

# UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT

**FORM A** Page 1 of 6  
For use by Members, officers, and employees

Steven J. Chabot

513-662-8000

(Full Name)

(Daytime Telephone)

**HAND  
DELIVERED**

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2012 MAY 15 PM 4:47

(Office Use Only)

<b>Filer Status</b>	<input checked="" type="checkbox"/> Member of the U.S. House of Representative	State: OH District: 1	<input type="checkbox"/> Officer Or Employee	Employing Office:	A \$200 penalty shall be assessed against anyone who files more than 30 days late.
<b>Report Type</b>	<input checked="" type="checkbox"/> Annual (May 15)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Termination Date:	

## PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

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? <i>If yes, complete and attach Schedule I.</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)? <i>If yes, complete and attach Schedule VI.</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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? <i>If yes, complete and attach Schedule II.</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 from one source)? <i>If yes, complete and attach Schedule VII.</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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? <i>If yes, complete and attach Schedule III.</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? <i>If yes, complete and attach Schedule VIII.</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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? <i>If yes, complete and attach Schedule IV.</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? <i>If yes, complete and attach Schedule IX.</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? <i>If yes, complete and attach Schedule V.</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

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

<b>Trusts-</b> 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 <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Exemptions--</b> 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 <input type="checkbox"/> No <input checked="" type="checkbox"/>

**SCHEDULE I - EARNED INCOME**

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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	Type	Amount
St. Xavier High School	Spouse salary	N/A
Hamilton County, Ohio (for legal services performed while not a Member of Congress)	Attorney fees	\$1,087.50

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
<p>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 source of income which generated more than \$200 in "unearned" income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use ticker symbols).</p> <p>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.</p> <p>For rental or other real property held for investment, provide a complete address.</p> <p>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.</p> <p>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.</p> <p>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.</p>				
Charles Schwab & Co IRA	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	
Actuant Corp common stock (in Schwab IRA listed above)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
Castle Am common stock (in Schwab IRA listed above)	\$1,001 - \$15,000	DIVIDENDS	NONE	
Eagle Materials common stock (in Schwab IRA listed above)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
Raven Industries Inc common stock (in Schwab IRA listed above)	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
Universal Stain & Alloy common stock (in Schwab IRA listed above)	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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Charles Schwab & Co	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
Cintas common stock	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
Victory Money Market Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
PNC Bank account	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
US Bank account	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
AdvantageBank CD	\$50,001 - \$100,000	INTEREST	\$1,001 - \$2,500	
Janus Fund IRA	\$15,001 - \$50,000	None	NONE	
Natixis Fund IRA	\$15,001 - \$50,000	None	NONE	
Ohio Public Employees Deferred Compensation Guaranteed Return Option	\$15,001 - \$50,000	None	NONE	
Ohio Public Employees Deferred Compensation Fidelity Magellan	\$15,001 - \$50,000	None	NONE	
Ohio Public Employees Deferred Compensation Vanguard Inst Index	\$15,001 - \$50,000	None	NONE	
Ohio Public Employees Retirement System	\$50,001 - \$100,000	None	NONE	
Bio Ref Labs common stock	\$15,001 - \$50,000	None	NONE	

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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CCA Industries common stock	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
Daktronics common stock	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
Encore (Denbury) common stock	\$15,001 - \$50,000	None	NONE	
Finish Line common stock	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
Gulf Island common stock	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
K-Swiss Inc common stock	\$1,001 - \$15,000	None	NONE	
Marine Products Corp common stock	\$1,001 - \$15,000	None	NONE	
Matrix Service Corp common stock	\$1,001 - \$15,000	None	NONE	
Med Act Industries common stock	\$1,001 - \$15,000	None	NONE	
Merit Medical Systems common stock	\$1,001 - \$15,000	None	NONE	
Mult Color Corp common stock	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	
Sigmatron Intl Inc common stock	\$1,001 - \$15,000	None	NONE	

# SCHEDULE IX - AGREEMENTS

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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
Dec 1985 - 1994	Ohio Public Employees Retirement System	Dates reflect period of paying into fund; eligible for receipt upon retirement
May 1990 - Dec 94	Ohio Public Employees Deferred Compensation	Dates reflect period of paying into fund; eligible for receipt after age 55 or upon retirement