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Exemp	Trusts	EXCLUS	if yes, c	V. (more tha	If yes, co	IV. reportable	If yes, co	III. more tha	if yes, co	ll. paying yo	If yes, c	b. Or more f	PRELIMI	Туре	Report	Status	Filer				CALENDA].
Exemptions- Ha		ION OF S	emplete and a	your spouse, or in \$10,000) duri	amplete and a	your spouse, or e asset in a tran	m \$1,000 at the amplete and a	your spouse, o	emplete and a	ndividual or organization of the second of t	omplete and a	or your spouse	NARY IN	K An			€ Me				J STATI	
Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official trusts" need not be disclosed. Have you excluded from this report details of such a trust bene child?	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?	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 \$1,000 at the end of the period r	Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth	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	Annual (May 15)		House of Representative	Member of the U.S		MICHAE		UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT	
led from this r	g "Qualified Bl be disclosed.	DEPENDI	e V.	hiid have any re 3 period?	e IV.	ld purchase, sel ling \$1,000 durir	e II.	hild receive "un or hold any repo	₹	a donation to c article in the re	-	ncome (e.g., sai g period?	:	5 (D)	esentative	U.S.	(Full Name)	L EVERET		SE OF R	
is report any other assets, "unearned" income, transactions, or liab	lind Trusts" ap Have you exc	ENT, OR		portable llability		I, or exchange a		earned" Income intable asset wor		harity in lieu of porting period?		aries or fees) of	ANSWER EACH OF	Amendment		District: 08	State: N	e)	MICHAEL EVERETT CAPUANO		EPRESI	
er assets, "un	oproved by th	TRUST !		Yes 🗸		my Yes		th Yes		Yes		\$200 Yes ✓	CH OF T	# I		ŏ	MA		0		ENTATI	
earned" inco	ne Committee his report de	VFORMA		₹		8 		8 □		₹		No □	THESE Q	Termination		-					VES	
ome, transact	on Standard	TION /	appro	Each (If yes, c	IX. entity?	If yes, c	VIII. current o	If yes, c	VII. reimbura	If yes, c	Old you, y VI. the report exempt)?	QUESTIONS	ion	_	Employee	Officer Or				For use	
ions, or liabil	ls of Official (a trust benefi	ANSWER	priate sch	Each question i	If yes, complete and	have any repor	omplete and	Did you hold any repor current calendar year?	omplete and	Did you, your spouse, or from one source)?	omplete and	our spouse, ing period (I			Termination		Emp	! !			FORM A by Membe	
onsulted with the Committee on Standards	Conduct and certain other "excepted fiting you, your spouse, or dependent	R EACH OF THESE QUESTIONS	appropriate schedule attached for each "Yes" response.	in this part must be answered and the	attach Schedule IX	Did you have any reportable agreement or arrangement with an outside entity?	If yes, complete and attach Schedule VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year?	If yes, complete and attach Schedule VII.	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 VI.	or a dependent child receive any reportable gift in e., aggregating more than \$335 and not otherwise			Date:		Employing Office	(Daytime	617-62		FORM A Page 1 of 7 For use by Members, officers, and employees	
use or depen the Committe	certain other)F THES	ched for ea	must be a	lule IX.	nt or arrangem	fule VIII.	on or before t	lute VII.	child receive a rting period (w	lute VI.	t child receive a more than \$33					Се	(Daytime Telephone)	617-621-6208		Page , and empl	
dent child e on Standa	"excepted dependent	E QUES	ach "Yes"	nswered		ent with an ou		he date of filir		iny reportable orth more that		any reportable 5 and not oth		<u></u>			() () () () () () () () () ()		2009 UL			J
rds Yes	Yes	TIONS	response	and the		utside Yes		ng in the Yes		n \$335 Yes		gitt in erwise Yes		late.	more than 30 days	be assessed agai	4 \$200 per	(Office Useronly)	2009 JUL -8 AM 10: 25	HITE RESOURCE CENTER		
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SCHEDULE I - EARNED INCOME

Name MICHAEL EVERETT CAPUANO

Page 2 of 7

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.

Source	Туре	Amount
RAPHAEL AND RAPHAEL LLP	SPOUSE SALARY	N/A
YNZ,LLC	SPOUSE SALARY	N/A
CTM,LLC	SPOUSE SALARY	N/A

,,		Name MICHAEL EVERE!! C	EVEREL CAPUANO		
	BLOCK A	BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset ar Identify (a) each ass fair market value ex (b) any other assets \$200 in "unearmed" provide a complete funds (do not use if (such as 40 1(k) plan the power, even if n provide the value and that exceeds the registrected, name the identified of the reporting per state the name of the geographic location instruction booklet. Exclude: Your persected and fundament of state of the reporting; and accounts; any finan accounts; any finan Government retirem. If you so choose, you optional column on	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 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), 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 your or your spouse's child, parent or sibling; any deposits totaling \$6,000 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.	Year-End 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 and is included only because it is generated income, the value should be "None."	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 the calendar year.	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.	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
of your spo optional co	use (SP) or dependent child (DC) or is jointly held (JT), in the lumn on the far left.				
ŢŢ	Central St, Somerville MA (although rent 27% of house, this amount represents 100% of asset value)	\$500,001 - \$1,000,000	RENT	\$5,001 - \$15,000	
SP	Charles Schwab - Cash & Money Market Fund	\$15,001 - \$50,000	401K	\$201 - \$1,000	
SP	Charles Schwab - Research in Motion	\$1,001 - \$15,000	401K	NONE	ס
TL	Congressional FCU	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
SP	CT&M, LLC	\$50,001 - \$100,000	(Interest & Ptrship Inc	\$2,501 - \$5,000	
<u>_</u>	East Cambridge Sav Bank, Som, MA	\$1 - \$1,000	INTEREST	\$1 - \$200	

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SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME		Name MICHAEL EVERETT CAPUANO		Page 4 of 7
SP	Fidelity - Ariel Appreciation	\$1,001 - \$15,000	RA	NONE	
Sp	Fidelity - Ariel Fund	None	IRA	NONE	တ
SP	Fidelity - Balanced Fund	\$1,001 - \$15,000	IRA	\$1 - \$200	
တ္မ	Fidelity - Cash Res	\$1 - \$1,000	IRA	\$1 - \$200	
dS	Fidelity - Cash Reserves	\$1 - \$1,000	IRA	\$1 - \$200	
SP	Fidelity - Contrafund	\$1,001 - \$15,000	IRA	\$1 - \$200	
SP	Fidelity - Export & Multinational	\$1,001 - \$15,000	RA	NONE	
SP	Fidelity - Export & Multinational	\$1,001 - \$15,000	IRA	NONE	
ပ ာ	Fidelity - Fam Value	\$1,001 - \$15,000	IRA	NONE	
SP	Fidelity - FPA Crescent Inst'l	\$1,001 - \$15,000	IRA	\$1 - \$200	
SP	Fidelity - Int'l Discovery	\$1,001 - \$15,000	IRA	NONE	
SP	Fidelity - Royce Total Return Fd Investment CL	\$1,001 - \$15,000	IRA	\$1 - \$200	
SP	Fidelity - Select Nat'l Gas	\$1,001 - \$15,000	IRA	\$1,001 - \$2,500	
SP	Fidelity - T Rowe Price Cap Appreciation	\$1,001 - \$15,000	IRA	NONE	Ū

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SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME		Name MICHAEL EVERETT CAPUANO		Page 5 of 7
ЧS	Fidelity - Van Kampen Growth & Income Class A	\$1,001 - \$15,000	IRA	\$1 - \$200	
JU	Hidden Valley, Tuftonboro, NH	\$250,001 - \$500,000	RENT	\$5,001 - \$15,000	
JT	High St, Somerville, MA	\$250,001 - \$500,000	RENT	\$15,001 - \$50,000	
	Nationwide - NW Lgcap Gr	\$1,001 - \$15,000	457b Plan	NONE	
	Nationwide -Templeton Foreign Fund Class A	None	457b Plan	NONE	Ø
	Nationwide Inter Val Inst Svc	\$1,001 - \$15,000	457b Plan	NONE	סי
	Nationwide- Fidelity Contra Fund	\$1,001 - \$15,000	457 b Plan	NONE	
SP	Nesteggs - Fidelity Cash Reserves	\$1,001 - \$15,000	IRA	NONE	
Sp	NestEggs - Windward Aggressive Fund	\$50,001 - \$100,000	IRA	NONE	
	SBLI - Term Life	\$250,001 - \$500,000	DIVIDENDS	\$1 - \$200	
ΤĽ	Som Fed CU, Som MA	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
JT	Winter Hill Bank	\$1,001 - \$15,000	INTEREST	\$1 - \$200	

SCHEDULE IV - TRANSACTIONS

Name MICHAEL EVERETT CAPUANO

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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	Amount of Transaction
SP	Charles Schwab - Research in Motion	ס	10-17-08	\$1,001 - \$15,000
dS	Fidelity - T Rowe Price Cap Apprec	ס	7-08-08	\$1,001 - \$15,000
Sp	Fidelity Ariel Fund	Ø	7-08-08	\$1,001 - \$15,000
	Nationwide - Templeton Foreign Fd Class A	S	6-20-08	\$1,001 - \$15,000
	Nationwide Inter Val Inst Svc	7	6-20-08	\$1,001 - \$15,000

SCHEDULE V - LIABILITIES

Name MICHAEL EVERETT CAPUANO

Page 7 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 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.

JT DC, P,	Creditor	Type of Liability	Amount of Liability
Ţ	Bank of America, NY	Mortgage - Tuftonboro, NH Property	\$15,001 - \$50,000
TU	Winterhill Bank, MA	Mortgage - Central St, Somerville, МА ргорелту	\$100,001 - \$250,000
TL	Winterhill Bank, MA	Mortgage - High St, Somerville, MA property	\$250,001 - \$500,000
SP	Winterhill Bank, MA	Mortgage - CTM, LLC	\$50,001 - \$100,000