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Exemptions	Trusts-	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWE	If yes, complete and attach Schedule V	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	period? If yes, complete and attach Schedule IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting	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.	If yes, complete and attach Schedule 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 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?	PRELIMINARY INFORMATION	Report Type	Filer Status				UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT	
ons		ON OF	ıpiete aı	ır spouse \$10,000) c	ıpiete ar	ır spouse ısset in a	200 in the 1,000 at t	plete ar	vidual or for a spec	າplete aເ	our spou	AŘY	⟨ √	<u> </u>				STA	
Have yo	Details trusts" child?	SPC	nd attac	, or a dep	nd attac	, or depe transacti	e reporting the end of attac	nd attac	organiza ech, appe	nd attac	se have ' ny source	INFO	Annua	Memb∈ House				TES 2008	
e they m	regardii need no	USE,	n Sched	endent c	1 Sched	ndent chi on excee	g period the perion Sched	n Sched	tion make arance, o	h Sched	earned" i in the re	TAMS	Annual (May 15)	Member of the U.S House of Represer				HOU	
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	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct 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?	DEPE	ule V.	hild have g period?	ule IV.	ld purcha	or hold an d? ule III.	ule II.	a donation article in	ule i.	ncome (e.		15)	Member of the U.S. House of Representative	(Fu	Во		SE C	
Have you excluded from this re because they meet all three test Standards of Official Conduct	lified Bli closed.	NDE		any repor		se, sell, o 0 during	ny reporta		on to char		.g., salari eriod?	- ANS		tive	(Full Name)	Bob Inglis)F RE	
port any Is for ex	nd Trusi Have yo	NT, O		table liab	:	r exchang the repor	ble asset		ity in Heu rting peri		es or fees	WER	Amendment	State: S District: 4				PRE	
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ne, trans unless)	on Standails of su	- NO	sche	Each	If yes			If yes		If yes, co		QUESTIONS		Officer Or Employee				For us	
actions ou have	ปลrds of uch a trเ	ANS	schedule attac	Each guestion	lf yes, complete an	u have ar	current calendar year? If yes, complete and	comple	Did you, your spouse, or reimbursements for \$335 from one source	, comple	Did you, your spouse, the reporting period (i	SNC	Termir					FORN se by N	
, or liab e first co	Official st bene	WER			ete and	y reporta	r year?	te and	pouse, or ents for tr	ete and a	pouse, or eriod (i.e.,		Termination Date	Empl				I A lember	
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abilities of a spouse or dependent consulted with the Committee on	ct and co	1OF	ach "\	art mu	d attach Schedule IX.	ement or	current calendar year? If yes, complete and attach Schedule VIII.	If yes, complete and attach Schedule VII.	dent child e reportii	If yes, complete and attach Schedule VI.	dent child ting more		İ	Office:	(Daytime Telephone)	864.517.2898	:	ers, an	
se or de e Comm	ertain of spouse	THES	es" re	st be a	X	arrangen	VIII	¥.	receive a	≥ً	receive a			 	phone)	398		Page d empl	
pendent littee on	her "exc or dep	E QU	hed for each "Yes" response.	nswer		ent with			Did you, your spouse, or a dependent child receive any reportable traver or reimbursements for travel in the reporting period (worth more than \$335 from one source)?		any repor				e sious	2009 MA	1 1 341 1 2	oyees	
child	endent	R EACH OF THESE QUESTIONS	e.	in this part must be answered and the appropriate		Did you have any reportable agreement or arrangement with an outside entity?	current calendar year? If yes, complete and attach Schedule VIII.		or a dependent child receive any reportable travel r travel in the reporting period (worth more than are		Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise		mor late.	A \$	(r i	FORM A Page 1 of 10 ELIVERED For use by Members, officers, and employees	<u> </u>
Yes	Yes	SNC	1	i the ai			Yes	F '	el Yes	ļ !	in Yes		more than 30 days late.	A \$200 penalty shall be assessed against anyone who files	(Office(dise Only)	15 AMII: 00	TE DESOURCE CENTER	ERE ERE	5
			7	opropr		Yes		ļ	\Box		 1. l		1 30 da	malty sed again file	bise Or	1: 00	CENTE	Ü	
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SCHEDULE I - EARNED INCOME

Name Bob Inglis

Page 2 of 10

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. Inglis for Congress Committee. Inc. Source Spouse Salary Type N **Amount**

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by even the ex fell state of t	Name Bob Inglis	BLOCK A BLOCK B BLOCK C BLOCK C	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 assets or sources of income which generated more mutual funds (clo not use ticker symbols). For all RAs and other its value at the end of the reporting 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 and income information on each asset in that are not self-directed, name the institution holding the account and its value at the end of the reporting period. For an active business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. For additional savings accounts; any financial interest in or income derived from U.S. Government retirement programs. Year-End Value of Asset Accounts that do caccounts that at close of reporting plans or accounts that do ther assets including all of income by checking the method used. If an active business that is roctuded only because it is generated income. Dividends and into the value should be listed as income. "None." Exclude: Your spouse, or by your or your spouse's child, parent or sibling; any deposits totaling \$5,000 or less in personal savings accounts that do rocuman and its generated income. Block A. For additional savings accounts that do rot select the specific investments, you so choose seed in the method used. If an active business that is ricyou used. If an active business that is repetific investments, you of income by checking the publicly traded, state the nature of its generated income. "None." Exclude: Your spouse, or by your or your spouse's child, parent or sibling; any deposits totaling \$5,000 or less in personal savings accounts that do rocuman and the value should be listed as income. "None" if rolinvested, should not generate any income during the calendar year. Yone." Amone If you used. If	IRA FIDELITY \$15,001 - CAPITAL \$1,001 - \$2,5 INVESTEMENTS COMPOSED \$50,000 GAINS/DIVIDEN OF THE FOLLOWING:	FIDELITY ADVISOR EQUITY \$1,001 - \$15,000 CAPITAL \$201 - \$1,000 GROWTH CLT SIJEN DS/INTEREST		FIDELITY ADVISOR EQUITY \$1,001 - \$15,000 CAPITAL \$201 - \$1,00 INCOME CL T S1,001 - \$15,000 CAPITAL S201 - \$1,000 CAPITAL S201 - \$1,0
Page 3 of 10 BLOCK E Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.		вгоск в	Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, including all IRAs, indicate the category of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was earned or generated.	\$1,001 - \$2,500	\$201 - \$1,000	\$201 - \$1,000	\$201 - \$1,000
	Page 3 of 10	BLOCKE					

SCHEDULE III - ASSETS AND "UNEARNED" INCOME	
Name Bob Inglis	
Pa	

DREYFUS INTERNATIONAL FUNDS INC EMERGING MARKETS FUND	DAVIS NEW YORK VENTURE FUND INC	DWS VALUE SERIES INC DREMAN HIGH RETURN EQUITY FUND	DWS VALUE SERIES INC SMALL CAP VALUE FUND	COLUMBIA MARISCO INTERATIONALL OPPORTUNITY	COLUMBIA FUNDS SER TR MARSICO FOCUSED EQUITIES	AMERIAN CENTURY QUANTITATIVE EQUITY FUND INCOME AND GROWTH	ADVISORS INNER CIRCLE FD II INC NEW PERIMETER SMALL CAP GROWTH FD	IRA WITH WELLS FARGO ADVISORS (FORMERLY WACHOVIA, FORMERLY AG EDWARDS) COMPSED OF THE FOLLOWING:	SCHEDULE III - ASSETS AND "UNEARNED" INCOME
\$1 - \$1,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	None	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$15,001 - \$50,000	Name Bob Inglis
CAPITAL GAINS/DIVIDEN DS/INTEREST/N one	CAPITAL GAINS/DIVIDEN DS/INTEREST/N one	CAPITAL GAINS/DIVIDEN DS/INTEREST	CAPITAL GAINS/DIVIDEN DS/INTEREST/N one	CAPITAL GAINS/DIVIDEN DS/INTEREST	CAPITAL GAINS/DIVIDEN DS/INTEREST	CAPITAL GAINS/DIVIDEN DS/INTEREST	CAPITAL GAINS/DIVIDEN DS/INTEREST	CAPITAL GAINS/DIVIDEN DS/INTEREST	
\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200	\$201 - \$1,000	
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T. ROWE PRICE BLUE CHIP GROWTH FUND INC	PUTNAM SMALL CAP GROWTH	PUTNAM SMALL CAP GROWTH	Lord Abbett Mid Cap Value CL A	Lord Abbett Mid Cap Value CL A	HOTCHKISS & WILEY FDS MID CAP VALUE FD	HARBOR FUND CAP APPRECIATION FD INV	HARBOR FUND INTERNATIONAL GROWTH FD	HARBOR FUND MID CAPITAL GROWTH FUND	HARBOR FD INTERNATIONAL FD INV CL	GOLDMAN SACHS TR FINL SQUARE MONEY MARKET FD	SCHEDULE III - ASSETS AND "UNEARNED" INCOME
\$1,001 - \$15,000	None	\$1 - \$1,000	None	\$1 - \$1,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1 - \$1,000	Name Bob Inglis
CAPITAL GAINS/DIVIDEN DS/INTEREST	CAPITAL GAINS/DIVIDEN DS/INTEREST	CAPITAL GAINS/DIVIDEN DS/INTEREST	CAPITAL GAINS/DIVIDEN DS/INTEREST	CAPITAL GAINS/DIVIDEN DS/INTEREST	CAPITAL GAINS/DIVIDEN DS/INTEREST	CAPITAL GAINS/DIVIDEN DS/INTEREST	CAPITAL GAINS/DIVIDEN DS/INTEREST	CAPITAL GAINS/DIVIDEN DS/INTEREST	CAPITAL GAINS/DIVIDEN DS/INTEREST	CAPITAL GAINS/DIVIDEN DS/INTEREST	
\$1 - \$200	\$1 - \$200	\$201 - \$1,000	\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200	\$1 - \$200	
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SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Bob Inglis			Page 6 of 10
T. ROW PRICE MID-CAP GROWTH FD	\$1,001 - \$15,000	CAPITAL GAINS/DIVIDEN DS/INTEREST	\$1 - \$200	S(part)
T. ROWE PRICE INTERNATIONAL FDS EMERGING MARKETS STK	\$1 - \$1,000	CAPITAL GAINS/DIVIDEN DS/INTEREST	\$1 - \$200	S(part)
SECURITY EQUITY FUND MID CAP VALUE FUND	\$1 - \$1,000	CAPITAL GAINS/DIVIDEN DS/INTEREST	\$1 - \$200	ס
TEMPLETON DEVEL MKTS I	\$1 - \$1,000	CAPITAL GAINS/DIVIDEN DS/INTEREST	\$1 - \$200	S(part)
TEMPLETON DEVEL MKTS I	None	CAPITAL GAINS/DIVIDEN DS/INTEREST	\$1 - \$200	
WASHINGTON MUT INV FD	\$1,001 - \$15,000	CAPITAL GAINS/DIVIDEN DS/INTEREST	\$1 - \$200	S(part)
Allick Wyllie Inglis, Jr. Qualified Personal ResidenceTrust and Helen McCullough Inglis Qualified Personal Residence Trust (1/5 interest in both)	\$250,001 - \$500,000	RENT	\$2,501 - \$5,000	

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SCHEDULE IV - TRANSACTIONS

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. 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 Name Bob Inglis Page 7 of 10

less than \$ 1,000.00				
	01-22-08	S(part)	T. ROW PRICE MID-CAP GROWTH FD	
Less than \$ 1,000.00	12-05-08	ט	SECURITY EQUITY FUND MID CAP VALUE FUND	
Cess than \$ 1,000.00	11-24-08	ָר 	GOLDMAN SACHS TR FINL SQUARE MONEY MARKET FD	
Less than \$1,000.00	12-05-08	. יסד	DREYFUS INTERNATIONAL FUNDS INC EMERGING MARKETS FUND	İ
\$1,001 - \$15,000	12/04/08	S	PUTNAM SMALL CAP GROWTH	
Less man is how on	01-22-08	ס	PUTNAM SMALL CAP GROWTH	
Tran pi, coc.co	12/04-08	S	LORD ABBETT MID CAP VALUE CLA	
	01-22-08	ס	LORD ABBETT MID CAP VALUE CLA	İ
\$1,001 - \$15,000	12-04-08	S	COLUMBIA MARISCO INTERATIONALL OPPORTUNITY	
\$1,001 - \$15,000	12-05-08	ס־	HARBOR FD INTERNATIONAL GROWTH FD	
\$1,001 - \$15,000	12-04-08	ס	ADVISORS INNER CIRCLE FD II INC NEW PERIMETER SMALL CAP GROWTH FD	
Amount of Transaction	Date	Type of Transaction	Asset	DC,
				;

SCHEDULE IV - TRANSACTIONS

Name Bob Inglis

Page 8 of 10

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. 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

SP, DC,	Asset	Type of Transaction	Date	Amount of Transaction
	T. ROWE PRICE INTERNATIONAL FDS EMERGING MARKETS STK FD	S(part)	01-22-08	Less than \$1,000.00
	TEMPLETON DEVEL MKTS I	S(part)	01-22-08	less than the man on
,	TEMPLETON DEVEL MKTS I	S	12-04-08	Cess than & Lorson
	WASHINGTON MUT INV FD	S(part)	01-22-08	

SCHEDULE V - LIABILITIES

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. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or 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.

Name Bob Inglis

Page 9 of 10

	SP, DC, JT	
Bank of Travelers Rest (South Carolina)	Creditor	
Home Equity Loan	Type of Liability	
\$15,001 - \$50,000	Amount of Liability	

SCHEDULE VIII - POSITIONS

Name Bob Inglis

Page 10 of 10

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 honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Trustee Allick Wyllie Inglis, Jr. Qualified Persona	ied Personal Residence Trust
Trustee Helen McCullough Inglis Qเ	Helen McCullough Inglis Qualified Personal Residence Trust