yes No	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?	
need not Yes No No	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?	
ESE QUESTIONS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS	mí
be answered and the reach "Yes" response.	V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes No Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	
ment with Yes No X	 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? IV. Did you have any reportable agreement or arrangement with an outside entity? II. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IV. 	Ţ
e the date Yes No No	Ill. 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? Yes No III. 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.	
porting Yes 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 reporting period? No WII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$305 from one source)? If yes, complete and attach Schedule II.	
any more Yes No X	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. VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$305 and not otherwise exempt)? If yes, complete and attach Schedule VI.	
	PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS	ם" ו
against anyone who files more than 30 days late.	Annual (May 15) Amendment Termination Date:	
A \$200 penalty shall be assessed	Status Member of the U.S. State: Officer or Employing Office: A \$2	
(Office Use Only) INTER	(Full Name)	
Substitution II	DICHAEL ROBERT SCHOLTY 202225 5076	, -
TAND DEL VIRRIDANIER		_
	POINT ED STATES HOUSE OF REPRESENTATIVES Form A For 2007 Calendar Year Reporting Period For 2007 Calendar Year Reporting Period	
		٦.

Name
2
2
JULTY
,
1 CHAEC

Page | of C

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 helow

exceeding \$1,000. See examples below. Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefi	benefits received under the Social Security Act.	surity Act.
Source	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
Examples: State of Maryland Civil War Roundtable (Oct. 2nd)	Legislative Pension Spouse Speech	\$9,000 \$1,000
Ontario County Board of Education	Spouse Salary	NA
Oizer Scans Insulance	RENSUM COMMISSION	= 127 H
NYS RETIREMENT SYSTEM	SATE RETIREMENT INCOME	*14,863 °
NYS OFFICE OF CURT XDMINISTONION	Spows Junay	N/A
	50 00 00 00 00 00 00	

Name
7
7_
ا باريز
3
3 V ti Ji

age	
7	

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 Standards of Official Conduct. A green envelope for transmitting the list is included in each Member's filing package.

							(1+8 COUNTY COMPANY		Association of American Associations, Washington DC	Source
							51783CH	Article	Speech	Activity
							[-23 12, 2007	Aug. 13, 2007	Feb. 2, 2007	Date
							¥2000° cs	\$500	\$2,000	Amount

Ciredia Large	JANK OF	SP, SP Mega Corp. Stock DC, Examples: Simon & Schuster JT 1st Bank of Paducah, KY Accounts	Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by you or 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 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.	BLOCK A 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 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).
	X	Indefinite X	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$250,001 - \$500,000 \$500,001 - \$500,000 \$500,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$5,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 Over \$50,000,000	A B C D E F G H I J K L	Value of Asset 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. If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."
×	X	X X Royalties	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify: For Example, Partnership	Income or Farm Income)	BLOCK C 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 calendar year.
×	X	×	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000		Amount of Income 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 received.
		; ;	See below for example. P, S, E	If only a portion of an asset is sold, please indicate as follows: (S) (partial)	BLOCK E Transaction Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1000 in reporting year.

Cont

Ţ

DC,

SP.

THEDULE III—ASSETS AND Intinuation Sheet (if needed)	-ASSETS AND "UNEARNED" INCOME ≱t (if needed)	Name v	CHULTY, WICHAEL P	Page / of 8
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
, ,	None	INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify)	None — \$1 - \$200 = \$201 - \$1,000 = \$1,001 - \$2,500 <	or oʻ
				:
	/			
		7	,	
And the second second			\(\frac{1}{2}\)	
			- /- /-	
		-		
				/

This page may be copied if more space is required.

SP, DC, JT or your dependent child, or the purchase or sale of your persona SCHEDULE IV— TRANSACTIONS sold, please so indicate (i.e., "partial sale"). See example below. amount of the transaction exceeded \$1,000. Include transactions stocks, bonds, commodities futures, or other securities when the dependent child during the reporting year of any real property, Report any purchase, sale, or exchange by you, your spouse or residence, unless it is rented out. If only a portion of an asset is transaction. Do not report a transaction between you, your spouse, that resulted in a loss. Provide a brief description of any exchange SP Example: Mega Coporation Common Stock (partial sale) Asset of Transaction **PURCHASE** Type × SALE **EXCHANGE** Bi-weekly, if applicable (MO/DAY/YR) Quarterly, Monthly, or 10-12-07 Date Name NICYULTY MICHAEL \$1,001-\$15,000 W \$15,001-O \$50,000 \$50,001-Amount of Transaction \$100,000 \$100,001m \$250,000 \$250,001-\$500,000 П \$500,001-Ω \$1,000,000 \$1,000,001-\$5,000,000 I Page S of C \$5,000,001-\$25,000,000 \$25,000,001 \$50,000,000 ے Over ㅈ \$50,000,000

This page may be copied if more space is required.

SCHEDULE V— LIABILITIES

Name of colory, dicorare

Page 6 of C

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 balance at the close of the preceding calendar year exceeded \$10,000.

	_	_	-	<u> </u>	ĺ	
SP, DC, JT						:
	Example:					
Creditor	First Bank of Wilmington, Delaware					
Type of Liability	Mortgage on 123 Main St., Dover, Del.					
\$1,001- w			and the second			_
\$15,001- \$50,000						
\$50,001- \$100,000					<i>j</i>	
\$100,001- \$250,000 m	×	L				
\$250,001- \$500,000 TI						
\$250,000 m \$250,000 m \$250,001 m \$500,000 G \$1,000,000 G \$1,000,001 m						
\$5,000,000						
\$5,000,001- \$25,000,000		1				
\$25,000,001 \$50,000,000	ļ	-				
Over \$50,000,000						

SCHEDULE VI— GIFTS

Report the source, a brief description, and the value of all gifts totalling more than \$305 received by you, your spouse, or a dependent child from any source during the year.

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 \$122 or less need not be added towards the \$305 disclosure threshold.

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)	\$325
		į

Name
الرديماس
17, 2
*COLAEL

Page \neq of

SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

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 Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$305 received by

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 or were paid by you and reimbursed by the sponsor.

Source	Date(s)	City of Departure—Destination— City of Return	Lodging? (Y/N	Food? (Y/N	was a ramiy Member included? (Y/N)	Number of days <u>not</u> at sponsor's expense
Chicago Chamber of Commerce	Mar. 2	DC—Chicago—DC	Z	z	z	None
Roycroft Corporation	Aug. 6–11	DC—Los Angeles—Cleveland	Y	Y	\ \	2 Days
12814 (0) 341)	[-E3_12	ALBANY-NEWARK-DC	Z	Y	Z	Ø
			:			
				-		
,						

SCHEDULE VIII—POSITIONS

Name MCNULTY, MICHAEL

Page O of C

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,

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities; and positions solely of an honorary nature.

			Position
			Name of Organization

SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. 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