PRELIMINARY INFORMATION — EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS \$1,000 during the reporting period? If yes, complete and attach Schedule IV. **JUNITED STATES HOUSE OF REPRESENTATIVES** be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on standards of Official Conduct and certain other "excepted trusts" need not V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding If yes, complete and attach Schedule III income of more than \$200 in the reporting period or hold any 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? Name: FORTNEY PETE CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Standards of Official Conduct **EXEMPTION**—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because If yes, complete and attach Schedule V. reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule II. reporting period? lieu of paying you for a speech, appearance, or article in the II. Did any individual or organization make a donation to charity in if yes, complete and attach Schedule I. Did you, your spouse, or a dependent child receive "unearned" Report Type Status Filer /Annual (May 15) House of Representatives Member of the U.S. District: State ANSWER EACH OF THESE QUESTIONS u Amendment ég K Yes Yes řes X Yes Daytime Telephone 202-125 - 5065 No. Š <u>₹</u> S. 8 Officer or Employee If yes, complete and attach Schedule IX. an outside entity? reportable travel or reimbursements for travel in the reporting IX. Did you have any reportable agreement or arrangement with If yes, complete and attach Schedule VIII VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? period (worth more than \$335 from one source)? VII. Did you, your spouse, or a dependent child receive any If yes, complete and attach Schedule VI. VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more For use by Members, officers, and employees If yes, complete and attach Schedule VII. than \$335 and not otherwise exempt)? appropriate schedule attached for each "Yes" response Employing Office: Each question in this part must be answered and the Termination Form A 1/4/81 Termination Date: 861 30 days late. against anyone who files more than A \$200 penalty shall be assessed U.S. HOUSEOMOR VER SEWIATIVES 2009 AUS -4 ANIO: 17 TO RESOLUCION OF MICH. Yes Yes ég X Š Š Yes Yes Š ₹ |<u>\</u> **Z** S O 8 <u>Z</u>

X

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$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. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefi	benefits received under the Social Security Act.	urity Act.
Source	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
Fxamples: State of Maryland	Legislative Pension	\$9,000
-	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	NA
Institute for Educational Ladership 4455 Comm. ave. Wash. D.C.	Spouse confuting	NA
-	thouse consulting	n A

.

Faderal Realty Trust (FRTV)	Dodge & Cox Stock Fund	Dodge & Copy local Stock Find	Acecath Corp. Com(OCTH)	Chas Schudf Inc.		SP, Sp Mega Corp. Stock	provide the value and income information on each asset in the account that exceeds the reporting threshold. For retirement plans 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 information, see the instruction booklet. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by you or your spouse's child, parent, or sibling; any deposits totalling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. 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 (JT), in the optional column on the far left.	BLOCK A Asset and/or Income Source Identity (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 asset or sources of income which generated more than \$200 in "unearned" income during the year. For rental property or land, provide a complete address. Provide full 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).
					Indefinite		None \$1.001 - \$15,000 \$1,001 - \$15,000 \$50,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$1,000,000 \$1,000,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$25,000,001 - \$5,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,000 \$25,000,000 \$25,000,000 \$25,000,000 \$25,000,000 \$25,000,000 \$25,000,000 \$25,000,000 \$25,000,000 \$25,000,000 \$25,000,000 \$25,000,000 \$25,000,000 \$25,000,000 \$25,000,000 \$25,000 \$25,000 \$25,000 \$25,000 \$25,000 \$25,000 \$25,000 \$25,000 \$25,000 \$25,000 \$25,000	BLOCK B Value of Asset Indicate 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 during the reporting year and is included only because it generated income, the value should be "None."
	X	X			Royalties	X X X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED BLIND TRUST Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	BLOCK C Type of Income Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA." For all other assets including all IRAs, indicate the type of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if asset did not generate any income during calendar year.
					X		None	Amount of Income 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, inclicate 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.
	ρ	P				S (partial)	If only a portion of an asset is sold, please indicate as follows: (S) (partial) See below for example. P, S, E	BLOCK E Transaction Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1000 in reporting year.

ONE IVIDENDS ENT	NONE
AINS = 7 E	of Income

SCHEDULE IV-TRANSACTIONS

Name FART DEY PETE STARK

										4.5. Treasury Scenitics	U.S. Treasury Securities	U.S. Theadury Securation	Van guard REIT luder Fund	Cohuse Steens REIT Fund. Partial Sale		Dodga ECox But Stack Fund	Common Sto	SP, DC, JT Asset	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.	stocks, bonds, commodities rutures, 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	Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property,
												×	X		×	×			PURGHA	SE	Type of Transaction
										\times	\times			X			×		SALE		Type
and the second													a de la companya de l				18 18 18 18 18 18 18 18 18 18 18 18 18 1		EXCHAN	ÖF	tion
										12-4-08	11-20-08	9-29-68	Various Dividend	12-11-08 Partial Sale	Convested	Various Durdendolving	10-12-08		Monthly, or Bi-weekly, if applicable	(MO/DAY/YR) or Ouarterly	Date
	, i. e.						1.7						×	×			1	Section of the second	\$1900 \$15000		(c) learn, w
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				44								A REICE						i d	\$500,001- \$1,000,000	ត	Tran
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		}										[[Over \$50,000,00	o z	

SCHEDULE V- LIABILITIES

Name FORTHEY RETE STACK

Page 6 of 8

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 it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest; 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.

		Chas. S	Relias	ami	Example:	SP, DC,	
		Chas. Schwarf, Luc.	Relianter Life ensurance, Co.	america's Servicing Co.	Example: First Bank of Wilmington, Delaware	Creditor	
	0	Margin Joan	(1)	Loanen Rental House and Se. SE Wash, Fic.	Mortgage on 123 Main St., Dover, Del.	Type of Liability	
					100 100 100 100 100 100 100 100 100 100	\$10,001- \$15,000 \$15,001-	
8, 14 B	(V. 1.1.1) 17, 2.1.1.1 13, 2.1.1.1.1.1					\$50,000 C \$50,001- D \$100,000	
\$ - 1 - 3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			\$.7%? £1		×	¢+00.001	
				\searrow		\$250,000 FI S500,000 G \$1,000,000 G \$1,000,000 J	
		plyo folia	u das u das u das u das	$\langle \ \rangle$		\$1,000,000 1 lability \$1,000,000 1 1 55,000,000 1	
V 2002			X		Jan J	\$5,000,001 \$25,000,000 \$25,000,001-	
					rage Lebest Charles	\$50,000,000 *	

SCHEDULE VI — GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$134 or less need not be added towards the \$335 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$335 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source Example: Mr. Joseph H. Smith, Anytown, Anystate	Description Silver Platter (determination on personal friendship received from Committee on Standards)
NA	NA

Name TORTHUFY	•
TETE	J
STARK	1

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SCHEDULE VII— TRAVEL PAYMENTS AND REIMBURSEMENTS

the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$335 received by

or were paid by you and reimbursed by the sponsor.

spouse or dependent child that is totally independent of his or her relationship to you. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a

Examples: mogram 2002 enstrate congressions Roycroff Corporation Chicago Chamber of Commerce Source Aug. 6-11 Date(s) Mar. 2 18-22 STO-Charleton SC - STO City of Departure—Destination— City of Return DC-Los Angeles-Cleveland DC—Chicago—DC Lodging? (Y/N ≺ | z (Y/N Was a Family Member Included? (Y/N) z < ∶ Number of days not at sponsor's expense 2 Days None

SCHEDULE VIII—POSITIONS

Name FARTIVEY PETE STARK

Page S of S

organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any non profit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature

Landis, and positions solely of all illoholary liature.	ordinary nature.
Position	Name of Organization
nesident & Director	Stark Swestment Co, Eve. Fremont, CA
President & Ricetor	,

SCHEDULE IX—AGREEMENTS

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. Identify the date, parties to, and general terms of any agreement or arrangement with respect to: tuture employment; a leave of absence during the period of

Date	Parties To	Terms of Agreement
j	NA	H N

1