

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT

FORM A For use by Members, officers, and employees

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HAND DELIVERED

MICHAEL H. MICHAUD

(Full Name)

202-225-6306

(Daytime Telephone)

LEGISLATIVE RESOURCE CENTER

2012 MAY -7 PM 4: 29

(OFFICE USE ONLY) CLERK

U.S. HOUSE OF REPRESENTATIVES

Filer Status Member of the U.S. House of Representatives State: ME District: 02 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.

ME

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 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 \$350 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 \$350 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 type="checkbox"/> No <input checked="" 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 type="checkbox"/> No <input checked="" 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 checked="" type="checkbox"/> No <input 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 type="checkbox"/> No <input checked="" 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

Trusts- 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 No

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 Ethics. Yes No

SCHEDULE I - EARNED INCOME

Name MICHAEL H. MICHAUD

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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
International Association of Machinists	Pension income	\$1,116

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name MICHAEL H. MICHAUD

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 reportable asset or source 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) 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. For rental or other real property held for investment, provide a complete address. For an ownership interest in a privately-held business that is not publically 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.	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 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.	BLOCK D Amount of Income 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.	BLOCK E Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
<p>Michaud & Michaud Partnership (50% interest), properties as follows:</p>				
<p>109 Main Street, East Millinocket, ME</p>	<p>\$15,001 - \$50,000</p>	<p>RENT</p>	<p>\$5,001 - \$15,000</p>	
<p>111 Main Street, East Millinocket, ME</p>	<p>\$15,001 - \$50,000</p>	<p>RENT</p>	<p>\$5,001 - \$15,000</p>	
<p>6.5 acres of land, Medway, ME</p>	<p>\$1,001 - \$15,000</p>	<p>None</p>	<p>NONE</p>	
<p>Ameriprise One Financial accounts as follows:</p>				
<p>Money Market</p>	<p>\$15,001 - \$50,000</p>	<p>INTEREST</p>	<p>\$1 - \$200</p>	<p>P</p>

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name MICHAEL H. MICHAUD

PIMCO Total Return - C	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
Col Port Bldr Mod - A	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	P
RVS Cash Management Money Mkt A	\$1,001 - \$15,000	None	NONE	
Ameriprise Variable Universal Life as follows:				
Fixed Account	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
RVS VP Div Eq Inc Fd	None	DIVIDENDS	\$1 - \$200	S
MFS Investors Growth	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	S(part)
Disc Alloc Port Md A	None	None	NONE	S
VP Mod Aggressive C12	\$50,001 - \$100,000	DIVIDENDS	\$201 - \$1,000	P
IRA Ameriprise as follows:				
Money Market	\$1 - \$1,000	None	NONE	
Midcap Value A	\$1,001 - \$15,000	None	NONE	
J Hancock GLB OPPS - A	\$1,001 - \$15,000	None	NONE	
Pimco Total Return - D	\$1,001 - \$15,000	None	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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Tem Global Bond - A	\$1,001 - \$15,000	None	NONE	
J Hancock High Yield - A	\$1,001 - \$15,000	None	NONE	
Ameriprise Roth Conversion IRA as follows:				
Fid Adv High Inc Adv - A	\$15,001 - \$50,000	None	NONE	P
Col Port Bidr Mod Agg - A	\$1,001 - \$15,000	None	NONE	P
M&M Partnership, Augusta, ME (50% interest)	\$50,001 - \$100,000	RENT	\$2,501 - \$5,000	
Maine State Retirement (not self-directed)	\$15,001 - \$50,000	None	NONE	
East Mill FCU accounts	\$1,001 - \$15,000	INTEREST	\$1 - \$200	

SCHEDULE IV - TRANSACTIONS

Name MICHAEL H. MICHAUD

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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
	Col Port Bldr Mod - A	P	N/A	4-18-11	\$15,001 - \$50,000
	Money Market	P	N/A	Monthly	\$15,001 - \$50,000
	Col Port Bldr Mod Agg - A	P	N/A	8-23-11	\$15,001 - \$50,000
	Col Marisco 21st Cent - A	S	No	8-23-11	\$1,001 - \$15,000
	Col Value & Restruct - A	S	No	8-23-11	\$1,001 - \$15,000
	Disc Alloc Port Md A	S	No	4-29-11	\$15,001 - \$50,000
	RVS VP Div Eq Inc Fd	S	No	8-19-11	\$1,001 - \$15,000
	VP Mod Aggressive C12	P	N/A	4-29-11	\$50,001 - \$100,000
	VP Mod Aggressive C12	P	N/A	8-19-11	\$1,001 - \$15,000
	MFS Investors Growth	S(part)	No	8-19-11	\$1,001 - \$15,000

SCHEDULE IX - AGREEMENTS

Name MICHAEL H. MICHAUD

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Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
June 2011	International Association of Machinists Pension Plan	National Pension Plan

FOOTNOTES

Name MICHAEL H. MICHAUD

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Number	Section / Schedule	Footnote	This note refers to the following item
1	Schedule I	Some of the assets in the IRA Ameriprise account were partially rolled over to the Ameriprise Roth Conversion IRA account	Ameriprise IRA and Roth Conversion IRA