| | more than 30 days late. | Termination Date: | Termination | ☐ Amendment | Annual (May 15) | Report Type |
|-------|--------------------------------------|---------------------------------------------|--------------|----------------------|---------------------------------------------------|----------------|
| | be assessed against anvone who files | | | itives District: 16 | House of Representatives | Status |
| | A \$200 penalty shall | Employing Office: | ☐ Officer Or | State: PA | Member of the U.S. | Filer |
| | (Office Use Only) | (Daytime Telephone) | | (Full Name) | (F | 1 |
| • | 2013 FAY 14 FH 5: 30 | 2013 15 | | JOSEPH RUSSELL PITTS | JOSEPH R | |
| M C | CECISIATIVE RESOURCE CELVE | | | | | |
| | 1 | For use by Members, officers, and employees | | ISCLOSURE STATEN | CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT | CALENDA |
| VERED | HAND DELIVERED | FORM A Page 1 of 7 | | OF REPRESENT | UNITED STATES HOUSE OF REPRESENTATIVES | UNITED |
| ~ | | | | | | i- |

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

| 724 | l. or more from any so | If yes, complete a | Did any individual o | II. you for a speech, ap | II. you for a speech, ap | If yes, complete a Did you, your spous If more than \$200 in the | | | | | | II. you for a speech, ap If yes, complete a Did you, your spous III. more than \$1,000 in the more than \$1,000 at if yes, complete a Did you, your spous IV. period? If yes, complete a period? | II. you for a speech, ap If yes, complete a Did you, your spous III. more than \$1,000 in the more than \$1,000 at the figure, complete a Did you, your spous IV. reportable asset in a period? If yes, complete a Did you, your spous V. (more than \$10,000) If yes, complete a Did you, your spous V. (more than \$10,000) If yes, complete a | II. you for a speech, ap If yes, complete a Did you, your spous III. more than \$1,000 in the more than \$1,000 at the fyes, complete a Did you, your spous IV. reportable asset in a period? If yes, complete a pid you, your spous V. (more than \$10,000) If yes, complete a DID and EXCLU IPO Trusts |
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| the design of the second of \$2000 | or more from any source in the reporting period? | If yes, complete and attach Schedule I. | 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 II. | d receive "unearned" income of noid any reportable asset worth | If yes, complete and attach Schedule III. | Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? | If yes, complete and attach Schedule IV. | 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. | | JSION OF SPOUSE, DEPENDENT, | JSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION DId you purchase any shares that were allocated as a part of an Initial Public Offering? | JSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION A Did you purchase any shares that were allocated as a part of an Initial Public Offering? Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain of disclosed. Have you excluded from this report details of such a trust benefiting you, your spo |
| | Yes 🗸 No | | Yes □ | | Yes ✔ No | | Yes □ | | Yes ✓ | |)] |) - | as a pa | as a pai |
| | 8 | | Yes 🗌 No 🗸 | | 8 □ | | Yes 🗌 No 🗸 | | Yes 🗸 No | | | RUST | RUST | RUST It of an I |
| | <u></u> | | VII. | | | | × | | - | | INF | nitial D | Jilliai F | nittee or |
| Did you would should be a deposited by the state of the s | ting period (i.e., aggregating more than \$350 and not otherwise | If yes, complete and attach Schedule VI. | Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 from one source)? | If yes, complete and attach Schedule VII. | Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year? | If yes, complete and attach Schedule VIII. | Did you have any reportable agreement or arrangement with an outside entity? | If yes, complete and attach Schedule IX. | Each question in this part must be answered and the appropriate | schedule attached for each "Yes" response. | IPO and EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS | | | her "excepted trusts" need not be use, or dependent child? |
| | Yes | | Yes | | Yes | | Yes | | e appr | | ESTI | íes 🗆 | Yes | - |
| | □ 8 € | | S □ | | ⋖ | | □ 8 | | opriat | | SNO | Yes 🗌 No 🗸 | ₹ | |
| | <u>S</u> | | | | | | 3 | | | | | لينا | | |

SCHEDULE I - EARNED INCOME

Name JOSEPH RUSSELL PITTS

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.

| 7 9 | | |
|---------------------------------------------------------|---------------------|----------|
| Source | Туре | Amount |
| COMMONWEALTH OF PENNSYLVANIA EMPLOYEE RETIREMENT SYSTEM | LEGISLATIVE PENSION | \$90,867 |
| TIAA RETIREMENT ANNUITY | SPOUSE RETIREMENT | \$3,261 |
| MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY | IRA DISTRIBUTION | \$10,079 |
| NATIONAL FINANCIAL SERVICES, LLC | IRA DISTRIBUTION | \$863 |
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| JT | AN. | ESZ | TI. | SP CF | JT CC | Asset and/or Inc. Identify (a) each asset held for invesvalue exceeding \$1,000 at the end of reportable asset or sources of incon"unearned" income during the year. Provide complete names of stocks a for all IRAs and other retirement plaeach asset held in the account that the each asset held in the each asset held in the account that the each asset here was rental income during the each asset here was rental income during turless there was rental income during \$5,000 or less in a personal residence, in (unless there was rental income during \$5,000 or less in a personal residence, in (unless there was rental income during \$5,000 or less in a personal residence, in (unless there was rental income during \$5,000 or less in a personal residence, in (unless there was rental income during \$5,000 or less in a personal residence, in (unless there was rental income during \$5,000 or less in a personal residence, in (unless there was rental income during \$5,000 or less in a personal residence, in (unless there was rental income during \$5,000 or less in a personal residence, in (unless there was rental income during \$5,000 or less in a personal residence, in (unless there was rental income during \$5,000 or less in a personal residence, in (unless there was rental income during \$5,000 or less in a personal residence, in (unless there was rental income during \$5,000 or less in a personal residence, in (unless there was rental income during \$5,000 or less in a personal residence, in (unless there was rental income during \$5,000 or less in a personal residence, in (unless there was rental income dur | SCHEDULE II |
|-----------------------|------------------------------------------------------------|---------------------------------------------|--------------------------|------------------------|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| NATIONAL PENN BANK | MASS MUTUAL MML AMERICAN FUNDS CORE ALLOCATION - IRA | INLAND AMERICAN REAL ESTATE TR INC - IRA | FERS THRIFT SAVINGS PLAN | CREF STOCK RETIREMENT | CONGRESSIONAL FEDERAL CREDIT UNION | 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 reportable asset or sources of income which generated more than \$200 in "unearned" income during the year. Provide complete names of stocks and mutual funds (do not use ticker symbols.) 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. For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and a city and state. 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. Exclude: Your personal residence, including second homes and vacation homes (unless 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 Thrift Savings Plan. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet. | SCHEDULE III - ASSETS AND "UNEARNED" INCOME |
| \$1,001 - \$15,000 | \$250,001 - \$500,000 | \$15,001 - \$50,000 | \$250,001 - \$500,000 | \$15,001 - \$50,000 | \$15,001 - \$50,000 | Year-End 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. If an asset was sold during the reporting year and is included only because it generated income, the value should be "None." *This column is for assets held solely by your spouse or dependent child. | Name |
| INTEREST | TAX-DEFERRED | TAX-DEFERRED | TAX-DEFERRED | TAX-DEFERRED | INTEREST | Type of Income 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 IRAs), you may check the "None" column. Dividends, Interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period. | JOSEPH RUSSELL PITTS |
| \$1 - \$200 | NONE | NONE | NONE | NONE | \$1 - \$200 | Amount of Income For assets for which you checked "Tax-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, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated. * This column is for income generated by assets held solely by your spouse or dependent child. | |
| | | | | | | Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year. | Page 3 of 7 |

SCHEDULE III - ASSETS AND "UNEARNED" INCOME SP PRIME FUND CAPITAL RESERVES CLASS - IRA TIAA TRADITIONAL RETIREMENT ANNUITY \$15,001 -\$50,000 \$1,001 -\$15,000 Name JOSEPH RUSSELL PITTS TAX-DEFERRED TAX-DEFERRED NONE NONE Page 4 of 7

SCHEDULE V - LIABILITIES

Name JOSEPH RUSSELL PITTS

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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. Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: liabilities of a business in which you own an interest (unless you are personally liable); 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. *This column is for liabilities held solely by your spouse or dependent child. Any mortgage on your personal residence (unless it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances;

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|----------------------------------------------------------|--------------------|----------------------|-------------------------------|
| 그 | | Ţ | SP, DC, |
| WELLS FARGO BANK, NA | | WELLS FARGO BANK, NA | Creditor |
| SEPT 2003 | | SEPT 2003 | Date Liability Incurred |
| MORTGAGE ON 4111A LEE HIGHWAY, ARLINGTON, VA 22207 | KENNETT SQUARE, PA | MORTGAGE ON 905 | Type of Liability |
| \$15,001 - \$50,000 | | \$15,001 - \$50,000 | Amount of Liability |

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name JOSEPH RUSSELL PITTS Page 6 of 7

spouse or dependent child that is totally independent of his or her relationship to you. 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 sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the 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 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,

| Source | Date(s) | Point of Departure DestinationPoint of Return | Lodging? (Y/N) | Food? (Y/N) | Was a Family Food? Member Included? (Y/N) (Y/N) | Days not at sponsor's expense |
|------------------------|-----------|--------------------------------------------------|-------------------|----------------|-------------------------------------------------|-------------------------------------|
| HERITAGE FOUNDATION | JAN 25-27 | JAN 25-27 DC-PHILADELPHIA- KENNETT SQUARE | Z | ~ | Υ | NONE |

SCHEDULE VIII - POSITIONS

Name JOSEPH RUSSELL PITTS

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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 |
|-----------------------|------------------------------------------------------------|
| BOARD OF REFERENCE | CHINA OUTREACH MINISTRIES |
| ADVISORY BOARD MEMBER | CONGRESSIONAL YOUTH LEADERSHIP COUNCIL |
| ADVISORY BOARD MEMBER | FREE NORTH KOREA RADIO, USA |
| ADVISORY BOARD MEMBER | INTERNATIONAL HEALTH SERVICES BOARD |
| ADVISORY BOARD MEMBER | SAT-7 |
| ADVISORY BOARD MEMBER | STEPHEN'S CHILDREN (MAGGIE GOBRAN'S ORGANIZATION IN EGYPT) |
| ADVISORY BOARD MEMBER | U.S. COMMITTEE FOR HUMAN RIGHTS IN NORTH KOREA |
| ADVISORY BOARD MEMBER | VIETNAM EDUCATION FOUNDATION |
| ADVISORY BOARD MEMBER | WESTERN SAHARA FOUNDATION |
| ADVISORY BOARD MEMBER | MATTHEW J. RYAN PROJECT AT VILLANOVA UNIVERSITY |
| | |