통 >	because Yes	isactions, or liabilities of a spouse or dependent child with the Committee on Standards of Official Conduct.	rned" income, tran	EXEMPTION —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.
₹ <u>X</u>	Yes	s of Official Conduct and certain other "excepted trusts pouse, or dependent child?	nittee on standard	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?
S	HESE QUESTIONS	MATION — ANSWER EACH OF THESE QUESTIONS	UST INFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
the onse.	or each "Yes" respo	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	No I	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 V.
X	gement with Yes	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	No	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.
No No	ore the date Yes	VIII. 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.	No I	III. 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.
₹ <u>X</u>	reporting Yes	VII. 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.	×	II. 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.
X	ive any ing more Yes	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.	× No	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.
		E QUESTIONS	H OF THES	PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS
assessed nore than	A \$200 penalty shall be assessed against anyone who files more than 30 days late.	Employing Office: Termination Date:	Officer or Employee	Filer Status Member of the U.S. State: Floyd A. House of Representatives District: 14 Report Type X Annual (May 15) Amendment
609	2009 MAY -7 AM 9: 09 MCLS-HOUSE USE ONLY TAKEN TO THE METERS OF THE MET	Daytime Telephone:(5レイ)フタフータンシン //	Daytime	Name: Rep. Thomas J. Rooney
	HAND DELVERED	Form A For use by Members, officers, and employees	TEMENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT

Name
thomas
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Rooney

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SCHEDULE I—EARNED INCOME

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.

Source	Туре	Amount
	Approved Teaching Fee	\$6,000
State of Maryland	Legislative Pension	\$9,000
	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	NA
Kvamer Sopko & levenstein PA	Salary	4 88, 86 p
Seminole Beach Realty tuc	Spouse's gross business income (realtur)	~ba'bo! #
	and an analysis of the state of	

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7	30	22	ڊھ		_ N		Exa		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. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse's child, parent, or sibling; any deposits totalling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs. 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.	provide the value and income information on each asset in the account that exceeds the reporting threshold. For retirement plans that are	dentify (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 asset 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).	>
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Z.	Eagle Series	Wechovia	12 shaves Quest Bi	shaves walt Disney	Covpore	L		S	the directed, name the institution holding the nt and its value at the end of the reporting. For an active business that is not publicly, state the name of the business, the nature activities, and its geographic location in A. For additional information, see the stion booklet. de: Your personal residence(s) (unless is rental income); any debt owed to you by pouse, or by you or your spouse's child, or sibling; any deposits totalling \$5,000 or personal savings accounts; any financial st in or income derived from U.S. nment retirement programs. so choose, you may indicate that an asset source is that of your spouse (SP) or dent child (DC) or is jointly held (JT), in the all column on the far left.	e va Partin	fy (a) each asset held for investment or pro- on of income with a fair market value ding \$1,000 at the end of the reporting peri- nd (b) any other asset or sources of income generated more than \$200 in "unearned" to generated more than \$200 in "unearned" to generated more than to solve full be of stocks and mutual funds (do not use symbols). For all IRAs and other retirement (such as 401(k) plans) that are self directed plans in which you have the power, even if the carcised, to select the specific investments).	<u>n</u>
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SCHEDULE III—ASSETS AND "UNEARNED" INCUME
Continuation Sheet (if needed)

Name Thomas J. Roomay

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME Continuation Sheet (if needed)

Name Thomas J. Rooner

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SCHEDULE III—ASSETS AND "UNEARNED" INCUIVIE Continuation Sheet (if needed)

Name Thomas J. Rooney

Page 6 of 10

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Thomas J. Roomer Page 7 of a

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SCHEDULE IV— TRANSACTIONS

Name Thomas J. Rooney

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Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, of	lype of Transaction	fion	Date		Am	ount	of Tra	Amount of Transaction	ion	
stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions	1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		(MO/DAY/YR)	В	D	m and	m ល	.	-	<u>د</u>
	CHASE E	HANGE	or Quarterly, Monthly, or	0 1-	1- (3)	00	00 : 01-	,001-	0,000	0,000
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SP Example: Mega Coporation Common Stock (partial sale)	् X		10-12-08	X						
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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 it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest; 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 halance at the close of the preceding calendar year exceeded \$10,000

cards) o	cards) only if the balance at the close of the preceding calendar year exceeded \$10,000	eeded \$10,000.						
				A	mount o	Amount of Liability		
SP, DC, JT	Creditor	Type of Liability	15,001- 15,000- 15,000-	50,001	250,000 250,001 500,000 = 1	500,001- 1,000,000 ຄ 1,000,001: ± 5,000,000 ອີ	5,000,001- — 25,000,000 25,000,000 50,000,000 ver 50,000,000	
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		₹ ×				·····
SP	American Education Services	Student loans		×				
 37	American Express	wedit card	*			72		-
								
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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 \$134 or less need not be added towards the \$335 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$335 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	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	\$345

SCHEDULE VIII—POSITIONS

Name Thomas J. Rooney

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organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any non profit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

zations); and positions solely of an honorary nature Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organi-

zations), and positions solely or all honorary nature.	onorally names.
Position	Name of Organization
Associate attorney	Kramor Sopho & Levenstein PA
Judge Advocate	American Legion Post 271
board member	Floride Atlantic University Advisory Board
Board member	The Children's Place at Home Safe Inc
Board member	Rooney's bolf foundation trac

SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an 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

			Date	
			Parties To	
			Terms of Agreement	