

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT

FORM A
For use by Members, officers, and employees

Ronald James Kind
(Full Name)

202-225-5506
(Daytime Telephone)

Filer ☒ Member of the U.S. House of Representatives
State: WI District: 03

☐ Officer Or Employee
Employing Office:

Report Type ☐ Annual (May 15) ☒ Amendment ☐ Termination

Termination Date:

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

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HOUSE OF REPRESENTATIVES

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

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? 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. 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 more than \$1,000 at the end of the period? 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.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VI. Did you, your spouse, or a dependent 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. 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 VII. Did you hold any reportable positions on or before the date of filing in the 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.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Exemptions-- 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 tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Standards of Official Conduct.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Ronald James Kind

BLOCK A		BLOCK B		BLOCK C		BLOCK D		BLOCK E	
Asset and/or Income Source		Year-End Value of Asset		Type of Income		Amount of Income		Transaction	
<p>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.</p> <p>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 \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.</p> <p>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.</p>		<p>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 its included only because it is generated income, the value should be "None."</p>		<p>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.</p>		<p>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.</p>		<p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>	
JT	219 Pearl Street LaCrosse, WI	\$50,001 - \$100,000	RENT	\$15,001 - \$50,000					
DC	Janus Gobal Tech Mutual Fund	\$1,001 - \$15,000	DIVIDENDS/INTE REST	NONE					
SP	Janus Growth and Income Fund	\$1,001 - \$15,000	DIVIDENDS/INTE REST	NONE					
	Janus Growth and Income Fund --IRA	\$1,001 - \$15,000	DIVIDENDS/INTE REST	NONE					
DC	Janus Mercury Education IRA	\$1 - \$1,000	DIVIDENDS/INTE REST	NONE					
	Janus Twenty Fund	\$1,001 - \$15,000	DIVIDENDS/Inter est	NONE					

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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DC	Janus Twenty Fund -- Education IRA	\$1 - \$1,000	DIVIDENDS/INTE REST	NONE	
DC	Mass Investors 6-8 Year Fund -- Education Account	\$1 - \$1,000	Dividends/Interest	NONE	
DC	Mass Investors 6-8 Year Fund -- Education Account	\$1,001 - \$15,000	DIVIDENDS/INTE REST	NONE	
	N2680 Buckholz Road Ettrick, WI	\$250,001 - \$500,000	Rent	\$5,001 - \$15,000	
JT	N2711 Buckholz Road, Ettrick, WI	\$250,001 - \$500,000	RENT	\$2,501 - \$5,000	
JT	Oakmark Equity and Income fund	\$15,001 - \$50,000	DIVIDENDS/Inter est	NONE	
	Oakmark Select IRA	\$1,001 - \$15,000	DIVIDENDS/INTE REST	NONE	
	Oakmark Select Roth IRA	\$1,001 - \$15,000	DIVIDENDS/Inter est	NONE	
SP	Putnam INU-IRA	\$1,001 - \$15,000	DIVIDENDS/Inter est	NONE	
	Wells Fargo	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
DC	WI EdVest 529 Plan -- Fidelity Aggressive Portfolio	\$15,001 - \$50,000	DIVIDENDS/Inter est	NONE	P
DC	WI EdVest 529 Plan-- Fidelity Aggressive Portfolio	\$15,001 - \$50,000	DIVIDENDS/Inter est	NONE	P
SP	Wisconsin Deferred Compensation Fund	\$50,001 - \$100,000	DIVIDENDS/Inter est	NONE	P
	Wisconsin Deferred Compensation Program	\$15,001 - \$50,000	DIVIDENDS/Inter est	NONE	

FOOTNOTES

Name Ronald James Kind

Number	Section / Schedule	Footnote	This note refers to the following item
1	Schedule III	N2680 Buckholz Road, Ettrick, WI	5 Buckholz Road Ettrick, WI from 2007 filing