

FINANCIAL DISCLOSURE REPORT FOR CALENDAR YEAR 2005

1. Person Reporting <i>(Last name, first, middle initial)</i> MORENO, FEDERICO A.	2. Court or Organization SOUTHERN DISTRICT OF FLORIDA	3. Date of Report 05/10/2006
4. Title <i>(Article III judges indicate active or senior status; magistrate judges indicate full- or part-time)</i> U.S. DISTRICT JUDGE - ACTIVE	5a. Report Type (check appropriate type) ___ Nomination, Date _____ ___ Initial <input checked="" type="checkbox"/> Annual ___ Final 5b. ___ Amended Report	6. Reporting Period 1/1/2005-12/31/2005
7. Chambers or Office Address Federal Justice Building 99 N.E. 4th Street, #1061 Miami, Florida 33132	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 Instructions.)*

	<u>POSITION</u>	<u>NAME OF ORGANIZATION/ENTITY</u>
<input checked="" type="checkbox"/>	NONE (No reportable positions.)	
1	_____	_____
2	_____	_____
3	_____	_____

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II. AGREEMENTS. *(Reporting individual only; see pp. 14-16 of Instructions.)*

	<u>DATE</u>	<u>PARTIES AND TERMS</u>
<input checked="" type="checkbox"/>	NONE (No reportable agreements.)	
1	_____	_____
2	_____	_____

III. NON-INVESTMENT INCOME. *(Reporting individual and spouse; see pp. 17-24 of Instructions.)*

	<u>DATE</u>	<u>SOURCE AND TYPE</u>	
A. Filer's Non-Investment Income			
<input type="checkbox"/>	NONE (No reportable non-investment income.)		
1		Adjunct Professor Stipend-Univ. Of Miami Law School	\$ 6,000
2		_____	\$
3		_____	\$

B. Spouse's Non-Investment Income - If you were married during any portion of the reporting year, please complete this section. (dollar amount not required except for honoraria)

<input checked="" type="checkbox"/>	NONE (No reportable non-investment income.)
1	_____
2	_____

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IV. REIMBURSEMENTS -- transportation, lodging, food, entertainment.
(Includes those to spouse and dependent children. See pp. 25-27 of Instructions.)

	<u>SOURCE</u>	<u>DESCRIPTION</u>
<input checked="" type="checkbox"/>	NONE (No such reportable reimbursements.)	
1		
2		
3		
4		
5		
6		
7		

V. GIFTS. *(Includes those to spouse and dependent children. See pp. 28-31 of Instructions.)*

	<u>SOURCE</u>	<u>DESCRIPTION</u>	<u>VALUE</u>
<input checked="" type="checkbox"/>	NONE (No such reportable gifts.)		
1			\$
2			\$
3			\$
4			\$

VI. LIABILITIES. *(Includes those of spouse and dependent children. See pp. 32-33 of Instructions.)*

	<u>CREDITOR</u>	<u>DESCRIPTION</u>	<u>VALUE CODE*</u>
<input checked="" type="checkbox"/>	NONE (No reportable liabilities.)		
1			
2			
3			
4			
5			

*Value Codes: J-\$15,000 or less K-\$15,001-\$50,000 L-\$50,001-\$100,000 M-\$100,001-\$250,000
 N-\$250,001-\$500,000 O-\$500,001-\$1,000,000 P1-\$1,000,001-\$5,000,000
 P2-\$5,000,001-\$25,000,000 P3-\$25,000,001-\$50,000,000 P4-\$50,000,001 or more

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VII. Page 1 INVESTMENTS and TRUSTS -- income, value, transactions (Includes those of spouse and dependent children. See pp. 34-60 of Instructions.)

A Description of Assets (including trust assets) <i>Place "(X)" after each asset exempt from prior disclosure.</i>	B. Income during reporting period.		C. Gross value at end of reporting period		D. Transactions during reporting period				
	(1)	(2)	(1)	(2)	(1)	If not exempt from disclosure			
	Amt. Code1 (A-H)	Type (e.g., div., rent or int.)	Value Code2 (J-P)	Value Method Code3 (Q-W)	Type (e.g., buy, sell, merger, redemption)	(2) Date: Month- Day	(3) Value Code2 (J-P)	(4) Gain Code1 (A-H)	(5) Identity of buyer/seller (if private transaction)
<input type="checkbox"/> NONE (No reportable income, assets, or transactions.)									
1 Prudential I.R.A. Mutual Funds	A	Interest	K	T					
2 Prudential (IRA Mutual Funds) Prudential Money Market	A	Interest	K	T					
3 Coconut Grove Bank	A	Interest	K	T					
4 Prudential Securities- Gas System Revenue Series	B	Earn.	K	T					
5 Equitable Variable Life Ins. Co.	A	Earn.	K	T					
6 Prudential Variable Investment	A	Earn.	K	T					
7 Mutual Funds (Citi Street)	D	Earn.	M	T					
8 Mellon United National Bank	C	Interest	N	T					
9 Certificate of Deposit-City National Bank	A	Interest	K	T					
10 Sun Trust Bank Money Market	A	Interest	L	T					
11 Premier American Bank Certificate	A	Interest	K	T					
12									
13									
14									
15									
16									

1	Income/Gain Codes: (See Col. B1, D4)	A-\$1,000 or less F-\$50,001-\$100,000	B-\$1,001-\$2,500 G-\$100,001-\$1,000,000	C-\$2,501-\$5,000 H1-\$1,000,001-\$5,000,000	D-\$5,001-\$15,000 H2-More than \$5,000,000	E-\$15,001-\$50,000
2	Value Codes: (See Col. C1, 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	
3	Value Method Codes: (See Col. C2)	Q-Appraisal U-Book value	R-Cost (real estate only) V-Other	S-Assessment W-Estimated	T-Cash/Market	

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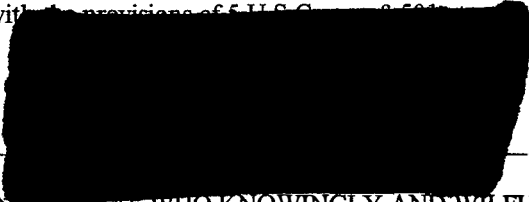
VIII. ADDITIONAL INFORMATION OR EXPLANATIONS (Indicate part of Report.)

IX. 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. § 504 and 5 U.S.C. § 7353 and Judicial Conference regulations.

Signature _____



Date _____

May 10, 2006

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