### PRELIMINARY INFORMATION EXCLUSION OF SPOUSE, IV. Did you, your spouse, or a 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. Name: **CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT** UNITED STATES HOUSE OF REPRESENTATIVES If yes, complete and attach Schedule I. 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? excluded from this report details of such a trust benefiting you, your spouse, or dependent child? TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you IPO—Did you purchase any shares that were allocated as a part of an Initial Public Offering' 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 III. reportable asset worth more than \$1,000 at the end of the period: income of more than \$200 in the reporting period or hold any III. Did you, your spouse, or a dependent child receive "unearned" If yes, complete and attach Schedule II. reporting period? Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics **EXEMPTION**—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because If yes, complete and attach Schedule V. Report Filer Status Mike MeIntu Member of the U.S. House of Representatives Annual (May 15, 2013) DEPENDENT, OR TRUST INFORMATION Ì District: State ANSWER EACH 36 Amendment Yes Yes X Yes Yes Yes OF THESE QUESTIONS **Daytime Telephone:** × X Z S 0 Š S Employee Officer or reportable travel or reimbursements for travel in the reporting IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX. of filing in the current calendar year? If yes, complete and attach Schedule: "!!!. than \$350 and not otherwise exempt)? reportable gift in the reporting period (i.e., aggregating more For use by Members, officers, and employees VIII. Did you hold any reportable positions on or before the date If yes, complete and attach Schedule VII. period (worth more than \$350 from one source)? VII. Did you, your spouse, or a dependent child receive any If yes, complete and attach Schedule VI. VI. Did you, your spouse, or a dependent child receive any appropriate schedule attached for each "Yes" response. Employing Office Each question in this part must be answered and the Termination **ANSWER EACH OF THESE** Form A Termination Date: against anyone who files more than A \$200 penalty shall be assessed 30 days late. HAND DELIVERED I TOISLATIVE RESOURCE OFFIT? U.S. It (Office Use Only) 2013 HWY 15 PH 1: 23 M QUESTIONS Yes Yes Yes Yes Yes Yes s X š X 8 0 8 ₹ |X 8 8 X X X

1	Name
	Mike
	CIMUR

Page 2 of 5

# SCHEDULE II—PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

lope for transmitting the list is included in each Member's filing package. in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics. A green enve-List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization

Source	Activity	Date	Amount
Examples: Association of American Associations, Washington, DC  XYZ Magazine	Speech Article	Feb. 2, 2012 Aug. 13, 2012	\$2,000 \$500
Greater Wilmington Chamber of Commerce	speech	5/14/12	\$ 250
		,	

Name Mike McIntyre

Page 3 of 5

	æ		3		2	٢	DC,	SP,	tion Exc horning according San optiming optiminate opt	For that	Por Plan	not Pro	ider of in the rep			6
(INC)	T H	EE	ξ <b>%</b>	65.			Examples:		tion in Block A.  Exclude: Your personal residences and vacation homes thomes and vacation homes income during the reporting period \$5,000 or less in a persoccounts, and any financial interform, a federal retirement program, a federal retirement program source is that of your schild (DC), or is jointly held with optional column on the far left. For a defailed discussion of Splease refer to the instruction to please refer to the instruction	an owne	ns) provice ount that rental or or a comple a comple perty," and	Provide complete name not use ticker symbols.	ntify (a) ea ncome wit end of a ortable as re than \$2	Asse		
Invicting of		3	BBRT CHECK'S	अव	Stas		-	Sp	A. A	rship intublicity tra	and othe le the vexceeds other real ete address a city au	lete nam symbols	ich asset h a fair i the repo set or so 00 in "un	t and		ר ר
Start to the	Trust Co,	14, St.F	Boat checking account	BOT Stock, Lumberton NC	BOKT STOCK, Lumberton NC	1st Bank of Paducah, KY Accounts	Simon & Schuster	Mega Corp. Stock	tion in Block A.  Exclude: Your personal residence, including second homes and vacation homes ( <i>unless</i> 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 Thritt Savings Plan.  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 with your spouse (JT), in the optional column on the far left.  For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	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 loca-	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.	Provide complete names of stocks and mutual funds (do not use ticker symbols.)	Identify (a) each asset heid 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.	Asset and/or Income Source	BLOCK A	三十八八八十八八八八八八八八八八八八八八八八八八八八八八八八八八八八八八八八
Euria O	Edria, OH Rabigh, N	MM, Ind	Smrt	N. SE	AN NC	h, KY Accounts			Jeugiaphic location of the property of the pro	y-held business me of the busi- geographic loca-	(such as 401(k) set held in the sholds. investment, profon, e.g., "rental	nutual funds (do	nt or production eding \$1,000 at (b) any other which generated uring the year.	Source		
KA	<b>O</b>								None	≻	spa T *	ing and	Indica year. fair m used.			
		X			×		Ę		\$1 - \$1,000	œ	his	If an as and is income,	d me		ſ	
				×			Indefinite		\$1,001 \$15,000	C	호	SSE in	arke ≤			Ţ
×	×		×				ŧĕ		\$15,001 - \$50,000	D	* This column is for assets held solely by your spouse or dependent child.	If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."	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.			5
								×	\$50,001 - \$100,000	m	is f	alled s	ille a	š		7
						×			\$100,001 - \$250,000	П	lent or a	황일	asset at close of reporting valuation method other than please specify the method	Value of Asset	무	ί
									\$250,001 - \$500,000	۵	chil		set uati ease	으	BLOCK B	
		-					<u> </u>		\$500,001 - \$1,000,000	I	े हैं	P G G	at on r	As	ŵ	2
			Ţ						\$1,000,001 - \$5,000,000	_	iela	"No	clos net pecit	set	J	
		·				Ī			\$5,000,001 - \$25,000,000		solo	ल <sub>"</sub> ⇒ कु	∓ գ Չ օ			3
						1			\$25,000,001 - \$50,000,000	7	J ey_i	ger	: 7 P P			ı
									Over \$50,000,000	Г	7 %	orting year generated	nett por			
		-							Spouse/DC Asset ove \$1,000,000*	Z		ed ear				
						T			NONE		rep		me allo			
		X		<b>×</b>	×	_		×	DIVIDENDS		vested, must be income. Check "No generated no incorreporting period.	IRAs), you may Deferred" column. est, and capital g	Check all columns to retirement accounts allow you to choose a ments or that general income (such as 40).			
			×						RENT	**	T a be com	<u>წ</u> 2, 2	all lent ou t	¥		
						×			INTEREST		erio		ac a	8	교	
								×	CAPITAL GAINS				nour cour loos gene as	Type of Income	BLOCK	_
		."							EXCEPTED/BLIND TRUST		ome	che Divio	ts that the spane sprate	J.C	χ O	ı
×	X					1			TAX-DEFERRED		g. ∺ Cl	, ever che	(Rax in a lateral and a latera	3		ı
							Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	e)	vested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	IRAs), you may check the "Tax- Deferred" column. Dividends, inter- est, and capital gains, even if rein-	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	Œ		l
$\bowtie$	×		<del>                                     </del>			┢	ű		None						$\dashv$	
		X	×	×	<b>×</b>	<del> </del> -	-	Н	\$1 – \$200	=	* This assets dependent	e e e	Non or or		Ì	
<b>—</b>									\$201 - \$1,000	=	* This column is assets held so dependent child.	capi	For assets Deferred" in "None" colur the categor			
Ī			<del> </del>		<del> </del>	┢		×	\$1,001 - \$2,500		columina held	tal c	gory in its	A		
<b> </b>		<u>.</u>	<del> </del>		<del> </del>	<del> </del>			\$2,501 – \$5,000		ild.	jain:		Doc		
			<del> </del>			×	<del> </del> -	Н	\$5,001 - \$15,000		n is for solely	s, e	or a chick	ij	<u>ال</u>	
		L	<del> </del>			ŀĤ			\$15,001 – \$50,000		A Ag	èn	マッチ a m s m s m s m s m s m s m s m s m s m	<u>o</u>	BLOCK D	١
			<del> </del>			┢		$\Box$	\$50,001 - \$100,000	<u></u>	income g	e. C	i by	Inc	0	
	<b></b>		<del> </del>				×	$  \cdot  $	\$100,001 - \$1,000,000	= %	* This column is for income general assets held solely by your spot dependent child.	inve hec	che nay asse ch	Amount of Income		
1				<b> </b>		$\vdash$			\$1,000,001 - \$5,000,6 )0	×	This column is for income generated seets held solely by your spouse ependent child.	i i i i i i i i i i i i i i i i i i i	che che is, ii ecki	ã	J	
			<del> </del>			<del> </del>	-	$\vdash$	Over \$5,000,000	×	ated	and capital gains, even if reinvested, must be disclosed as income. Check "None" if	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.			ŀ
-			$\vdash$			$\vdash$	-	$\vdash$	Spouse/DC income over \$1,000,000*	<u>×</u>	6 &	ust .	in the late of the			
P	٦	, , , , , , , , , , , , , , , , , , ,						S (partial)			only a	\$1,000 in reporting	asset had purchases (P), sales (S), or exchanges (E) exceeding	Transaction	BLOCK E	

# **SCHEDULE IV— TRANSACTIONS**

Name Mike Mc Inture

Page 1 of 5

								-	Equity Trustlet property	SP Equity Trust IRA property	SP Example: Mega Corporation Common Stock (partial sale)	SP, DC, JT Asset	Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.  * This column is for assets solely held by your spouse or dependent child.	income. If only a portion of an asset is sold, please so indicate ( <i>i.e.</i> , "partial sale"). See example below.	in a capital loss. Provide a brief description of any exchange transaction.  Exclude transactions between you, your spouse or dependent children, or the	Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted
ľ									~	$\times$			PURCI		_ () .	
											×		SALE			Type of Transaction
							9						EXCHA	NGE		tion
													Check i Gain E			
									5-15-12	5-15-12	10-12-12		Bi-weekly, if applicable	or Quarterly,	(MO/DAY/YR)	Date
													\$1,001- \$15,000		>	
	 		ï	 		J. 20.007			×	X	×		\$15,001- \$50,000		ω	
				<u></u>					_				\$50,001- \$100,000		n	<sub>P</sub>
-	 	<u> </u>									Н	_	\$100,001- \$250,000 \$250,001-	<del></del>	0	nour
ŀ	 			 		 •		 			Н		\$500,000 \$500,001-		П П	it of
ŀ	 							 				_	\$1,000,000 \$1,000,001	,	" ឆ	Trans
ł		···		 		 -							\$5,000,000 \$5,000,001		<u> </u>	Amount of Transaction
ŀ											H		\$25,000,000 \$25,000,00 \$50,000,000	-	_	ň
						 •		 				_	Over \$50,000,00		ے	
													Over \$1,000,00 (Spouse/DC As		<b>x</b>	

## SCHEDULE V— LIABILITIES

Name Mike McInture

Page 5 of 5

close of the preceding calendar year exceeded \$10,000. \*This column is for liabilities held solely by your spouse or dependent child. 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 during the year. 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 it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you 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

75	4		JT DC,	
BBGT, Lumberton, NC	Bost, Lumberton, NC	Example: First Bank of Wilmington, DE	Creditor	
Nov 2001	Nov 2009	May 1998	Liability Incurred Mo/Year	Date
Nov 2009 Transpage on personal resident	Nov 200 (not which; Sunset Board, NC	Mortgage on 123 Main St., Dover, DE	Type of Liability	
Ç			\$10,001- \$15,000	
			\$15,001- \$50,000 <b>w</b>	
ļ	×		\$50,001- \$100,000	
×		×	\$100,001- \$250,000 □ \$250,001-	Αп
_			\$500,000 m	Amount of Liability
			\$1,000,000 TI	of Lia
<del> </del>			\$5,000,000 <b>Ω</b> \$5,000,001-	bility
			\$25,000,001 \$25,000,001	
			\$50,000,000 —	
			\$50,000,000 <b>Spouse/DC Liability</b>	
			Over \$1,000,000*	

### SCHEDULE VI— GIFTS

**Exclude:** Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$140 or less need not be added towards the \$350 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, 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	Description
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)