	OIN	CTUESE OFFICE	ANGWED EACH O	BEET MINIARY INCORMATION ANSWER EACH OF THESE OFFICIAL	
more than 30 days late.	Termination Date: 1/2/2013	Termination T	☐ Amendment	rt 🔲 🗆 Annual (May 15)	Report Type
A \$200 penaity snail be assessed against anyone who files		Employee		-	Filer Status
1000 N 1100 N 140	Employing Office	Officer Or	State: NY	Member of the ITS	
(Office Use Only)	(Daytime Telephone)		(Full Name)	(Fu	
20 3 MAR 14 PM 4: 53	20		Gary L. Ackerman	Gary L.	
THE STUDE SAME					
	For use by Members, officers, and employees		ISCLOSURE STATEME	CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT	CALEN
DELIVER	FORM A Page 1 of 7		)F REPRESENTA	UNITED STATES HOUSE OF REPRESENTATIVES	TINU
				:	

## ₹ ≡ EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS TARLIMINARY INTOXINATION -- ANOMER RACE OF THESE SCRUTTORS If yes, complete and attach Schedule V. (more than \$10,000) during the reporting period? Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting 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 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? Did you, your spouse, or a dependent child have any reportable liability If yes, complete and attach Schedule IV. more than \$1,000 at the end of the period? If yes, complete and attach Schedule III. if yes, complete and attach Schedule II. If yes, complete and attach Schedule I. or more from any source in the reporting period? Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 ĕs Yes Yes 8 8 < < < **8** Z 0 **8** ŏ Š < < VIII. current calendar year? ≤ × ≦ Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 the reporting period (i.e., aggregating more than \$350 and not otherwise schedule attached for each "Yes" response. Each question in this part must be answered and the appropriate If yes, complete and attach Schedule IX. Did you have any reportable agreement or arrangement with an outside If yes, complete and attach Schedule VIII. Did you hold any reportable positions on or before the date of filing in the If yes, complete and attach Schedule VI. If yes, complete and attach Schedule VII. from one source)? Did you, your spouse, or a dependent child receive any reportable gift in Yes Yes Yes ¥es < $[\ ]$ S O ŏ Š ŏ <u><</u> < <

Exemptions	Trusts-
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 Ethics. Yes No	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics 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?
Yes	Yes : No 🗸
<b>₹</b>	<b>₹</b>

## **SCHEDULE I - EARNED INCOME**

Name Gary L. Ackerman

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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
Pride of Judea Mental Health Center/Jewish Board of Family and Children's Services  N/A  N/A  N/A	Pride of Judea Mental Health Center/Jewish Board of Family and Children's Services	Spouse Compensation	N/A
Spouse Private Practice/Consulting Spouse Compensation N/A	Spouse Private Practice/Consulting	Spouse Compensation	N/A

IRA Equity Trust Co./Esquire Bank	Send Word Now (SWN) stock	Citibank (checking/savings/Money market accounts)	Melrose Credit Union	SP IRANationwide Annuity: Best of America IV Fixed Account	Tribco LLC (newspaper company), Flushing, NY	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.	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 an ownership interest in a privately-held business that is not publically traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental or other real property held for investment, provide a complete address.	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 for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.	Provide complete names of stocks and mutual funds (do not use ticker symbols.)	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.	Asset and/or income Source	BLOCK A
\$50,001 - \$100,000	\$15,001 - \$50,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$15,001 - \$50,000	\$100,001 - \$250,000					If an asset was sold and is included only because it is generated income, the value should be "None."	method other than fair market value, please	Value of Asset At close of reporting year. If you use a valuation	Year-End	BLOCK B
None	None	INTEREST	INTEREST	INTEREST	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.	generate tax-generied income (such as 401(k) plans or IRAs), you may check the "None"	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that	Type of Income	BLOCK C
NONE	NONE	\$1 - \$200	\$1 - \$200	\$1,001 - \$2,500	NONE				q	income by checking the appropriate box below. Dividends, interest, and capital gains, even if relinvested, must be disclosed as income. Check "None" if no income was earned or generated.	"None" column. For all other assets, Indicate the category of	For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(t)	Amount of Income	BLOCK D
			†								reporting year.	Indicate if asset had purchases (P), sales (S), or exchanges (E)	Transaction	BLOCK E

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SCHEDUI	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name	Gary L. Ackerman		Page 4 of 7
	Dreyfus Treasury Cash/Money Market Account	\$1 - \$1,000	None	NONE	
:	Congressional Federal Credit Union	\$1 - \$1,000	None	NONE	:
	Fidelity Investments, Magellan Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
i	Webster Bank accounts	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	Bethpage Federal Credit Union	\$1,001 - \$15,000	DIVIDENDS/INTE REST	\$1 - \$200	
	Chase Bank accounts	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	Manulife	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
DC1	NYS 529 College Savings Plan	\$1,001 - \$15,000	DIVIDENDS/INTE REST	\$1 - \$200	All under \$500; various purchase
DC2	NYS 529 College Savings Plan	\$1,001 - \$15,000	DIVIDENDS/INTE REST	\$1 - \$200	All under \$500; various purchase dates
DC3	NYS 529 College Savings Plan	\$1,001 - \$15,000	DIVIDENDS/INTE REST	\$1 - \$200	All under \$500; various purchase

CHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	ME Name Gary L. Ackerman	Ackerman		Page 5 of 7
DC4	NYS 529 College Savings Plan	\$1,001 - \$15,000	DIVIDENDS/INTE \$1 - \$200 REST	\$1 - \$200	All under \$500;
		-	-	-	various purchase

## SCHEDULE V - LIABILITIES

Name Gary L. Ackerman

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personal residences. 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. NOTE: Pending legislation may require Members to report mortgates on 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

SP,		Date Liability		
JT	Creditor	Incurred	Type of Liability	Amount of Liability
	Bethpage Federal Credit Union	Oct 22, 2010	Mortgage, personal residence	\$250,001 - \$500,000
!	Bethpage Federal Credit Union	Aug 11, 2008	HELOC, personal residence	\$50,001 - \$100,000
	Bethpage Federal Credit Union	August 2003	HELOC, vacation home	\$50,001 - \$100,000
	Selig Zises	2007	Loan secured by stock	\$15,001 - \$50,000

## **SCHEDULE VIII - POSITIONS**

Name Gary L. Ackerman

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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 Directors (unpaid)	Tribco LLC