╙	hild because	sactions, or liabilities of a spouse or dependent child because with the Committee on Standards of Official Conduct.	T income, trans ret consulted w	EXEMPTION—Have you excluded from this report any other assets, "unsamed" income, transactions, or liabilities of a spouse or dependent child they meet all three seats for exemption? Do not answer "yes" unless you have first consulted with the Committee on Standards of Official Conduct
No.	rusts" need not		on standards	TRUSTS—Details regarding "Quastied Blind Trusts" approved by the Committee on standards of Official Conduct and certain be disclosed. Have you excluded from this record details of such a trust benefiting you, your spouse, or decondant child?
R EACH OF THESE QUESTIONS	THESE C		TINFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWE
this part must be answered and the ute attached for each "Yes" response.	nust be ans	Each question in this part mappropriate schedule attached	O _N	V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.
W	rangement with	IX. Did you have any reportable agreement of arrangement with an outside entity? If yes, complete and attach Schedule IX.	₹	IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding. Yes \$1,000 during the reporting period? If yes, complete and attach Schedule IV.
Yes No X	r before the date	VIII. Did you hold any reportable positions on or before the debt of tiling in the current caterials year? If yee, complete and attach Schedule VIII.	<u>§</u>	III. Did you, your spouse, or a dependent child receive "unexmed" income of more than \$200 in the reporting pariod or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.
Yes No	receive any the reporting	Vil. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule Vil.	₹	II. Did any individual or organization make a donation to charity in ileu of paying you for a speech, appearance, or article in the Yes reporting period? If yes, complete and attach Schedule II.
No No No	receive any egating more	VI. Did you, your spouse, or a degendent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI.	§	I. Did you or your spouse have "earned" income (e.g., salaries or least of \$200 or more from any source in the reporting period? Yes if yes, complete and sittach Schedule I.
		OF THESE QUESTIONS	OF THES	PRELIMINARY INFORMATION — ANSWER EACH
agamst anyone who thes more than 30 days late.	30 days late	Termination Date:		Report (X) Annual (May 15) Amendment
A \$200 penalty shall be assessed	A \$200 pen	or Employing Office:	Officer or Employee	Status House of Representatives District:
2009 NAY 15 PH 4	Me	Daylime Telephone: シャンシミラ6/	Daytime	Name: Fric J Massa
HAND DELIVERE	=	Form A For use by Members, officers, and employees	MENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT

SCHEDULE I — EARNED INCOME

more during the preceding catendar 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. 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

· Name

N

3

Exclude: Willtary pay (such as National Guard or Reserve pay), lederal retirement programs, and benefits received under the Social Security Act. Civil War Roundtable (Oct. 2nd) State of Maryland Ontario County Board of Education KORNE STATE FISTOR Source traca Spouse 5a Spouse Solani Spouse Speech Spouse Salery Legislative Pension Approved Teaching Fee Type \$9,000 H6825 18,000 \$1,000 Amount \$6,000 Z

For payments to charity in lieu of honoraris, use Schedule II.

p.5 P.15/15

APR-16-2009 11:50 From:HON. ERIC J.J. MASSA 202 226 6599

6079361490 To:6079361490

conscionation of the contract	proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterpr	Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization,	SCHEDULE VIII—POSITIONS
Principle	n, partnership, or other business enterprise, any non profit organization, a	civirent calendar year as an officer, director, trustee of an organization,	

Eron Massa

Page 4 of 12

Report all organization, or any educational or other institution other than the United States. proprietor. pariner, ıny labor

Exclude: Positions listed on Schedule I, positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organi-

Position	Name of Organization

SCHEDULE IX—AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deternal 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 Date Parties To Terms of Agreement

Use additional sheets if more space is required.

More Eric J Massa

S

Identify the source and list travel timerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$335 received by 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

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 tederal, 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: Roycroft Corporation Chicago Chamber of Commerce Source AUG. B-11 Date(s) Mar. 2 City of Departure—Deatination— City of Return DC-Los Angeles-Claveland 2 DC-Chicago - DC (King paging) ∡! z **4** 2 ₹**700**0.7 Was a Family Member Included? (Y/N) <! Z at appresent expense 2 Days

This page may be copied it more space is required

Use additional sheets if more apace is required

To:6079361490

P.13/15

SCHEDULE V- LIABILITIES

Marso Fric J Massa

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); leans secured by automobiles, household furniture, or appliances, liabilities of a cards) only if the balance at the close of the preceding calendar year exceeded \$10,000 business in which you own an interest; and fabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit 7 D 8 Example: First Bank of Warnington, Delaware <u>ithbaak</u> Creditor Drent collector Mortgage on 123 Main St., Dorer, Del. Type of Linbility \$15,001-\$50,000 a \$100,001-\$250,000 Amount of Liability \$500,001-\$1,000,000 \$5,000,001-\$25,000,000 Over \$50,000,000 7

SCHEDULE VI — GIFTS

Example. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local mests, 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 totaling more than \$335 received by you, your spause, 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 Mr. Joseph H. Smith, Anytown, Anystate Silver Planer (determination on personal friendship received from Committee on Standards) Description Value S345

APR-16-2009 11:49 From:HON. ERIC J.J. MASSA 202 226 6599

To:6079361490

6079361490

P.12/15

SCHEDULE IV-TRANSACTIONS				7			رزيدا				
Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property.	se, or Type of Transaction	etion	Date	; ; i) 1900	Amount of		Trans	Transaction	3	
stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions			TY FI	50	C	, C.	-	e e	. ≇.,	-	
that resulted in a loss. Provide a brief description of any exchange	7"	IGE:			57.	• . •	10			X)	
transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or safe of your personal	Sonal IRCHI	CHA		31 300 301	300	001 ,000 ,001 ,000	,000 ,000),001- 00,000	00.00 00.00	00,001 000,00	
sold, please so indicate (i.e., "partial sale"). See example below		- ::É		#15	\$50	\$10	\$24	\$50 \$1,		\$28	
SP, DC, JT Asset	4 75 3	12.00				1.55			77.4		
Exemple: Mega Coporation (A CASS	2.4	10-12-08	Č.	×		ra i		; ,	_	4.5
- 1				- 120	::, <u>,,,</u> ,,,,		ምርማ. ፡፭		· ;		«
	7	: 		() () () () () () () () () ()	<u> </u>		100 T			185 <u>.</u>	
		er er Sanka General		25.	\$ 14°					• • • •	
	2										
	31 -32 -33 -33 -33 -33 -33 -33 -33 -33 -33				-	1				1	
) (8 19) (4.25) (5.55)						्र विक्र व्यक्त				
	(10 mg/s)				Ţ·,	!	. (c) . (b)				
							i.	i		<u> </u>	
					(大)					<u></u>	
	5 4.35 34.35 4.35 4.35										
		19. 20. 20.					32				
				• "							
									·		
		ž.									
	34 				{	_	-				

This page may be copied if more space is required.

SSE THE S	BLOCKS BLOCKS 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.		BLOCK D umt of Inc plans or acc to choose ap ay miss Tuk- sads, finding category of exproprise
which generated more want active in unearned income during the year. For rental property or learn, provide at complete address. Provide kill remote of studies and minual lands (do not use blow raymbols). For all IPAs and other retrement 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).	please specify the internoon users. If an essel was sold during the reporting year and is included only because it generated income, the value should be "None."		the appropriate is and interest, we should be listed a lone; if no income a steel.
provide the value and income information on sech 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.	m D		: : :
account and its value at the end of the reporting puriod. 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(c) (unless there is rerital informe); any debt owned to you by your or your spourse's child, perrent, or sibling, any deposits totaling \$5,000 or	0 00 00	***************************************))
less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. Government retirement programs. If you so choose, you may indicate that an asset or income ecurce is that of your spours (\$P) or dependent child (DC) or is jointly held (JT), in the optional oclumn on the far less.	None \$15-\$1.000 \$1,001 - \$15,000 \$60,001 - \$100,000 \$250,001 - \$500,00 \$250,001 - \$500,00 \$1,000,001 - \$5,000 \$1,000,001 - \$5,000 \$25,000,001 - \$55,000	NONE BITIOENDS RENT CAPITAL GAINS EXCEPT EXPELINE Other Type of Incom (Specify: For Example.)	None \$1 \$200 \$201 - \$1,000 \$1,000 - \$2,500 \$2,501 - \$5,000 \$15,001 - \$50,000 \$15,001 - \$1,000,000 \$1,000,000 - \$5,000
SP. SP Hage Corp Stock DC. Ecseptias: Simon & Schuster	×	X X Proyatics	X
DE NYS 529 Plan			
SNYS 529 Plan	X		
SP Merger Fund - Roth 1RA		X	×
├			×
of America - Roth IRA		X	×.
200	X	X X	

P.11/15

APR-16-2009 11:48 From:HDN. ERIC J.J. MASSA 202 226 6599

To:6079361490

Continuation GVIEDVE III—AGGELG AND UNCATINGUT INCUME

DAY MENTANCE

Continuation Sheet (if needed)		
BLOCK A	BLOCK B BLOCK C	
Asset and/or Income Source	Year-End Type	Amount of income Transaction
<u>w</u>	COFE	X) III
8	000 000,000	
JT	000 0,000 00,000 50,000 \$60,00	000,000
	001 - \$5 0001 - \$0 0,001 - \$0 0,001 - \$0 0,001 - \$0	\$1.000 - \$3,00 - \$5,00 - \$60. - \$100
	91,000 925,000 NONE RENT CAPIT	\$15.00 \$15.00 \$100,0
SO Shwab Money MK+ Fund - Rotha	272.75	
Nationvide Retirement !		
SP Nationwide Bost of America		
Corning In		
co)		Π
SP Pimco Forcian Bond - Taxable		XX X
ISP (Capital World Bood Fo-Takabe		
-	1.4	
Schwab III and		
SP UMB SCOUL INFORMATION AT THREE		
PLUM		X
ACTESAN MED-C		2
	· · · · · · · · · · · · · · · · · · ·	
10		4.
CALANOS MANGETHUMAN-LOS		**
PINCO COMPONETY ROAK BETWEEN		X
ANKTYNNA FUUN - ZEA	X	×

This page may be copied if more space is required.

APR-16-2009 11:48 From:HON. ERIC J.J. MASSA 202 226 6599

To: 6079361490

6079361490

P.11/15

Continuation Sheet (If needed)		VICTII DIL
BLOCK A Asset and/or Income Source	BLOCK B Year-End Year-End Year-End Type Value of Asset of Income	Amount of income Transaction
<u>.</u> 96	C	IV IV V
DC.	0000	
J.	000 100 00,000 00,000 00,000 \$6,000 \$6,000 10,000 1	00 00 000 000 000,00
	M.S.	-\$5,000 -\$5,000 -\$6,000,00
	\$1,00 \$50,0 \$250,0 \$1,00 \$25,0 \$1,00 \$25,0 \$1,00 \$25,0 \$25,0 \$1,00 \$25,0 \$1,00 \$25,0 \$1,00 \$25,0 \$1,00	\$201 \$2,50 \$2,50 \$15.0 \$15.0 \$100,
(Shwab Money MY+Td-1RA		
Powersharestecto-11279		
Permanent fortfolio- IRA		
\mathcal{Q}		
nous Comm		
E		3 33
ROH RE	郷メ選を	X 返 S
Strat		
	· · · · · · · · · · · · · · · · · · ·	
≅ 1		
DE-12		
د .		

This page anay be copied if more space is required.