

FINANCIAL DISCLOSURE REPORT FOR CALENDAR YEAR 2008

Report Required by the Ethics
in Government Act of 1978
(5 U.S.C. app. §§ 101-111)

1. Person Reporting (last name, first, middle initial) Lourie, Alan D.	2. Court or Organization U.S. Ct of Appeals-Fed Circuit	3. Date of Report 03/16/2009
4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time) U.S. Circuit Judge	5a. Report Type (check appropriate type) ☐ Nomination, Date ☐ Initial ☒ Annual ☐ Final 5b. ☐ Amended Report	6. Reporting Period 01/01/2008 to 12/31/2008
7. Chambers or Office Address Howard T. Markey Nat Cts Bldg 717 Madison Place NW Washington, DC 20439	8. On the basis of the information contained in this Report and any modifications pertaining thereto, it is, in my opinion, in compliance with applicable laws and regulations. Reviewing Officer _____ Date _____	
IMPORTANT NOTES: The instructions accompanying this form must be followed. Complete all parts, checking the NONE box for each part where you have no reportable information. Sign on last page.		

I. POSITIONS. (Reporting individual only; see pp. 9-13 of filing instructions.)

☐ NONE (No reportable positions.)

<u>POSITION</u>	<u>NAME OF ORGANIZATION/ENTITY</u>
1. Trustee	Trust
2. Member	Temple Law School Board of Visitors
3.	
4.	
5.	

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II. AGREEMENTS. (Reporting individual only; see pp. 14-16 of filing instructions.)

☐ NONE (No reportable agreements.)

<u>DATE</u>	<u>PARTIES AND TERMS</u>
1. 4/6/90	GlaxoSmithKline, successor to former employer, provides pension and retiree group health and life insurance
2.	
3.	

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III. NON-INVESTMENT INCOME. *(Reporting individual and spouse; see pp. 17-24 of filing instructions.)***A. Filer's Non-Investment Income**☐NONE *(No reportable non-investment income.)*

<u>DATE</u>	<u>SOURCE AND TYPE</u>	<u>INCOME</u> (yours, not spouse's)
1. Jan-Dec	GlaxoSmithKline pension	\$88,273.00
2.		
3.		
4.		

B. Spouse's Non-Investment Income - If you were married during any portion of the reporting year, complete this section.*(Dollar amount not required except for honoraria.)*☒NONE *(No reportable non-investment income.)*

<u>DATE</u>	<u>SOURCE AND TYPE</u>
1.	
2.	
3.	
4.	

IV. REIMBURSEMENTS *- transportation, lodging, food, entertainment.**(Includes those to spouse and dependent children; see pp. 25-27 of filing instructions.)*☐NONE *(No reportable reimbursements.)*

<u>SOURCE</u>	<u>DATES</u>	<u>LOCATION</u>	<u>PURPOSE</u>	<u>ITEMS PAID OR PROVIDED</u>
1. Harvard Law School	9/8/08-9/9/08	Cambridge, Mass.	participate in IP conf	hotel, airfare, meals
2. Va state bar, IP section	9/26/08-9/27/08	Williamsburg, VA	give speech to conference	hotel, mileage, meals
3.				
4.				
5.				

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V. GIFTS. *(Includes those to spouse and dependent children; see pp. 28-31 of filing instructions.)*☐ NONE *(No reportable gifts.)*

<u>SOURCE</u>	<u>DESCRIPTION</u>	<u>VALUE</u>
1. Intellectual Property Owners Educational Foundation	dinner for [REDACTED] me when I was honored	\$1,250.00
2.		
3.		
4.		
5.		

VI. LIABILITIES. *(Includes those of spouse and dependent children; see pp. 32-33 of filing instructions.)*☒ NONE *(No reportable liabilities.)*

<u>CREDITOR</u>	<u>DESCRIPTION</u>	<u>VALUE CODE</u>
1.		
2.		
3.		
4.		
5.		

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VII. INVESTMENTS and TRUSTS – income, value, transactions (Includes those of spouse and dependent children; see pp. 34-60 of filing instructions.)



NONE (No reportable income, assets, or transactions.)

A. Description of Assets (including trust assets) Place "(X)" after each asset exempt from prior disclosure	B. Income during reporting period		C. Gross value at end of reporting period		D. Transactions during reporting period				
	(1) Amount Code 1 (A-H)	(2) Type (e.g., div., rent, or int.)	(1) Value Code 2 (J-P)	(2) Value Method Code 3 (Q-W)	(1) Type (e.g., buy, sell, redemption)	(2) Date Month - Day	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A-H)	(5) Identity of buyer/seller (if private transaction)
1. Vanguard Tax Exempt MM Fund 1	B	Dividend	L	T					
2. Vanguard Tax Exempt MM Fund 2	A	Dividend	K	T					
3. Franklin Templeton Mutual Shares Fund	C	Dividend	M	T					
4. Vanguard Health Care Fund	E	Dividend	M	T					
5. T Rowe Price Cap Appreciation Fund (IRA)	C	Dividend	M	T					
6. Vanguard Windsor II Fund	C	Dividend	L	T					
7. Vanguard ST Bond Index Fund (IRA)	D	Dividend	M	T	buy (add'l)	3/10	J		
8.					Distributed (part)	2/11	J		see VIII
9.					Distributed (part)	10/31	J		see VIII
10. TIAA-CREF	B	Interest	K	T	rollover	3/2	J		see VIII
11. PNC Bank checking account	A	Interest	K	T					
12. US Treasury Notes	B	Interest	K	T					
13. Vanguard 500 Index Fund	D	Dividend	N	T	Buy (add'l)	10/27	M		
14. Vanguard Extended Market Index Fund	C	Dividend	M	T					
15. Vanguard Global Equity Fund	C	Dividend	L	T					
16. Fidelity Cap Appreciation Fund	D	Dividend			Sold	11/24	K	A	
17. Fidelity Value Fund	D	Dividend			Sold	11/21	K	A	

1. Income Gain Codes: (See Columns B1 and D4)	A = \$1,000 or less F = \$50,001 - \$100,000 J = \$15,000 or less N = \$250,001 - \$500,000 P3 = \$25,000,001 - \$50,000,000	B = \$1,001 - \$2,500 G = \$100,001 - \$1,000,000 K = \$15,001 - \$50,000 O = \$500,001 - \$1,000,000	C = \$2,501 - \$5,000 H1 = \$1,000,001 - \$5,000,000 L = \$50,001 - \$100,000 P1 = \$1,000,001 - \$5,000,000 P4 = More than \$50,000,000	D = \$5,001 - \$15,000 H2 = More than \$5,000,000 M = \$100,001 - \$250,000 P2 = \$5,000,001 - \$25,000,000	E = \$15,001 - \$50,000
2. Value Codes (See Columns C1 and D3)	Q = Appraisal U = Book Value	R = Cost (Real Estate Only) V = Other	S = Assessment W = Estimated	T = Cash Market	
3. Value Method Codes (See Column C2)					

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18. Vanguard Internat Explorer Fund	B	Dividend	K	T					
19. Vanguard European Fund	D	Dividend	L	T					
20. T. Rowe Price Summit Munic IM Fd	D	Dividend			Buy (add'l)	2/22	K		
21.					Buy (add'l)	5/22	K		
22.					Buy (add'l)	8/22	K		
23.					Buy (add'l)	11/24	K		
24.					Sold	12/16	N	A	
25. Vanguard Equity Income Fund	E	Dividend			Sold	10/27	M	A	
26. T Rowe Price Short Term Bond Fund (IRA)	F	Dividend	P1	T	partial sale	2/22	K		see VIII
27.					Sold (part)	2/13	J		see VIII
28.					partial sale	5/22	K		see VIII
29.					partial sale	8/22	K		see VIII
30.					partial sale	11/24	K		see VIII
31.					Sold (part)	8/25	K		see VIII
32. Vanguard ST Tax Exempt Fund 1	E	Dividend	O	T	Sold (part)	5/27	M	B	
33.					Sold (part)	8/25	L	B	
34. Vanguard ST Tax Exempt Fund 2	D	Dividend	N	T	buy (add'l?)	2/11	J		

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2. Value Codes (See Columns C1 and D3)	J = \$15,000 or less N = \$250,001 - \$500,000 P3 = \$25,000,001 - \$50,000,000	K = \$15,001 - \$50,000 O = \$500,001 - \$1,000,000	L = \$50,001 - \$100,000 P1 = \$1,000,001 - \$5,000,000 P4 = More than \$50,000,000	M = \$100,001 - \$250,000 P2 = \$5,000,001 - \$25,000,000	
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35.					buy	10/31	J		
36. Vanguard Limited Term TE Fund 1	D	Dividend	N	T					
37. Vanguard Intermed TE Fund	E	Dividend			Sold	11/26	O	A	
38. TR Price Internat Disc Fd (IRA)	A	Dividend	L	T					
39. TR Price New Horizon Fd (IRA)	C	Dividend	L	T	buy	8/25	K		
40. Vanguard Dividend Growth Fund	A	Dividend	L	T	Buy	11/24	K		
41.					Buy (add'l)	11/25	K		
42. Vanguard PrimeCap Core Fd	B	Dividend	M	T	Buy	8/25	L		
43.					Buy (add'l)	11/21	K		
44. Vanguard Limited Tm TE Fund 2	B	Dividend	O	T	Buy	11/26	O		
45. T. Rowe Price GNMA Fd	A	Dividend	N	T	Buy	12/16	N		
46. Sequoia Fund	B	Dividend	K	T	Buy	6/3	K		
47. Trust (following item)									
48. PNC Bank checking account		None			Closed	11/10	J		

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VIII. ADDITIONAL INFORMATION OR EXPLANATIONS. *(Indicate part of Report.)*

Items 8, 9, 10, 26, 27, 28, 29, 30, and 31 in Part VII do not provide gains in D4, because they were within an IRA or a rollover so that there was no recognized gain.

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K. CERTIFICATION.

I certify that all information given above (including information pertaining to my spouse and minor or dependent children, if any) is accurate, true, and complete to the best of my knowledge and belief, and that any information not reported was withheld because it met applicable statutory provisions permitting non-disclosure.

I further certify that earned income from outside employment and honoraria and the acceptance of gifts which have been reported are in compliance with the provisions of 5 U.S.C. app. § 501 et. seq., 5 U.S.C. § 7353, and Judicial Conference regulations.

Signature

A black rectangular box redacting the signature of the reporting person.

NOTE: ANY INDIVIDUAL WHO KNOWINGLY AND WILFULLY FALSIFIES OR FAILS TO FILE THIS REPORT MAY BE SUBJECT TO CIVIL AND CRIMINAL SANCTIONS (5 U.S.C. app. § 104)

FILING INSTRUCTIONS

Mail signed original and 3 additional copies to:

Committee on Financial Disclosure
Administrative Office of the United States Courts
Suite 2-301
One Columbus Circle, N.E.
Washington, D.C. 20544