EXEMPTION - 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 **TRUSTS** – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. this report details of such a trust that benefits you, your spouse, or dependent child? IPO - Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answered "yes" to this question, please contact the Committee on Ethics for further guidance. E. Did you hold any reportable positions during the reporting period or in the current catendar year up through the date of filing? D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? **C.** Did you or your spouse have "earned" income (e.g.. salaries, honoraria, or pension/IRA distributions) of \$200 or more during the exchange any securities or reportable real estate in a transaction B. Did you, your spouse, or your dependent child purchase, sell, or PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS reporting period? Name: tests for exemption? IPO, EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS exceeding \$1,000 during the reporting period? 2013 FINANCIAL DISCLOSURE STATEMENT UNITED STATES HOUSE OF REPRESENTATIVES REPORT TYPE end of the reporting period? or b. Make more than \$200 in unearned income from any reportable a. Own any reportable asset that was worth more than \$1,000 at the FILER STATUS asset during the reporting period? × × Kerry Bentivolio Do not answer "yes" unless you have first consulted with the Committee on Ethics 2013 Annual (Due: May 15, 2014) U.S. House of Representatives Member of or Candidate for District: State: Michigan Yes Yes Yes Yes Yes Daytime Telephone: × × × × × Amendment Š ö Z ö Š For Use by Members, Officers, and Employees Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period? G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$350 in value from a single source during the reporting penod? F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing? ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" reportable travel or reimbursements for travel totaling more than \$350 in value from a single source during the reporting period? H. Did you, your spouse, or your dependent child receive any Form A 202-225-8171 Employee Officer or **Employing Office** Termination Date Have you excluded from JO 2014 AUG 12 AM 11:41 U.S. HOUSE OF KIERKESENTATIVES LEGISLATIVE RESOURCE CENTER DELIVERED 1 of 12 Office Use Only) HAND Yes Yes Yes Yes Yes Yes Yes. × Z. S 8 Š 8 중 Ş × × × × \bowtie ×

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	CHEDULE A - ASSETS & "UNEARNED INCOME"	
BLOCK C BLOCK D	Name: Kerry Bentivolio	
BLOCKE	Page 2 of 12	•

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Account		mity Choice		Advantage Account	it Union	ABC Hedge Fund X	Simon & Schuster	SP Mega Corp Stock	E.	For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	If you so choose, you may makeate that an asset or income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left.	If you have a privately-traded fund that is an Excepted investment fund, please check the "EIF" box.	nomes and vacation homes (unless there was rental income during the reporting period), and any financial interest in. or income cierved from a federal interest in. or income cierved from a federal retirement program, including the Thrift Savings Plan.	A. A. arcluding set	For an ownership interest in a privately-held business that is not publicly traded, state the name of the name of its activities, and its	For rental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and state.	in all interest-peaning accounts. It was been \$5,000, list every financial institution where there is more than \$1,000 in interest bearing accounts.	For bank and other cash accounts, total the amount	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the provide the reporting thresholds.	ks and mutual funds	et held for investment or and with a fair market value end of the reporting period. bortable asset or source of more than \$200 in "unearned"		
	3 - 4 2 2					T		- 1	()	None \$1-\$1.00								> 		you have no interest	valuation method other than fair market value, please specify the method used. used. If an asset was sold during the reporting period and is included only because it generated income, the value should be "Yone." **Column M is for assets held by your spouse or dependent child in which	2	
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										S(part)	S, S(part), or E							no transactions that exceeded	Leave this column blank if there are	an asset was sold, please indicate as follows: (\$ (part)).	sales (S), or exchanges (E) exceeding \$1,000 in the reporting period.	Indicate if the asset had purchases (P).	Transaction

## Asset and/or income Source Acceptance Acceptance	SCHEDULE A – ASSETS 8	& "UNEARNED INCOME"	Name: Kerry Bentivo	iVOLIO Page 3 of
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							No.						3.0.						Ower\$5,000,000 SpouserDC Asset with Income over \$1,000,000' BLOCK E P. S. S. (Part), or m.	of 12

	SCHEDULE A ASSETS & "UNEARNED INCOME"	
Name.	Kerry Bentivolio P	
	Page 8 of 12	

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BLOCK A Asset and/or Income Source		ASSET NAME	Vancuard Small Cap Indx		Baron Sm Cap		DFA Intl Small Co		Whole Life Policy	= 1		St. John Providence	Health Sy		7	5C. 00111	1 5	Account (Felipion)
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SCHEDULE B - TRANSACTIONS

Name: Kerry Bentivolio Page 9 of 12

Report any purchase sale or exchange transactions that exceeded \$1 000 in the reporting period of any security or real property held by you, your spouse, or your dependent child for investment or the production of income, include transactions that resulted in a capital loss. Provide a brief description of an exchange transaction. Exclude transactions between you, your spouse, or exchange transaction. Capital Gains, if a sales transaction resulted in a capital gain in excess of \$200, check the capital gains box, unless it was an asset in a tax-deferred account and disclose the capital gain income on Schedule A. SP, DC, JT Asset Honorable Old Fashion Santa, LLC (partial purchase) X (partial purchase)	
Exchange Exchange Check Box if Capital Gain Exceeded \$200 Charlety, Manthy, or By, weekly, if applicable applicable 4/5/13	
\$1,000 \$15,000	
\$500001 \$160,000	
\$250,001- \$500,001- \$1,000,009- \$5,000,001	
\$1,000,001 \$5,000,000 \$6,000,001 \$25,000,000 \$25,000,000	
\$25,000,001 \$50,000,000	
Over \$60,000,000	ı

SCHEDULE C - EARNED INCOME

Name: Kerry Bentivolio Page 10 of 12

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 reporting period. 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 benefits received under the Social Security Act.

types of income (no	INCOME LIMITS and PROHIBITED INCOME: The 2013 limit on outside earned income for Members and employees compensated at or above the "senior start rate was \$26.955. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were totally prohibited.	e totally prohibited.	9 was \$∠5,955. In addition, certain
	Source (include date of receipt for honoraria)	Туре	Amount
	Keene State	Approved Teaching Fee	\$6,000
Examples	State of Maryland	Legislative Pension	\$18,000
,	Ontario County Board of Education	Spouse Salary	N/A
Providence	ice Hospital	Spouse Salary	N/A
SCMS Adm	SCMS Administrative	Spouse Salary	N/A

SCHEDULE D - LIABILITIES

Name: Kerry Bentivolio Page_11_of_12_

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or yours spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child.

		ŢŢ		TL		SP. DC. JT
		Cha		ccc	Example	7
		Charter One		CCO Mortgage	у́е	:
		One		gage	First B	Cre
					First Bank of Wilmington DE	Creditor
					ngton DE	
		11/10		2/03	5/98	Date Liability Incurred MO/YR
		0				자원(중 [*]
MI	260 W	Home Equity Line of Credit	Trail, Milford, MI	Mortgage on 260 White	Mort	
	nite Pi	quity	Milfo	ge on	Mortgage on Rental Property. Dover, DE	Туре
	ne Tr	Line (rd, MJ	260 Wh	ntal Proper	Type of Liability
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						\$25,000,001- \$50,000,000
<u> </u>	-	-	F 2-6		<u> </u>	Over \$50,000.000 ←
						Over \$1 000,000* (Spouse/DC Lisbility)

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions listed in Schedule C; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

Position	Name of Organization
Member	Honorable Old Fashion Santa, LLC

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

	Name:
	Kerry
	Benti
	Bentivolio
	Pag
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	of 12
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Identify the source and list travel itinerary, dates and nature of expenses provided for travel and travel-related expenses totaling more than \$350 received by you, your spouse or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler 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.

EXCLUDE: Privately-sponsored travel approved by the Ethics Committee, if post-travel disclosure was filed with the Clerk, travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foderal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

Source	Oate(s)	Gity of Departure - Destination City of Return	Lodging? (YIN)	Food?	Family Member Included? (Y/N)
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The Heritage Foundation	Feb 6-8	DC - Baltimore - DC	γ	У	N
Initiatives for China	April 27 - May 2	DC - Taipei, Taiwan - DC	Ā	У	Z
American Israel Education Foundation	Aug 10 - 18	Detroit - Tel Aviv - Detroit	Å	Å	Y
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