	Yes No 🗸	-	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.	Exemptions Have you excluded from this report any other assets, "unearned" income, transactions, or li because they meet all three tests for exemption? Do not answer "yes" unless you have first
	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?	Trusts- Details regarding "Qualified Blind Trusts" approved disclosed. Have you excluded from this report details.
	NS	ESTION	TINFORMATION - ANSWER EACH OF THESE QUESTIONS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
_			schedule attached for each "Yes" response.	If yes, complete and attach Schedule V.
	he appropriate	ed and the	Yes ☑ No ☐ Each question in this part must be answered and the appropriate	Did you, your spouse, or a dependent child have any reportable Hability V. (more than \$10,000) during the reporting period?
			If yes, complete and attach Schedule IX.	if yes, complete and attach Schedule IV.
	Yes 🗌 No 🗸	n outside	Did you have any reportable agreement or arrangement with an outside Yes ✔ No ☐ IX. entity?	Did you, your spouse, or dependent child purchase, sell, or exchange any IV. reportable asset in a transaction exceeding \$1,000 during the reporting Ye period?
			If yes, complete and attach Schedule VIII.	more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.
	∀	filing in the	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Did you, your spouse, or a dependent child receive "unearned" income of III. more than \$200 in the reporting period or hold any reportable asset worth
			If yes, complete and attach Schedule VII.	If yes, complete and attach Schedule II.
	Yes V No	than \$350	Yes No VII. reimbursements for travel in the reporting period (worth more than \$350 from one source)?	Did any individual or organization make a donation to charity in lieu of paying II. you for a speech, appearance, or article in the reporting period? Ye
			If yes, complete and attach Schedule VI.	If yes, complete and attach Schedule I.
	Yes No 🗸	able gift in otherwise	Yes No VI. the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)?	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 l. or more from any source in the reporting period?
			F THESE QUESTIONS	PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS
	more than 30 days late.	more late.	Termination Date: Termination	Report ☐ Annual (May 15) 🗹 Amendment
	A \$200 penalty shall be assessed against anvone who files	A \$20 be as	Officer Or Employing Office:	Filer House of Representatives District: 09
	(Office Use Only)	(O)	(Daytime Telephone)	(Full Name)
 	2013111Y 15 FH 3: 01	201		Marcia (Marcy) C. Kaptur
	THE TABLE DROOTS OF SELECT			
B ₩	BETWERED		ATIVES For use by Members, officers, and employees	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT
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SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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 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 (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 optional column on the far left. in, or income derived from, a federal retirement program, including the Thrift Exclude: Your personal residence, including second homes and vacation homes location in Block A. state the name of the business, the nature of its activities, and its geographic 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 For an ownership interest in a privately-held business that is not publically traded, For rental or other real property held for investment, provide a complete address. reporting period. "unearned" income during the year. Asset and/or Income Source 5151 Fleet Rd., Toledo, OH 43615 43615 1848 Rivard Rd., Toledo, OH 1854 Harlan Rd, Toledo, OH **BLOCK A** \$100,000 \$100,000 \$50,001 -\$100,000 \$50,001 value should be "None." \$50,001 generated income, the included only because it is market value, please method other than fair At close of reporting year specify the method used If you use a valuation Value of Asset an asset was sold and is Year-End Name Marcia (Marcy) C. Kaptur **BLOCK B** 2011 RENT 2011. rental income for during the reporting period. the asset generated no income and capital gains, even if reinvested, must be disclosed you may check the "None" column. Dividends, interest, rental income for as income. Check "None" If do not allow you to choose Check all columns that apply No renter or (such as 401(k) plans or IRAs), generate tax-deferred income specific investments or that For retirement accounts that No renter or Type of Income BLOCK C NONE NONE or generated \$5,001 - \$15,000 disclosed as income. Check gains, even if reinvested, must be Dividends, interest, and capital For retirement accounts that do not allow you to choose specific appropriate box below. Income by checking the assets, indicate the category of deferred income (such as 401(k) Investments or that generate tax-'None" if no income was earned "None" column. For all other plans or IRAs), you may check the Amount of Income BLOCK exceeding \$1,000 in exchanges (E) reporting year. sales (S), or had purchases (P), Indicate if asset Transaction **BLOCK E** Page 2 of 8

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME	E Name Marcia (Marcy) C. Kaptur	Marcy) C. Kaptur		Page 3 of 8
Congressional Federal Credit Union	\$1,001 - \$15,000	INTEREST-funds accrued in this separate account are from foregone congressional pay (raises) and are distributed annually to charitable causes	\$1 - \$200	
DFA Global Fixed Income 1 yr (Mutual Fund)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	S(part)
DFA Global Fixed Income 2 yr (Mutual Fund)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	S(part)
DFA Selectively Hedged Fixed Income	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
DFA U.S. Core Equity I	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
Key Bank	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
PNC Bank	\$15,001 - \$50,000	INTEREST on Certificate of Deposit	\$1,001 - \$2,500	
RBS Citizens Bank	\$15,001 - \$50,000	INTEREST on Certificate of Deposit	\$201 - \$1,000	
Schwab Money Market	\$1,001 - \$15,000	None	NONE	
Suburban Federal Credit Union	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
Transamerica Individual Retirement Annuity	\$50,001 - \$100,000	INTEREST	\$1,001 - \$2,500	not a self directed IRA

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Vanguard Short Term Corp Vanguard Short Term Bond Vanguard Inflation Protected Bonds (IPB) U.S. Savings Bonds \$1,001 -\$15,000 \$1,001 -\$15,000 \$50,001 -\$100,000 None Name Marcia (Marcy) C. Kaptur None **DIVIDENDS** DIVIDENDS/Capit \$201 - \$1,000 al Gain **DIVIDENDS** NONE \$201 - \$1,000 \$1 - \$200 T ഗ Page 4 of 8

SCHEDULE IV - TRANSACTIONS

Name Marcia (Marcy) C. Kaptur

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transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below. Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	DFA 1 Year Fixed Income	S(part)	No	6-27-2011	\$1,001 - \$15,000
	DFA 2 Year Global Fixed Income	S(part)	8	11-28-2011	\$1,001 - \$15,000
	Vanguard Inflation Protected Bonds	S(part)	Yes	8-10-2011	\$1,001 - \$15,000
	Vanguard Short Term Bond	0	N/A	8-10-2011	\$1,001 - \$15,000

SCHEDULE V - LIABILITIES

Name Marcia (Marcy) C. Kaptur

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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, DC, JT
	Congressional Federal Credit Union	Creditor
	June 2011	Date Liability Incurred
D.C. area condominium apartment used for temporaray residence while Congress is in session. No mortgage on permanent/primary residence in Ohio.	Mortgage on Washington	Type of Liability
	\$250,001 - \$500,000	Amount of Liability

SCHEDULE VII. - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Marcia (Marcy) C. Kaptur Page 7 of 8

spouse or dependent child that is totally independent of his or her relationship to you. 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, 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

Source	Date(s)	Point of Departure DestinationPoint of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family 19? Food? Member Included? 1) (Y/N) (Y/N)	Days not at sponsor's expense
Oranim College, Kiryat Tivon, Israel	Feb 19-23	Feb 19-23 DC-Tel Aviv-DC	Υ	Y	N	None

SCHEDULE VIII - POSITIONS

Name Marcia (Marcy) C. Kaptur

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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
Trustee	The Anastasia Fund, P.O. Box 2121, Toledo, OH 43603. [a charity established in the names of Anastasia and Stephen Kaptur]