| | hild Yes 🗌 No 🗹 | 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 Standards of Official Conduct. | ets, "unearned" in Do not answer "ye | Exemptions Have you excluded from this report any other assets, "unearned" income, transactions, or because they meet all three tests for exemption? Do not answer "yes" unless you have fir Standards of Official Conduct. |
|-------------|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| - · · · · · | oted Yes ☐ No ✔ | 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? | ed by the Committed from this report of | Trusts Details regarding "Qualified Blind Trusts" approverusts" need not be disclosed. Have you exclude child? |
| | STIONS | ATION ANSWER EACH OF THESE QUE | ST INFORMA | EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS |
| | | schedule attached for each "Yes" response. | | If yes, complete and attach Schedule V. |
| | and the appropriate | Each question in this part must be answered and the appropriate | Yes V No | Did you, your spouse, or a dependent child have any reportable liability (more V. than \$10,000) during the reporting period? |
| _ | | If yes, complete and attach Schedule IX. | | If yes, complete and attach Schedule IV. |
| | outside Yes No | Did you have any reportable agreement or arrangement with an outside IX. entity? | Yes 🗸 No | Did you, your spouse, or dependent child purchase, seli, or exchange any IV. reportable asset in a transaction exceeding \$1,000 during the reporting period? |
| | | If yes, complete and attach Schedule VIII. | | If yes, complete and attach Schedule III. |
| | ling in the Yes ✔ No ☐ | Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year? | Yes No | Did you, your spouse, or a dependent child receive "unearned" income of III. 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 VII. | | If yes, complete and attach Schedule II. |
| | nen \$335 Yes ☐ No ✔ | Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$335 from one source)? | Yes No 🗸 | Did any individual or organization make a donation to charity in lieu of paying II. you for a speech, appearance, or article in the reporting period? |
| | | If yes, complete and attach Schedule VI. | | If yes, complete and attach Schedule I. |
| | le gift in the Wise Yes No | Did you, your spouse, or a dependent child receive any reportable gift in the VI. reporting period (i.e., aggregating more than \$335 and not otherwise | Yes 🗌 No 🕢 | Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 l. or more from any source in the reporting period? |
| | | QUESTIONS | OF THESE Q | PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS |
| | more than 30 days late. | i ermination Date: | ☐ Termination | Type ✓ Annual (May 15) ☐ Amendment |
| • | anyone who files | • ! | | Status District: 08 |
| ₹ | A \$200 penalty shall | Officer Or Employing Office: Employee | | Member of the U.S. House of Representatives |
| | (Office Use Only) | (Daytime Telephone) | | (Full Name) |
| თ < | 2000 YAY 15 PH 3: 16 | 419-259-7500 | | Marcia (Marcy) C. Kaptur |
| WITE / | LEGISLATIVE RESQUECE CENTER | | | |
| | HAND DELIVERED | FORM A For use by Members, officers, and employees | ATIVES | UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT |
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| | 1848 Rivard Rd., Toledo, OH 43615 | 1837 Dority Rd., Toledo, OH 43615 | 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. | Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent or sibling; any deposits totaling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. | BLOCK A 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 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 ficker 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), 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. |
| \$50,001 - | \$50,001 - \$100,000 | \$50,001 - \$100,000 | | | Name BLOCK Year-E Year-E Year-E t close of rep rear. If you us raluation meth han fair mark han |
| DENIT | No renter or rental income for 2008 | RENT | | o d | Marcia (Marcy) C. Kaptur B 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 et value, the If an is because Income, Dividends and Interest, even if reinvested, should be listed as income. Check "None" if asset did not generate any income |
| \$5 001 - \$15 000 | NONE | \$2,501 - \$5,000 | | | 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 fisted as income. Check "None" if no income was earned or generated. |
| | | | | | Page 2 of 7 BLOCK E Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year. |

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|-------|---------------------------------------------|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------|
| SCHED | SCHEDULE III - ASSETS AND "UNEARNED" INCOME | Name Marcia (Marcy) C. Kaptur | arcy) C. Kaptur | | Page 3 of 7 |
| | Congressional Federal Credit Union | \$1,001 - \$15,000 | INTEREST-funds accrued in this separate account are from foregone congressional pay (raises) and are distributed annually to charitable causes | \$1 - \$200 | |
| | DFA Global Fixed Income 1 yr (Mutual Fund) | \$15,001 - \$50,000 | DIVIDENDS | \$201 - \$1,000 | |
| | DFA Global Fixed Income 2 yr (Mutual Fund) | \$15,001 - \$50,000 | DIVIDENDS | \$201 - \$1,000 | |
| | DFA Global Fixed Income 5 yr (Mutual Fund) | \$15,001 - \$50,000 | DIVIDENDS | \$201 - \$1,000 | |
| | DFA U.S. Core Equity I | \$1,001 - \$15,000 | DIVIDENDS | \$1 - \$200 | ס |
| | Key Bank | \$1,001 - \$15,000 | INTEREST on Certificate of Deposit | \$201 - \$1,000 | |
| | National City Bank (now PNC Bank) | \$15,001 - \$50,000 | INTEREST on Certificate of Deposit | \$1,001 - \$2,500 | |
| | RBS Citizens Bank | \$15,001 - \$50,000 | INTEREST on Certificate of Deposit | \$5,001 - \$15,000 | |
| | Schwab Money Market | \$1,001 - \$15,000 | INTEREST on Certificates of Deposit | \$1 - \$200 | |
| | Suburban Federal Credit Union | \$1,001 - \$15,000 | INTEREST | \$1 - \$200 | |

SCHEDULE III - ASSETS AND "UNEARNED" INCOME Vanguard Short Term Corp Treasury Fund Vanguard Intermed-Term Vanguard Inflation Protected Bonds (IPB) U.S. Savings Bonds Retirement Annuity Transamerica Individual \$15,001 -\$50,000 \$50,001 -\$100,000 \$15,001 -\$50,000 None \$1,001 - \$15,000 | DIVIDENDS Name Marcia (Marcy) C. Kaptur **CAPITAL GAINS** DIVIDENDS/ **DIVIDENDS** INTEREST INTEREST \$201 - \$1,000 \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$5,001 - \$15,000 S(part) S directed NOT self U Page 4 of 7

SCHEDULE IV - TRANSACTIONS

Name Marcia (Marcy) C. Kaptur

Page 5 of 7

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 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.

| SP, DC, JT | Asset | Type of Transaction | Date |
|------------------|--------------------------------------|------------------------|------------|
| | DFA U.S. Core Equity I | ס | 06/30/2008 |
| | Vanguard Intermed-Term Treasury Fund | S | 11/25/2008 |
| | Vanguard Short Term Corp | ס | 11/25/2008 |

SCHEDULE V - LIABILITIES

Name Marcia (Marcy) C. Kaptur

Page 6 of 7

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 cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. 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

| | SP, DC, JT |
|-----------------------------------------------------------|---------------------|
| Northern Ohio Investment Company | Creditor |
| Mortgage on 1837 Dority Rd., Toledo, OH 43615 (rental) | Type of Liability |
| \$50,001 - \$100,000 | Amount of Liability |

SCHEDULE VIII - POSITIONS

Name Marcia (Marcy) C. Kaptur

Page 7 of 7

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 The Anastasia Fund, P.O. Box 2121, Toledo, OH 43603 [a public charity established in |
|----------|---------------------------------------------------------------------------------------------------------------------------------|
| Trustee | The Anastasia Fund, P.O. Box 2121, Toledo, OH 43603 [a public charity established in the names of Anastasia and Stephen Kaptur] |