No X	child because Yes	sactions, or liabilities of a spouse or dependent child because with the Committee on Ethics.	d" income, trans	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee or	EXEMPTION—Have they meet all three to
No X	sclosed. Have you Yes	I certain other "excepted trusts" need not be dis	e on Ethics and dependent chil	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 dependent child?	TRUSTS—Details re excluded from this re
No X	Yes		ublic Offering?	-Did you purchase any shares that were allocated as a part of an Initial Public Offering?	IPO —Did you purch:
SNOI	NSWER EACH OF THESE QUESTIONS	— A	TINFORMATION	F SPOUSE, DEPENDENT, OR TRUST	EXCLUSION OF
and the esponse.	tion in this part must be answered and the schedule attached for each "Yes" response	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response	S S	V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes X If yes, complete and attach Schedule V.	V. Did you, your spouliability (more than \$: If yes, complete and
No X	arrangement with Yes	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	<u>§</u>	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.	IV. Did you, your spouse, or a deper or exchange any reportable asset in \$1,000 during the reporting period? If yes, complete and attach Scheo
No ×	or before the date	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.	S .	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.	III. Did you, your spo income of more than reportable asset wor If yes, complete and
No X	d receive any in the 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 \$350 from one source)? If yes, complete and attach Schedule VII.	No	II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the Yes reporting period? If yes, complete and attach Schedule II.	II. Did any individual lieu of paying you fo reporting period? If yes, complete an
No X	d receive any gregating more Yes	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)? If yes, complete and attach Schedule VI.	o N	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? Yes X	I. Did you or your sp fees) of \$200 or mon If yes, complete an
		E QUESTIONS	OF THESE	PRELIMINARY INFORMATION — ANSWER EACH	PRELIMINARY
I be assessed files more than	A \$200 penaity shall be assessed against anyone who files more than 30 days late.	r Employing Office: e Termination Date:	Officer or Employee	Member of the U.S. State: MA House of Representatives District: 1 Annual (May 15, 2013)	Filer Status Report X
MES	OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIONS	u			
9 M	2013 KAY 14 AM 11: 59	Daytime Telephone	Daytime T	EL EVERETT CAPUANO	Name: MICHAEL
	LEGISLATIVE RESOURCE CENTER	1.5			
RED Fig. 10	HAND DELIVERED	Form A For use by Members, officers, and employees	MENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT	UNITED STAT
>	•				

Name
MICHAEL EVERETT
CAPWAND
Page 2_ of 1

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.

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.	ts received under the Social Sec	curity Act.
Source	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
Examples: State of Maryland	Legislative Pension	\$9,000
Civil War Houndtable (Oct. 2nd) Ontario County Board of Education	Spouse Salary	\$1,000 NA
RAPHAEL AND RAPHAEL LLP	Spouse SALARY	NA
YNZ, LC	SPOUSE SALARY	NA
CT+M, LLC	SPOUSE SALARY	とり
ESTATE OF G. MALOOF TRUST	TRUSTEE FEE SPOUSE	ZP

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SCHEDULE II — PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics. A green envelope for transmitting the list is included in each Member's filing package.

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	Evamples:												
	Association of American Associations, Washington, DC	XYZ Mage											
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Date	Feb. 2, 2012	lug. 13, 20:											
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Amount	,000	\$500			:			:					

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SEE SCHEDWL	JT 1st Bank of Paducah, KY Accounts		SP, SP Mega Corp. Stock	that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second homes and vacation homes (<i>unless</i> 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. 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. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	property," and a city and state. For an ownership interest in a privately-held business	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds. For rental or other real property held for investment, provide a complete address or a description, e.g., "rental	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 "unearned" income during the year.	Asset and/or Income Source	BLOCK A
E ATTACHED	×	Indefinite	X	\$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000	> B C D m T G T - C X C C X	* This column is for assets held solely by your spouse or dependent child.	If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."	Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used.	Value of Asset	ВLОСК В
	×	Royalties	X X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		vested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	불모요	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or	Type of Income	BLOCK C
	×	×	X	\$1,000,001 - \$5,000,000 Over \$5,000,000		* This column is for income generated by assets held solely by your spouse or dependent child.		For assets for which you checked "Tax- Deferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking the	Amount of Income	BLOCK D
			S (partial)	sold, please indicate as follows: (S) (partial) See below for example. P, S,			\$1,000 in reporting	asset had purchases (P), sales (S), or exchanges	Transaction	BLOCK E

	None	Tax Deferred	\$15,001 - \$50,000	Fidelity T Rowe Price Cap Appreciation	SP
	None	Tax Deferred	\$1,001-\$15,000	Fidelity Family Value	SP
	None	Tax Deferred	\$1,001-\$15,000	Fidelity FPA Crescent Inst'l	SP
	None	Tax Deferred	\$1,001-\$15,000	Fidelity Ariel Appreciation	SP
	None	Tax Deferred	Clas \$1,001- \$15,000	Fidelity Invesco Van Kampen Growth & Income Class	SP
	None	Tax Deferred	\$15,001 - \$50,000	Fidelity Export & Multinational	SP
	None	Tax Deferred	\$15,001 - \$50,000	Fidelity Select Nat'l Gas	SP
	None	Tax Deferred	\$1,001-\$15,000	Fidelity Balanced Fund	SP
	None	Tax Deferred	\$1,001-\$15,000	Fidelity Contra Fund	Sp
	None	Tax Deferred	\$15,001 - \$50,000	Fidelity Int'l Discovery	Sp
	None	Tax Deferred	\$1,001-\$15,000	Fidelity - Traditional - Export & Multinational	фS
	None	Tax Deferred	\$1 - \$1,000	Fidelity - Traditional - Cash Reserves	qS
	None	Tax Deferred	\$1,001-\$15,000	Nesteggs - Fidelity Cash Reserves	Sp
	None	Tax Deferred	\$50,001 - \$100,000	Nesteggs - Windward Aggressive Fund	Sp Sp
	None	Tax Deferred	\$1,001-\$15,000	Nationwide - Large Cap Growth	
	None	Tax Deferred	\$1,001-\$15,000	Nationwide - Inter Val Instr Svsc	
	None	Tax Deferred	\$1,001-\$15,000	Nationwide - Fidelity Contra	
	\$1 - \$200	Interest	\$1,001-\$15,000	Winter Hill Bank	ŢŢ
	\$1 - \$200	Interest	\$50,001 - \$100,000	Som Federal Credit Union	JT
	\$1 - \$200	Dividends	\$250,001 - \$500,000	SBLI - Term Life	
	\$15,001 - \$50,000	Rent	\$250,001 - \$500,000	High Street Realty Trust (Somerville, MA)	II
	\$1 - \$200	Interest	\$15,001 - \$50,000	East Cambridge Sav Bk Som, MA	JT
	\$2,501 - \$5,000	Interest & Prtship Inc	\$50,001 - \$100,000	CT&M, LLC (real estate owned in Somerville, MA)	Sp
	\$1 - \$200	Interest	\$1,001-\$15,000	Congressional FCU	ŢŢ
				house, this amt represents 100% of asset value	
	\$5,001 - \$15,000	Rent	\$500,001 - 1,000,000	Central St, Somerville, MA (although rent 27% of	IL
					JT
Hansachon	Income	Type of moome	Value of Asset	Assets and/or income source	
Block E		Block C	Block B	Block A	_
	page J of 10	ivitoriaer E. Capuario		Schedule III - Assets and Unearned Income (2012)	Sched
	nagge	-		July III Accept and I Incomed Income (2012)	0.1

Sche	Schedule III - Assets and ∪nearned Income (2012)		Michael E. Capuano	page 6 of 10	
	Block A	Block B	Block C		Block E
SP,	Assets and/or Income Source	Value of Asset	Type of Income	Amount of	Transaction
JT C,				Income	
SP	Fidelity Royce Total Return FD Investment CL	\$1,001-\$15,000	Tax Deferred	None	
SP	Fidelity Cash Reserves	\$1 - \$1,000	Tax Deferred	None	
SP	Charles Schwab - Cash & MM Fund (401K)	\$15,001 - \$50,000	Tax Deferred	None	
SP	Charles Schwab - Baird Core Plus Bd Inv	\$1,001-\$15,000	Tax Deferred	None	P
SP	Charles Schwab - BMO Intermediate Tax	\$1,001-\$15,000	Tax Deferred	None	Þ
SP	Charles Schwab - Metropolitan West Total	\$15,001 - \$50,000		None	P
SP	Charles Schwab - PIMCO Total Return Fund	\$1,001-\$15,000	Tax Deferred	None	P
SP	Charles Schwab - American Century Equity	\$15,001 - \$50,000	Tax Deferred	None	P
SP	Charles Schwab - Baron Small Cap Fund	\$1,001-\$15,000	Tax Deferred	None	
SP	Charles Schwab - Fideility Low Priced St Fd	\$1,001- \$15,000	Tax Deferred	None	P
SP	Charles Schwab - First Eagle Fund of Amer	\$1,001-\$15,000	Tax Deferred	None	
SP	Charles Schwab - Principal Mid Cap Blend A	\$1,001-\$15,000	Tax Deferred	None	P
SP	Charles Schwab - Schwab S&P 500 Index Fund	\$15,001 - \$50,000	Tax Deferred	None	P
SP	Charles Schwab - Schwab Total Stock Market	\$1,001-\$15,000	Tax Deferred	None	
	NOTE - Spouse moved 401(k) funds from Charles Schwab Cash and Money Market F	hwab Cash and Money I	Market Fund into other Funds	unds.	
	Some of those transfers were for more than \$1,000, as listed above	\$1,000, as listed above.			

SCHEDULE IV— TRANSACTIONS

Name MICHAEL EVERETT (APWAND

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(Socuse/DC Asset)

Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III. Exclude transactions between you, your spouse or dependent children, or the Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted SP, DC, JT tiai sale"). See example below. purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is soid, please so indicate (i.e., "parin a capital loss. Provide a brief description of any exchange transaction. 250 Sp S P <u>م</u> SP \$ This column is for assets solely held by your spouse or dependent child Sp 5ρ \$ Şβ ş Metropolitan West Blad Ret. Bond (4018) Am. Century Equity GR. INV (401K) GAIN ON SCHWAB STP 500 INDEX FD (401K) Pimco Total Return Fd <u>fidelih</u> PRINCIPAL MIDCAP BENDA (401K) PRINCIPAL MIDCAP BLENDA (401K) BAIRD CORE PLUS BD BMO Intermediate Example: gene hickory. sale of a Mega Corporation Common Stock (partial sale) law Riced SHK Find (401K) MALOOF TRUST/ESTATE 2011 share of gain on IAX HREE Z (401 K) (A18) (481 K) of Transaction × × ~ \times × **PURCHASE** × Type SALE X **EXCHANGE** Check Box if Capital × Gain Exceeded \$200 (MO/DAY/YR) 6-19-12 Bi-weekly, if 7-6-12 6-4-12 6 6-19-12 6-19-12 applicable Monthly, or 51-h-0 Quarterly, 10-12-12 -2012 -4-1Z -29-12 -5-12 \$1,001-\$15,000 >< メ × × × × × X × > \$15,001- \prec W × \$50,000 \$50,001-O \$100,000 Amount of Transaction \$100,001-O \$250,000 \$250.001m \$500,000 \$500,001-77 \$1,000,000 \$1,000,001 ព \$5,000,000 \$5,000,001-I \$25,000,000 \$25,000,001-\$50,000,000 Over ے \$50,000,000 Over \$1,000,000° ㅈ

SCHEDULE V— LIABILITIES

Name MICHAEL EVERETT (APWAND Page &

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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. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal close of the preceding calendar year exceeded \$10,000. "This column is for liabilities held solely by your spouse or dependent child are personally liable); 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 residence (unless it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you

SP. Creditor Date Liability Incurred Mo/Year Type of Liability A B C D E F G H - 1 J K Mo/Year Type of Liability A B C D E F G H - 1 J K Mo/Year Type of Liability Type of Liabili
Deta Liability Deta Liability A B C D E F G H I J Workpage on 123 Main St., Dower, DE \$10,001 - \$50,000 - \$15,000,000 - \$50,000,000 - \$5
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\$50,000,000 — Over \$50,000,000 ← Spouce/OC Liability —
\$50,000,000 C

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 \$140 or less need not be added towards the \$350 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$350 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

Course	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	\$375

Name MICHAEL	
ICHAEL CUERETT	1
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Page 2 of 10

SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed by the sponsor. Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$350 received by you, 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 amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor

spouse or dependent child that is totally independent of his or her relationship to you. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under 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

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	Source	Date(s)	City of Departure—Destination— City of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member included? (Y/N)	Number of days not at sponsor's expense
Evernoles	Chicago Chamber of Commerce	Mar. 2	DC—Chicago—DC	z	z	Z	
Examples.	Roycroft Corporation	Aug. 6–11	DC—Los Angeles—Cleveland	Υ	Y	Υ	2 Days
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			ANONE				
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SCHEDULE VIII—POSITIONS

Name MICHAEL EVERETT CAPUANO

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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 bus	Report all positions, compensated or uncompensated, held during the current calendar year as a
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Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

 	 			_
			Position	
		NONE	Name of Organization	

SCHEDULE IX—AGREEMENTS

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
	NONE	