

**FINANCIAL DISCLOSURE REPORT
FOR CALENDAR YEAR 2012**

1. Person Reporting (last name, first, middle initial) LOZANO, RODOLFO	2. Court or Organization US DISTRICT COURT	3. Date of Report 04/24/2013
4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time) DISTRICT JUDGE - SENIOR	5a. Report Type (check appropriate type) <input type="checkbox"/> Nomination Date <input type="checkbox"/> Initial <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Final 5b. <input type="checkbox"/> Amended Report	6. Reporting Period 01/01/2012 to 12/31/2012
7. Chambers or Office Address 5400 FEDERAL PLAZA SUITE 4300 HAMMOND, IN 46320		
IMPORTANT NOTES: <i>The instructions accompanying this form must be followed. Complete all parts, checking the NONE box for each part where you have no reportable information.</i>		

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. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

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. _____	_____
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> <i>(yours, not spouse's)</i>
1.	_____	_____	_____
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.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
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.		
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. TRANSAMERICA LIFE INSURANCE CO	INSURANCE LOAN	M
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)	(2)	(1)	(2)	(1)	(2)	(3)	(4)	(5)
		Amount Code 1 (A-H)	Type (e.g., div., rent, or int.)	Value Code 2 (J-P)	Value Code 3 (Q-W)	Type (e.g., buy, sell, redemption)	Date mm/dd/yy	Value Code 2 (J-P)	Gain Code 1 (A-H)	Identity of buyer/seller (if private transaction)
1.	EFFRON II, LTD PARTNERSHIP, YPSILANTI, MI, REAL ESTATE	B	Rent	K	W					
2.	TRANSAMERICA INSURANCE CO - WHOLE LIFE	A	Dividend	J	T					
3.	TRANSAMERICA INSURANCE CO - UNIVERSAL LIFE	A	Dividend	J	T					
4.	TRANSAMERICA INSURANCE CO - UNIVERSAL LIFE	A	Dividend	J	T					
5.	TRANSAMERICA INSURANCE CO - UNIVERSAL LIFE	A	Dividend	J	T					
6.	TRANSAMERICA INSURANCE CO - UNIVERSAL LIFE	A	Dividend	J	T					
7.	PRUDENTIAL INSURANCE CO - LIMITED PAY POLICY	A	Dividend	J	T					
8.	PRUDENTIAL INSURANCE CO - LIMITED PAY POLICY	A	Dividend	J	T					
9.	PRUDENTIAL INSURANCE CO - LIMITED PAY POLICY	A	Dividend	J	T					
10.	METROPOLITAN LIFE INSURANCE CO	A	Dividend	J	T					
11.	JP MORGAN CHASE BANK	A	Int/Div.	J	T					
12.	CENTIER BANK	A	Int/Div.	J	T					
13.	FIFTH THIRD BANK	A	Int/Div.	J	T					
14.	INCOME BENEFICIARY - [REDACTED] LIQUIDATING TRUST		None	J	W					
15.	WELLS FARGO									
16.	- CASH	A	Interest	L	T					
17.	- AT&T INC (COMMON STOCK)	D	Dividend	M	T					

1. Income Gain Codes: (See Columns B1 and 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 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	
3. Value Method Codes (See Column C2)	Q = Appraisal U = Book Value	R = Cost (Real Estate Only) V = Other	S = Assessment W = Estimated	T = Cash Market	

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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)	(2)	(1)	(2)	(1)	(2)	(3)	(4)	(5)
	Amount Code 1 (A-H)	Type (e.g., div., rent, or int.)	Value Code 2 (J-P)	Value Method Code 3 (Q-W)	Type (e.g., buy, sell, redemption)	Date mm/dd/yy	Value Code 2 (J-P)	Gain Code 1 (A-H)	Identity of buyer/seller (if private transaction)
18. - KINDER MORGAN ENERGY PARTNERS (COMMON STOCK)	B	Distribution	L	T					
19. - NISOURCE (COMMON STOCK)	B	Dividend	L	T					
20. - NEW JERSEY HEALTH CARE (MUNI BOND)		None			Redeemed	01/03/12	J	A	
21. - TULSA CNTY OK (MUNI BOND)	A	Interest	K	T					
22. - TARRANT CNTY TX (MUNI BOND)	A	Interest	K	T					
23. - BLACKROCK NATIONAL MUNICIPAL FUND (MUTUAL FUND)	E	Int./Div.	O	T					
24. - NUVEEN EQUITY PREMIUM OPPORTUNITY FUND (MUTUAL FUND)	A	Dividend	J	T					
25. GUGG LRG CAP CORE 18 (UNIT INVESTMENT TRUST)	A	Dividend	K	T	Buy	05/24/12	K		
26. WELLS FARGO (IRA)									
27. - CASH	A	Interest	J	T	Buy	06/20/12	J		
28. - BAC CAP TR VIII (PREFERRED STOCK)	B	Dividend	K	T	Buy	06/22/12	K		
29. - CITIGROUP (PREFERRED STOCK)	B	Dividend	K	T	Buy	06/22/12	K		

1. Income Gain Codes: (See Columns B 1 and 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 Columns C 1 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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LOZANO, RODOLFO

Date of Report

04/24/2013

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. app. § 501 et. seq., 5 U.S.C. § 7353, and Judicial Conference regulations.

Signature: s/ **RODOLFO LOZANO**

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

Committee on Financial Disclosure
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