HAND DELIVERED

₹		Yes 🗆	ä	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.	ets, "unearned" inc Do not answer "yes	Exemptions— Have you excluded from this report any other assets, "unearned" income, transactions, or liabilitie because they meet all three tests for exemption? Do not answer "yes" unless you have first consu. Standards of Official Conduct.	
N ₀		Yes 🔲		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?	ed by the Committe d from this report d	Trusts- Details regarding "Qualified Blind Trusts" approv trusts" need not be disclosed. Have you exclude child?	
		SN	STIO	TION ANSWER EACH OF THESE QUE	ST INFORMA	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS	U
				schedule attached for each "Yes" response.		If yes, complete and attach Schedule V.	
ate	ropr	he app	and t	Each question in this part must be answered and the appropriate	Yes No	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 IX.		If yes, complete and attach Schedule IV.	
& □	S)	Yes	utside	Did you have any reportable agreement or arrangement with an outside IX. entity?	Yes 🕢 No 🗆	Did you, your spouse, or 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 VIII.		If yes, complete and attach Schedule III.	
№	ᡌ	e Yes	ng in the	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Yes 🕢 No 🔲	Did you, your spouse, or a dependent child receive "unearmed" 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 VII.		If yes, complete and attach Schedule II.	
₹		or Yes	e travel o an \$335	Did you, your spouse, or a dependent child receive any reportable travel or VII. relimbursements for travel in the reporting period (worth more than \$335 from one sources).	Yes No 🖸	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 VI.		If yes, complete and attach Schedule I.	
<u>₹</u>		Yes	e gift in herwise	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?	Yes 🕢 No 🖂	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	
				UESTIONS	OF THESE QI	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	P
iys	30 da	more than 30 days late.	more late.	Termination Date:	☐ Termination	Report ☑ Annual (May 15) ☐ Amendment	_
ainst	d aga	be assessed against anvone who files	be as	 		S	
1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		A \$200 penalty shalf	ه <u>۱</u>	Officer Or Employing Office:	0 []	Member of the U.S. State: NC	
<u>કુ</u> •	se O	(Office Use Only)	7	(Daytime Telephone) U.S.ED		(Full Name)	
		- i	13.4 - -	252-243-7996		G.K. Butterfield	
5	Ċ	2009 MAY 13 PM 5: 15	MY	2009			
	30E (1	RESOUR	TIVEF	For use by Members, officers, and employeess! ATME RESOURCE CLASS	MENT	CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT	Q
f	[Ì	FORM A Page 1 of 9	ATIVES	UNITED STATES HOUSE OF REPRESENTATIVES	
							l

SCHEDULE I - EARNED INCOME	Name G.K. Butterfield	Page 2 of 9
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 exceedin \$1,000.	any source (other than the filer's current employment e source and amount of any honoraria; list only the sc	ent by the U.S. Government) totaling \$200 or more source for other spouse earned income exceeding
Source	Туре	Amount
State of North Carolina	Retirement	\$54,735.48

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SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	IE Name G.K. Butterfield	erfield		Page 3 of 9
	BLOCK A	вгоск в	вгоск с	вгоск d	BLOCK E
ASSE Identify (a) ea a fair market and (b) any or than \$200 in ' land, provide mutual funds retirement pik in which you investments), in the accoun plans that are and its value that is not pu its activities, information, s Exclude: You debt owed to parent or sibl savings acco Government If you so choo that of your si in the options	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 assets 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 investments), provide the value and income information on each asset in the account that exceeds the reporting threshold. For retirement plans that are 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, or by your or your spouse's child, parent or sibling; any deposits totaling \$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.	Year-End Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	Type of Income Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA". For all other assets including all IRAs, indicate the type of income by checking the appropriate box below. Dividends and Interest, even if reinvested, should be listed as income. Check "None" if asset did not generate any income during the calendar year.	Amount of Income For retirement plans or accounts that do not allow you to choose specific Investments, you may write "NA" for income. For all other assets, including all IRAs, indicate the category of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was earned or generated.	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$4,000 in reporting year.
that of your s in the optiona	pouse (SP) or dependent child (DC) or is jointly held (JT), all column on the far left. BB&T, Wilson, NC	\$1 - \$1,000	INTEREST	\$1 - \$200	
	BB&T, Wilson, NC	\$1 - \$1,000	INTEREST	\$1 - \$200	
	BB&T, Wilson, NC	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	BB&T, Wilson, NC	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
	BB&T, Wilson, NC	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	Congressional Federal Credit Union, Washington, DC	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	Note Receivable, Carrons Funeral Home, Wilson, NC	\$50,001 - \$100,000	INTEREST	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME Real Estate Partnership-Fitch, Butterfield, & Wynn, Wilson, NC Butterfield & Connie, Wilson, Wilson, NC State Employees Credit Union, Real Estate-Individual, Wilson, Butterfield & Mills, Wilson, NC Development Center, Wilson, Real Estate Partnership-Real Estate Partnership-Note Receivable, JSL \$500,001 -\$1,000,000 \$100,001 -\$250,000 \$250,001 -\$500,000 \$1,001 - \$15,000 None \$1,001 - \$15,000 Name G.K. Butterfield INTEREST INTEREST RENT RENT RENT/CAPITAL GAINS RENT \$1 - \$200 \$15,001 - \$50,000 \$50,001 - \$100,000 \$15,001 - \$50,000 \$201 - \$1,000 \$2,501 - \$5,000 Page 4 of 9

SCHEDULE IV - TRANSACTIONS

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 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. Name G.K. Butterfield Page 5 of 9

	SP, DC, JT
Real Estate (Building), Wilson, NC	Asset
တ	Type of Transaction
10-30-08	Date
\$50,001 - \$100,000	Amount of Transaction

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 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. SCHEDULE V - LIABILITIES Name G.K. Butterfield Page 6 of 9

T			
SP,			
-	Creditor	l ype of Liability	
	Heritage Bank, Wilson, NC	528, 536, 548, 542 Nash (Nash Plaza) of Wilson, NC	\$250,001 - \$500,000
•	Cornerstone Bank, Wilson, NC	1614 MLK Parkway of Wilson, NC	\$15,001 - \$50,000
	Cornerstone Bank, Wilson, NC	5314 Ward Blvd. Of Wilson, NC	\$15,001 - \$50,000
	Cornerstone Bank, Wilson, NC	1702 MLK Parkway of Wilson, NC	\$15,001 - \$50,000
	BB&T Bank, Wilson, NC	211-213 Pender Street of Wilson, NC	\$50,001 - \$100,000
	BB&T Bank, Wilson, NC	109 Wayfarer Court of Wilson, NC	\$50,001 - \$100,000
	BB&T Bank, Wilson, NC	325 E. Nash St. (Funeral Home) of Wilson, NC	\$10,001 - \$15,000
	Heritage Bank, Wilson, NC	106 Pender St. (Barnes Corner) of Wilson, NC	\$100,001 - \$250,000
	Cornerstone Bank, Wilson, ,NC	608 Nash St. (Darden Corner) of Wilson, NC	\$50,001 - \$100,000
	BB&T Bank, Wilson, NC	Other Liabilities in Wilson, NC	\$50,001 - \$100,000
	First Citizens Bank, Wilson, NC	800 Hines Street of Wilson, NC	\$50,001 - \$100,000
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SCHEDULE VIII - POSITIONS

Name G.K. Butterfield

Page 7 of 9

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 Member	Congressional Black Caucus Foundation, Inc. (uncompensated)

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SCHEDULE IX - AGREEMENTS

Name G.K. Butterfield

Page 8 of 9

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.

7/1/08	Date
G.K. Butterfield & State of North Carolina	Parties To
Receive \$4,610.92 monthly from 7/1/09 until death.	Terms of Agreement

FOOTNOTES တ G 4 ယ 3 Number Schedule III Schedule V Schedule III Schedule III Schedule V Schedule III Section / Schedule asset. current values and a reduction in rental revenue. Changes from prior year resulted from an increase in estimated additional liabilities. liabilities falling below \$10,000 and an increase due to recording Changes from prior year resulted in a decrease due to omitting increase due to recording notes receivable. reclassification of asset, collection of receivables and an Changes from prior year resulted from a decrease due to Changes from prior year resulted from a decrease due to sale of Liabilities are stated at their estimated current amounts Assets are stated at their estimated current values Name G.K. Butterfield Footnote and First Citizens Bank Individual real estate. Current and long-term Notes receivable and Federal Credit Union Notes Receivable. estate Partnership real liabilities. real estate. the following item This note refers to Page 9 of 9

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