#### **EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION** 1 ANSWER EACH OF THESE QUESTIONS

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response

III. 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.

Yes

<u>₹</u>

VI. Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, complete and attach Schedule VI.

Yes

S

X

**TRUSTS**—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 a dependent child? because 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 Yes Yes No X 8 X

## SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name MACK S.	. Dunéc	Pageiof
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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) totalling \$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. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

							FTI LLC	Harris County, Texas Public Schools		First Bank & Trust, Houston, TX	XYZ Corporation, Houston, TX	Course (include vale of feceipt for fictionalia)	Source (include date of receipt for honoraria)
						_	Salary	Spouse Salary	Honorarium	Director's Fee	Salary	- <del>)</del>   PG	Type
						•	148,500	NA	0	\$400	\$6,300	Current Year to Filing	Amount
			5 5 5 5 5 5 5			•	143,500	NA	\$1,000	\$3,200	\$28,450	Preceding Year	unt

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	, =			5	┿┈	ודו	ľ	DC, Examples:		income source is used by your spouse (of ) or coperior ent child (DC) or is jointly held with your spouse (JT), in the optional column on the far left.  For a detailed discussion of Schedule II requirements, please refer to the instruction booklet.	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits total- ing \$5,000 or less in personal checking or savings accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.  If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or depend-	For an ownership in that is not publicly ness, the nature colocation in Block A.	For rental or other real property held for investment provide a complete address.	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) that are self-clirected (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-clirected, provide only the name of the institution holding the account and its value at the end of the reporting period.
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ı					271	ئ	st Bank of Paducah, KY accounts			ent child (CC) or is jointly held with your spouse (JT), in the optional column on the far left.  The optional column on the far left.  For a detailed discussion of Schedule II requirements, please refer to the instruction booklet.	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 personal checking or savings accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.  If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or depend-	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.	nent	Asset and/or Income Source Asset and/or Income Source lidentify (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) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the such that executing 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.
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SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Contin	Continuation Sheet (if needed)			
	BLOCK A	BLOCK B	BLOCK C	BLOCK D
	Asset and/or Income Source	Value of Asset	Type of Income	Amount of Income
SP,		A B C D E F G H I J K L	е	Current Year Preceding Year
JT,		000		XI III V V VI III II I I I X
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	IRA	×	X	X
	401(K)	*	×	
SP	SEP PLAN	×	×	X
Sρ		×	×	X
OC	529 College SAV	*	<b>X</b>	×
2	5a9 College SAV	*	*	×
	LIFE INS - TERM	*	*	X X
	LIFE Ins - Whole	×	*	*
98	ns -	*	*	*

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#### SCHEDULE III — LIABILITIES

Name MACK S. DENEC

Page ⊥L of ⊥

owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furni-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 ling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000. ture, or appliances; 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 sib-

					SP, DC, JT
		-	N A	Example: First Bank of Wilmington, DE	Creditor
				May 1998	Date Liability Incurred mo/year
				Mortgage on 123 Main Street, Dover, DE	Type of Liability
					\$10,001— \$15,000
					\$15,001— \$50,000
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					\$50,000,000
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#### SCHEDULE IV — POSITIONS

any nonprofit organization, any labor organization, or any educational or other institution other than the United States Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an officer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise,

**Exclude:** Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization); and positions solely of an honorary nature

and positions solely of an itoriorary nature.	ature.
Position	Name of Organization
Trustee	JOSEPH KUSHNET HEBTEW ACADEMY

### **SCHEDULE V -- AGREEMENTS**

Name MACK S. DUNGO

Page \_\_\_\_ of \_\_1

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NA	•

# SCHEDULE VI -- COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the *two* prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. Government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule I.

	The state of the s
Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
NIA	

GPO: 2012

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