDS CAPITAL GAINS	DIVIDENDS	DIVIDENDS	DIVIDENDS	DIVIDENDS	None	DIVIDENDS CAPITAL GAINS	DIVIDENDS CAPITAL GAINS	DIVIDENDS CAPITAL GAINS	DIVIDENDS	DIVIDENDS CAPITAL GAINS	INTEREST	DIVIDENDS CAPITAL GAINS	Javid Matheson
NONE	\$1,001 - \$2,500	\$201 - \$1,000	\$1,001 - \$2,500	\$201 - \$1,000	\$201 - \$1,000	NONE	\$1,001 - \$2,500	\$201 - \$1,000	\$2,501 - \$5,000	\$1,001 - \$2,500	\$1,001 - \$2,500	\$1,001 - \$2,500	\$2,501 - \$5,000	
סר	ט		ס	ס	ס		PS(part)	S(part)	ס	י	ט		PS(part)	Page 4 of 9

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME Wasatch Micro Cap Fund Vanguard Wellesley Income Fund Vanguard Total Stock Market Index Vanguard Emerging Markets Index Zions Bank Checking Account Vanguard Small Cap Stock Index TIAA CREF Real Estate \$50,001 -\$100,000 \$1,001 -\$15,000 \$1,001 -\$15,000 \$1,001 -\$15,000 \$15,001 -\$50,000 \$15,001 -\$50,000 \$15,000 \$1,001 -Name James David Matheson None DIVIDENDS CAPITAL GAINS INTEREST **CAPITAL GAINS** DIVIDENDS DIVIDENDS DIVIDENDS DIVIDENDS NONE \$15,001 - \$50,000 \$201 - \$1,000 \$201 - \$1,000 \$1 - \$200 \$201 - \$1,000 \$201 - \$1,000 S(part) J PS(part) Page 5 of 9

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## SCHEDULE IV - TRANSACTIONS

Name James David Matheson

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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

								JT, SP,
Fideltiy Export and Multinational Fund	Equitable Variable Life Insurance Mutual Fund: AXA Moderate Plus Allocation	Fidelity Asset Manager 50%	Fidelity Balanced Fund	Equitable Variable Life Insurance Mutual Fund: AXA Moderate Plus Allocation	Equitable Variable Life Insurance Mutual Fund: AXA Moderate Allocation	Baron Partners Mutual Fund	Alpine Dynamic Dividend Fund	Asset
<b>ס</b>	S(part)	ס	ס	7	70	S(part)	Р	Type of Transaction
Semi-monthly purchases, dividend reinvestment, one time additional purchase 12/3/07	12/3/07	Semi-monthly purchases plus dividend reinvestment	Various Dividend Reinvestment	Various Dividend Reinvestment	Various Dividend Reinvestment	12/3/07	Various Dividend Reinvestments	Date
\$15,001 - \$50,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	Amount of Transaction

## **SCHEDULE IV - TRANSACTIONS**

Name James David Matheson

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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

JT DC,	Asset	Type of Transaction	Date	Amount of Transaction
Fide	Fidelity Freedom Fund 2035	ד	Semi-monthly purchases,	\$15,001 - \$50,000
			dividend reinvestment, one time purchase 12/3/07	-
Fide	Fidelity Low Priced Stock Fund	ס	Various Dividend Reinvestment	\$1,001 - \$15,000
Fide Spa	Fidelity Municipal Income Fund (formerly Spartan Muni Income Fund)	S(part)	12/3/07	\$1,001 - \$15,000
Fide	Fidelity Spartan US Equity Fund	ס	Semi-monthly purchases and dividend reinvestment	\$1,001 - \$15,000
Garr	Garmin Stock	ס	1/25/07 plus dividend reinvestment	\$15,001 - \$50,000
Nort	Northeast Investors Trust	ס	Various Dividend Reinvestment	\$1,001 - \$15,000
T. R	Rowe Price Small Cap Stock Fund	סד	Various Dividend Reinvestment	\$1,001 - \$15,000
Van	Vanguard Emerging Markets Index	S(part)	12/10/07	\$1,001 - \$15,000
Was	Wasatch Micro Cap Fund	<b>סד</b>	Monthly Plus Various Dividend Reinvestment	\$15,001 - \$50,000

## **SCHEDULE IV - TRANSACTIONS**

Name James David Matheson

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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

21.0000	amount to treat you, your spouse, or your separatin cillus, or are parcillase or sais or your person	archase or sale or your pers	Old residence, dilless it is relited out.	a lettien out. Liotide a pilet
SP, DC,		Type of		
JT	Asset	Transaction	Date	Amount of Transaction
	Equitable Variable Life Insurance Mutual Fund: AXA Moderate Allocation	P	12/3/07	\$1,001 - \$15,000
	Fidelity Balanced Fund	S(part)	12/3/07	\$1,001 - \$15,000
	Fidelity Asset Manager 50%	S(part)	12/3/07	\$1,001 - \$15,000
	Fidelity Spartan US Equity Fund	S(part)	12/3/07	\$1,001 - \$15,000
1	TIAA CREF Lifecycle 2035	ס	Semi-monthly	\$1,001 - \$15,000
	TIAA CREF Real Estate	ס	Semi-monthly	\$1,001 - \$15,000
	Fidelity Value Discovery Fund	ם .	Semi-monthly plus dividend reinvestment	\$1,001 - \$15,000
	Wasatch Micro Cap Fund	S(part)	12/3/07	\$1,001 - \$15,000

# SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name James David Matheson

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spouse or dependent child that is totally independent of his or her relationship to you. 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 sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under 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 Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$305 received by you,

None	Z	<b>Y</b>	~	Oct. 14-15 Salt Lake City-Phoenix-Salt Lake City	Oct. 14-15	National Federation of Independent Business
Days not at sponsor's expense	Was a Family ? Food? Member Included? (Y/N) (Y/N)	Food? (Y/N)	Lodging (Y/N)	Point of Departure DestinationPoint of Return	Date(s)	Source