- Qual Estate	Long Branch 6d Liverped, MY	- Beal Extata	Baby St. Elmira NY	First Ibritage Ry Auants	MIT Bank Accounts			SP, SP Mega Corp. Stock	Exclude: Your personal residence, including second homes and vacation homes (<i>unless</i> there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts, and any financial interest in, or income derived from, a federal retirement program, including the Thritt Savings Plan. 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 with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	For an ownership interest in a privately-held 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 rental or other real property held for investment, provide a complete address or a description, e.g., "rental	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not use ticker symbols.)	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 reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.	Asset and/or Income Source	BLOCK A
	X		×		X	×	Indefinite	X	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$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 Spouse/DC Asset over \$1,000,000*	A B C C C C C C C C C C C C C C C C C C		* This column is for assets held solely by your spouse or dependent child.	It an asset was sold during the reporting year and is included only because it generated income, the value should be "None."	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.	Value of Asset	вгоск в
	X		X		×	×	Royalties	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	come)	reporting period.	vested, must be disclosed as income. Check "None" if the asset generated no income during the	ou may ch "column. Di capital gair	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or		вгоск с
			><			×	×	×	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$1,000,001 - \$5,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000*		dependent child.	* This column is for income generated by assets held solely by your spouse or		For assets for which you checked "fax- Deferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest ,	Amount of Income	BLOCK D
								S (partial)	(S) (partial) See below for exam- ple. P, S, E	portion of an asset is sold, please indicate as	if only a		\$1,000 in reporting year.	asset had purchases (P), sales (S), or exchanges (E) exceeding	Transaction Indicate if the	вгоск е

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Page 3 of 6

Continuation Sheet (if needed)

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME Continuation Sheet (if needed) Name Thomas W. Beed 20

Ŋ, SP, 득 Asset and/or Income Source aciamo (10 Account + Greater Tangement **BLOCK A** Showes prant (135 Struct COCATAIN Eshande None ➣ <u>\$1</u> – \$1,000 œ O \$1,001 - \$15,000 Ö \$15,001 - \$50,000 Value of Asset m \$50,001 - \$100,000 Year-End BLOCK B TI \$100,001 - \$250,000 Ω \$250,001 - \$500,000 I \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 ے \$5,000,001 - \$25,000,000 ᄌ \$25,000,001 - \$50,000,000 г Over \$50,000,000 ≤ Spouse/DC Asset over \$1,000,000* NONE DIVIDENDS RENT of Income BLOCK C Type INTEREST CAPITAL GAINS **EXCEPTED/BLIND TRUST** TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income) None = \$1 - \$200 Amount of Income = \$201 - \$1,000 = \$1,001 - \$2,500 < BLOCK \$2,501 - \$5,000 XI VII VIII IX \$5,001 - \$15,000 <u>,</u> \$15,001 - \$50,000 ř \$50,001 - \$100,000 31 \$100,001 - \$1,000,000 × \$1,000,001 - \$5,000,000 ı × Over \$5,000,000 × Spouse/DC Income over \$1,000,000* Transaction BLOCK E ரு வூ ா

SCHEDULE IV- TRANSACTIONS

Name Thomas W. Red I

Page 5 of 6

	•							•	RTR PASOLINUS LLC/FRIMIN DIMANE SAMPLES)	Rt R Properties LLC (Family Owned Basies)	Bording Euror Estates III (Cupital)	SP Example: Mega Corporation Common Stock (partial sale)	SP, DC, JT Asset	Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III. *This column is for assets solely held by your spouse or dependent child.	purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the	Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted
		i ±							X	×	×	×		PURCH SALE EXCHA			Type of Transaction
														Check E Gain Ex	ceeded	\$20	i
_						and the same			1-11-11	F-11-11	7-23-11	10-12-12		Bi-weekly, if applicable	or Quarterly,	(MO/DAY/YB)	Date
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SCHEDULE VII— TRAVEL PAYMENTS AND REIMBURSEMENTS

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 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 Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$350 received by

spouse or dependent child that is totally independent of his or her relationship to you. or were paid by you and reimbursed by the sponsor. **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

 	 										_	
							MECEA	(MECEN)	AIEF		Examples:	
							(MECEA) Embassy of Korea	(MECEN) Embassy of Taiwan	AIEF Israel Trip	Roycroft Corporation	Chicago Chamber of Commerce	Source
						•		out 14-20	Aug 13-21	Aug. 6–11	Mar. 2	Date(s)
							SEOUL DC - SEOUL	1/461-14-DC	Aug 13-21 721-Aviv- Newsonia-Ten Aviv	DC—Los Angeles—Cleveland	DC—Chicago—DC	City of Departure—Destination— City of Return
							~	~	Y	Υ	z	Lodging? (Y/N)
				`			~	~	Υ	Υ	z	Food? (Y/N)
		***	-	C.			\	N	y	Υ	Z	Was a Famlly Member included? (Y/N)
							Sone	None	None	2 Days	None	Number of days <u>not</u> at sponsor's expense