	hics. 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 Ethics.	excluded from this report any other assets, "unearned" in meet all three tests for exemption? Do not answer "y	Exemptions Have you because
	Yes No 🗸	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?	parding "Qualified Bilind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" ne Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Trusts Defaits reg
	Yes No V	itial Public Offering?	Did you purchase any shares that were allocated as a part of an Initial Public Offering?	IPO Did you p
	SE QUESTIONS	INFORMATION ANSWER EACH OF THESE QUESTIONS	IPO and EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION A	PO and EXCLUSION C
		schedule attached for each "Yes" response.	chedule V.	If yes, complete and attach Schedule V
	and the appropriate	Each question in this part must be answered and the appropriate	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes V No	V. (more than \$10,000) during the reporting period?
		If yes, complete and attach Schedule IX.	chedule IV.	If yes, complete and attach Schedule IV.
	outside Yes No	Did you have any reportable agreement or arrangement with an outside 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 Yes 🕢 No 🗔 period?	IV. reportable asset in a transaction nerhod?
		If yes, complete and attach Schedule VIII.	chedule III.	If yes, complete and attach Schedule III.
	ling in the Yes 🗸 No 🗌	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Did you, your spouse, or a dependent child receive "unearmed" income of more than \$200 in the reporting period or hold any reportable asset worth Yes V No No No No No No No No	Did you, your spouse, or a dependent child III. more than \$200 in the reporting period or I more than \$1,000 at the end of the period?
		If yes, complete and attach Schedule VII.	chedule II.	If yes, complete and attach Schedule II.
	ie travel or ian \$350 Yes 🔲 No 🕢	Old you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$350 from one source)?	you for a speech, appearance, or article in the reporting period? Yes No 🗹	II. you for a speech, appearance, or article in the reporting period?
		If yes, complete and attach Schedule VI.	chedule I.	If yes, complete and attach Schedule I.
	legift in therwise 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 \$350 and not otherwise exempt)?	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 spouse have "eal. or more from any source in the r
		DUESTIONS	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	PRELIMINARY INFORM
	more than 30 days late.	Termination Date:	1ay 15) ☐ Amendment ☐ Termination	Report Type Annual (May 15)
	A \$200 penety shall be assessed against anyone who files	Officer Or Employing Office:	State: IN Itatives District: 01	Filer Member of the U.S Status
· ~	Zil Jill (Ortice Use Only) J	(Daytime Telephone) 🗸 Ü	(Full Name)	
3	ISSULTATIVE RECOURSE SENT	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	Peter J. Visclosky	
Ö	ND DELIVES	FORM A Page 1 of 8 ND DELIVERED	ÜNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT	ÙNITED STATES ⊢ CALENDAR YEAR 2012 FI

SCHEDULE I - EARNED INCOME

Name Peter J. Visclosky

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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
U.S. Department of Labor, Washington, DC	Spouse Salary	N/A

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SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Peter J. Visclosky	isclosky		Page 3 of 8
	BLOCK A	вгоск в	вгоск с	BLOCK D	BLOCK E
Asset a lidentify (a) each assay value exceeding \$1, reportable asset or "unearmed" income Provide complete ou For all IRAs and oth each asset held in the each asset held in the for an ownership in state the name of the location in Block A. Exclude: Your persecutives there was re \$5,000 or less in a p in, or income derive Savings Plan. If you so choose, yo spouse (SP) or depart optional column on For a detailed discuinstruction booklet.	Asset and/or income Source identity (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. Provide complete names of stocks and mutual funds (do not use ticker symbols.) For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds. For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and a city and state. 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. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. 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 with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	Year-End Value of Asset Indicate 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 during the reporting year and is included only because it generated income, the value should be "None." * This column is for assets held solely by your spouse or dependent child.	Type of Income 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.	Amount of Income For assets for which you checked "Tax-Deferred" in Block C, 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. * This column is for income generated by assets held solely by your spouse or dependent child.	Transaction Indicate if asset had purchases {P}, sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
If you so choos spouse (SP) or optional column For a detailed d instruction boo	ue, you may indicate that an asset or income source is that of your dependent child (DC), or is jointly held with your spouse (JT), in the n on the far left. Iscussion of Schedule III requirements, please refer to the kilet.		•		
SP	IRA Rollover Vanguard 500 Index Fund	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	
SP	IRA Rollover Vanguard Morgan Growth Fund	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	IRA Rollover Vanguard Strategic Equity Fund	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	IRA Rollover Vanguard Wellington Fund	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	
SP	IRA Rollover Vanguard Selected Value Fund	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	IRA Sentinel Sustainable Core Opportunities	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	

SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	E Name Peter J. Visclosky	risclosky		Page 4 of 8
SP	Pepsico Stock Shares	\$100,001 - \$250,000	SGNAGIAID	\$2,501 - \$5,000	
SP	Roth IRA - Sentinel Sustainable Core Opportunities	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Roth IRA - Sentinel Sustainable Growth	\$1,001 - \$15,000	CAPITAL GAINS	\$201 - \$1,000	
SP	Roth IRA Vanguard International Value Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Vanguard Tax-Managed Small- CAP	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	Dept. of Labor Credit Union - Reward Checking	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
DC	Dodge & Cox Stock Fund	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	တ
DC	Mutual Quest Fund	\$15,001 - \$50,000	DIVIDENDS/CAPI TAL GAINS	\$2,501 - \$5,000	တ
DC	People's Bank Savings Account	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
	People's Bank Checking Account	\$250,001 - \$500,000	INTEREST	\$201 - \$1,000	
	Congressional Federal Credit Union Checking Account	\$1 - \$1,000	None	NONE	
	Merrill Lynch Bank - IRA (Cash)	\$100,001 - \$250,000	INTEREST	\$1 - \$200	
	Northwest Indiana Bancorp - IRA (Stock)	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	Vanguard Total International Stock Index	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	

SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	∦E Name Peter J. Visclosky	Visclosky		Page 5 of 8
SP	Merrill Lynch - Ready Assets	\$1,001 - \$15,000	DIVIDENDS/INTE \$1 - \$200 REST	\$1 - \$200	
SP	Merrill Lynch - Cash	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
ЯS	GNMA CMO 2009	\$50,001 - \$100,000	INTEREST	\$1,001 - \$2,500	

SCHEDULE IV - TRANSACTIONS

Name Peter J. Visclosky Page 6 of 8

is sold, please so indicate (i.e., "partial sale"). See example below. Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset

Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III. This column is for assets solely held by your spouse or dependent child.

SP.			Capital		
DC,	Asset	Type of Transaction	Gain in Excess of \$200?	Date	Amount of Transaction
DC	Dodge & Cox Stock Fund	S	Yes	07-30-12	\$15,001 - \$50,000
DC	Dodge & Cox Stock Fund	S	Yes	07-30-12	\$15,001 - \$50,000
DC	Mutual Quest Fund	S	Yes	07-30-12	\$1,001 - \$15,000
DC	Mutual Quest Fund	S	Yes	07-30-12	\$1,001 - \$15,000

SCHEDULE V - LIABILITIES

Name Peter J. Visclosky 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. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude:

Any mortgage on your personal residence (unless it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or for liabilities held solely by your spouse or dependent child. 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. *This column is

People's Bank, Munster, Indiana	SP, DC, JT Cre
	Creditor Date Liabi
mber	Date Liability Incurred
Mortgage on Personal Residence, Merrillville, Inidana	Type of Liability
\$15,001 - \$50,000	Amount of Liability

SCHEDULE VIII - POSITIONS

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

Name Peter J. Visclosky

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honorary nature; and positions listed on Schedule I.	
Position	Name of Organization
Trustee	The Visclosky Foundation, P.O. Box 10847, Merrillville, Indiana 46411