

UNITED STATES SENATE FINANCIAL DISCLOSURE REPORT FOR ANNUAL AND TERMINATION FILERS

☐ Amendment

Last Name	First Name and Middle Initial	Annual Report Calendar Year Covered by Report	Senate Office / Agency in Which Employed
ENZI	MICHAEL B.	2012	U.S. SENATOR MICHAEL B. ENZI
Senate Office Address (Number, Street, City, State, and ZIP Code)	Senate Office Telephone Number (Include Area Code)	Termination Report Termination Date (mm/dd/yy)	Prior Office / Agency in Which Employed
SR-379, WASHINGTON, DC 20510	(202) 224-3424		

AFTER READING THE INSTRUCTIONS – ANSWER EACH OF THESE QUESTIONS AND ATTACH THE RELEVANT PART

	YES	NO		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 PART I.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Did you, your spouse, or dependent child receive any reportable travel or reimbursements for travel in the reporting period (i.e., worth more than \$350 from one source)? If Yes, complete and attach PART VI.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Did you or your spouse have earned income (e.g., salaries or fees) or non-investment income of more than \$200 from any reportable source in the reporting period? If Yes, complete and attach PART II.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Did you, your spouse, or dependent child have any reportable liability (more than \$10,000) during the reporting period? If Yes, complete and attach PART VII.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Did you, your spouse, or dependent child hold any reportable asset worth more than \$1,000 at the end of the period, or receive unearned or investment income of more than \$200 in the reporting period? If Yes, complete & attach PART IIIA and/or IIIB.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Did you hold any reportable positions on or before the date of filing in the current calendar year? If Yes, complete and attach PART VIII.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than \$1,000 in the reporting period? If Yes, complete and attach PART IV.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Do you have any reportable agreement or arrangement with an outside entity? If Yes, complete and attach PART IX.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Did you, your spouse, or 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 PART V.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	If this is your FIRST Report : Did you receive compensation of more than \$5,000 from a single source in the <u>two</u> prior years? If Yes, complete and attach PART X.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Each question must be answered and the appropriate PART attached for each "YES" response.

	FOR OFFICIAL USE ONLY Do Not Write Below this Line <div style="transform: rotate(-90deg); transform-origin: center;"> RECEIVED CLERK OF THE SENATE MAY 15 PM 2:09 </div>
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Reporting Individual's Name

☐ Amendment

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PART II. EARNED AND NON-INVESTMENT INCOME

Page Number

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Report the source (name and address), type, and amount of earned income to you from any source aggregating \$200 or more during the reporting period. For your spouse, report the source (name and address) and type of earned income which aggregate \$1,000 or more during the reporting period. No amount needs to be specified for your spouse. (See p.3, CONTENTS OF REPORTS Part B of Instructions.) Do not report income from employment by the U.S. Government for you or your spouse.

Individuals not covered by the Honoraria Ban:

For you and /or your spouse, report honoraria income received which aggregates \$200 or more by exact amount, give the date of, and describe the activity (speech, appearance or article) generating such honoraria payment. Do not include payments in lieu of honoraria reported on Part I.

Name of Income Source		Address (City, State)	Type of Income	Amount
Example:	JP Computers	Wash., DC	Salary	\$15,000
	MCI (Spouse)	Arlington, VA	Salary	Over \$1,000
1	PIN WYO (SPOUSE)	CHEYENNE, WY	SALARY	OVER \$1,000
2				
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13				

Reporting Individual's Name

☐ Amendment**PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES**

Page Number

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BLOCK A**Identity of Publicly Traded Assets
And Unearned Income Sources**

Report the complete name of each publicly traded asset held by you, your spouse, or your dependent child, (See p.3, *CONTENTS OF REPORTS Part B of Instructions*) for production of income or investment which:

- (1) had a value exceeding \$1,000 at the close of the reporting period; and/or
(2) generated over \$200 in "unearned" income during the reporting period.

Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.

BLOCK B**Valuation of Assets**

At the close of reporting period.
If None, or less than \$1,001,
Check the first column.

BLOCK C**Type and Amount of Income**

			BLOCK B Valuation of Assets										BLOCK C Type and Amount of Income																						
			At the close of reporting period. If None, or less than \$1,001, Check the first column.										Type of Income							Amount of Income															
			None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	None (or less than \$201)	\$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	Over \$1,000,000***	\$1,000,001 - \$5,000,000	Over \$5,000,000	Actual Amount Required if "Other" Specified
Example: S, IBM Corp. (stock)						X									X							Example		X									Example		
Example: DC, or J (S) Keystone Fund							X												X			Example	X										Example		
1	J	1) U.S. SENATE FEDERAL CREDIT UNION			X												X						X												
2		2) FIRST INTERSTATE BANK FIXED RATE IRA CD			X												X						X												
3	S	3) CHARLES SCHWAB IRA *		X													X						X												
4		* THERE ARE NO UNDERLYING ASSETS VALUED OVER \$1,000 AND/OR EARNED OVER \$200																																	
5	J	4) EDWARD JONES , ADMINISTRATOR: D. DEWALD																																	
6		4A) ST PAUL MN INDPT SCH DIST NO. 2/1/2013, 4.500% FULL CALL 2/01/2012	X																			FULL CALL											\$10,000		
7		4B) MICHIGAN ST HSG DEV AUTH LTD 4/15/2018, 8.000%		X													X							X											
8		4C) SOUTHERN MINN MUN PWR AGY PWR 1/1/2023, 0.000%		X													X						X												
9		4D) PORT SEATTLE WASHINGTON REV 4/1/2024, 5.100% FULL CALL 3/14/2012	X																			FULL CALL											\$5,000		
10		4E) OHIO UNIV GENERAL RECEIPTS 12/1/2027, 4.500%		X													X						X												

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.

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Reporting Individual's Name

☐ Amendment**PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES**

Page Number

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BLOCK A Identity of Publicly Traded Assets And Unearned Income Sources		BLOCK B Valuation of Assets At the close of reporting period. If None, or less than \$1,001, Check the first column.	BLOCK C Type and Amount of Income																															
			Type of Income								Amount of Income																							
			None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	None (or less than \$201)	\$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	Over \$1,000,000***	\$1,000,001 - \$5,000,000	Over \$5,000,000
Example:	S, DC, or J	IBM Corp. (stock)			X										X							Example		X										Example
		(S) Keystone Fund				X													X			Example	X										Example	
1		4F) CHICAGO ILLINOIS MIDWAY 1/1/2028, 5.000%		X																X				X										
2		4G) MISSOURI ST ENVIRONMENTAL IMPT, 11/1/2028, 5.000% FULL CALL 7/2/2012	X																			FULL CALL											\$10,000	
3		4H) INDIANAPOLIS IND LOC PUBLIC 1/1/2031, 4.750%		X																X				X										
4		4I) ID STATE WTR RES BRD REV RFD 9/1/2031, 5.000%		X																X				X										
5		4J) NEW YORK ST ENVIRON FACS CORP 3/1/2034, 5.150%		X																X				X										
6		4K) ID STATE WTR RES BRD REV RFD 5/1/2035, 4.550%		X																X				X										
7		4L) INDIANA FIN AUTH ENVIRONMENTAL 7/1/2035, 4.500%		X																X				X										
8		4M) OMAHA PUBLIC POWER DIST NEB 2/1/2014, 4.500%		X																X				X										
9		4N) TEXAS STATE DEPT HSG & CMNTY 9/1/2028, 4.950%			X															X				X										
10		4O) WY COMMUNITY DEV AUTH HSG REV SER 3 12/1/2037, 4.750%			X															X				X										

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Reporting Individual's Name

☐ Amendment**PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES**

Page Number

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BLOCK A**Identity of Publicly Traded Assets
And Unearned Income Sources**

Report the complete name of each publicly traded asset held by you, your spouse, or your dependent child, (See p.3, *CONTENTS OF REPORTS Part B of Instructions*) for production of income or investment which:

- (1) had a value exceeding \$1,000 at the close of the reporting period; and/or
(2) generated over \$200 in "unearned" income during the reporting period.

Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.

BLOCK B**Valuation of Assets**

At the close of reporting period.
If None, or less than \$1,001,
Check the first column.

BLOCK C**Type and Amount of Income**

		BLOCK B Valuation of Assets										BLOCK C Type and Amount of Income																						
		At the close of reporting period. If None, or less than \$1,001, Check the first column.										Type of Income							Amount of Income															
		None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	None (or less than \$201)	\$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	Over \$1,000,000***	\$1,000,001 - \$5,000,000	Over \$5,000,000	Actual Amount Required if "Other" Specified
Example:	S, DC, or J				X										X							Example	X										Example	
	(S) Keystone Fund				X													X				Example	X										Example	
1	4P) WY COMMUNITY DEV AUTH HSG 12/1/2028, 4.700%			X													X							X										
2	4Q) CONSOLIDATED WY MUNS ELEC REV 6/1/2035, 6.654%		X														X							X										
3	4R) CARBON CNTY WY SCH DIST #1 6/15/2026, 3.100%		X														X							X										
4	4S) LARAMIE COUNTY WYOMING HOSPITAL 5/1/2042, 4.375%			X													X							X										
5	4T) GENERAL MOTORS ACCEPTANCE CORP 10/15/2017, 7.200%		X														X							X										
6	4U) PIMCO INVESTMENT GRADE			X														X						X										
7	4V) CASH					X											X						X											
8	5) PERSHING IRA, ADMININSTRATOR: D. SECHRIST UNDERLYING ASSETS ARE AS FOLLOWS:																																	
9	5A) CASH		X														X						X											
10	5B) BLACKROCK DEBT STRATEGIES		X															X					X											

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BLOCK C**Type and Amount of Income**

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		At the close of reporting period. If None, or less than \$1,001, Check the first column.										Type of Income							Amount of Income															
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S, IBM Corp. (stock)					X										X							Example		X									Example	
or J (S) Keystone Fund						X													X			Example	X										Example	
1	5C) BRANDYWINE ADVISORS FUND		X																X				X											
2	5D) FRANKLIN GROWTH FUND CLASS A	X																	X				X											
3	5E) FRANKLIN CONVERTIBLES SECS FUND CLASS A		X																X				X											
4	5F) FRANKLIN SMALL CAP GROWTH FUND CLASS A		X																X				X											
5	5G) FRANKLIN DYNATECH FUND CLASS A		X																X				X											
6	5G) FRANKLIN TEMPLETON CHINA WORLD FUND		X																X				X											
7	5I) DWS CAPITAL GROWTH FUND CLASS A		X																X				X											
8	5J) DWS CORE EQUITY FUND CLASS A		X																X				X											
9	5K) DWS HIGH INCOME FUND CLASS A		X																X					X										
10	5L) DWS WORLD DIVIDEND FUND CLASS A		X																X				X											

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.

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Reporting Individual's Name

☐ Amendment**PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES**

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BLOCK A**Identity of Publicly Traded Assets
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BLOCK B**Valuation of Assets**

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If None, or less than \$1,001,
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BLOCK C**Type and Amount of Income**

		BLOCK B Valuation of Assets										BLOCK C Type and Amount of Income																						
		At the close of reporting period. If None, or less than \$1,001, Check the first column.										Type of Income							Amount of Income															
		None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	Over \$25,000,001 - \$50,000,000	Over \$50,000,000	None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	None (or less than \$201)	\$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	Over \$1,000,000***	\$1,000,001 - \$5,000,000	Over \$5,000,000	Actual Amount Required if "Other" Specified
S, IBM Corp. (stock)				X										X							Example		X									Example		
Example: DC, or J (S) Keystone Fund					X													X			Example	X										Example		
1	5M) KEYCORP (STOCK)		X											X									X											
2	5N) NUVEEN DIVERSIFIED DIVID & INCOME FD		X															X					X											
3	5O) NUVEEN PFD INCOME OPPORTUNITIES FD (FORMALLY NAMED: NUVEEN MULTI STRATEGY INCOME & GROWTH)		X															X						X										
4	5P) MUTUAL QUEST FUND CLASS A			X														X						X										
5	5Q) POWERSHARES QQQ TR UNIT SER 1		X															X					X											
6	5R) TEMPLETON BRIC FUND CLASS A		X															X					X											
7	5S) TEMPLETON WORLD FUND CLASS A			X														X						X										
8	J 6) MUTUAL FUNDS, ADMIN.: D. SECHRIST UNDERLYING ASSETS ARE AS FOLLOWS:																																	
9	6A) CASH				X												X						X											
10	6B) AMERICAN CENTURY ULTRA FUND		X															X					X											

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BLOCK C**Type and Amount of Income****Type of Income****Amount of Income**

		BLOCK B Valuation of Assets										BLOCK C Type and Amount of Income																					
		None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	None (or less than \$201)	\$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	Over \$1,000,000***	\$1,000,001 - \$5,000,000	Over \$5,000,000
S, Example: DC, or J															X							Example		X									Example
(S) IBM Corp. (stock)					X																	Example		X									Example
(S) Keystone Fund						X													X			Example	X										Example
1	6C) DODGE & COX INCOME FUND		X																X				X										
2	6D) EUROPACIFIC GROWTH FUND CLASS A		X																X				X										
3	6E) FIDELITY CONTRA FUND			X															X					X									
4	6F) FIRST TR STRATEGIC HIGH INCOME FD 11		X																X					X									
5	6G) FORWARD COREPLUS FUND INSTITUTIONAL	X																	X				X										
6	6H) FORWARD EXTENDED MARKETPLUS FUND		X																X				X										
7	6I) FORWARD INTERNATIONAL	X																	X				X										
8	6J) FRANKLIN SMALL-MID CAP GROWTH FUND		X																X					X									
9	6K) HARBOR INTERNATIONAL FUND		X																X					X									
10	6L) MANAGER SPECIAL EQUITY		X																X				X										

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Check the first column.

BLOCK C**Type and Amount of Income****Type of Income****Amount of Income**

your dependent child, (See p.3, CONTENTS OF REPORTS Part B of Instructions) for production of income or investment which: (1) had a value exceeding \$1,000 at the close of the reporting period; and/or (2) generated over \$200 in "unearned" income during the reporting period. Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
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EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.

*** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

☐

Reporting Individual's Name

☐ Amendment

ENZI

PART IV. TRANSACTIONS

Page Number

9

Report any purchase, sale, or exchange by you, your spouse, or dependent child (See p.3 CONTENTS OF REPORTS Part B of Instructions) during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Do not report a transaction involving property used solely as your personal residence, or a transaction between you, your spouse, or dependent child. Please clarify which two properties are involved in any reportable exchange.

Identification of Assets

Example: S,
DC,
or J

IBM Corp. (stock) NYSE

(DC) Microsoft (stock) NASDAQ/OTC

Report any purchase, sale, or exchange by you, your spouse, or dependent child (See p.3 CONTENTS OF REPORTS Part B of Instructions) during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Do not report a transaction involving property used solely as your personal residence, or a transaction between you, your spouse, or dependent child. Please clarify which two properties are involved in any reportable exchange.			Transaction Type (x)			Transaction Date (Mo., Day, Yr.)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000
			Purchase	Sale	Exchange												
Identification of Assets																	
Example:	S, DC, or J	IBM Corp. (stock) NYSE	X			2 / 1 / 1X		X			E	X	A	M	P	L	E
		(DC) Microsoft (stock) NASDAQ/OTC		X		1 / 27 / 1X				X	E	X	A	M	P	L	E
1	J	ILLINOIS DEV FIN AUTH WTR FACS		X		12/17/2012	X										
2	J	MONTGOMERY CNTY PENNSYLVANIA +		X		12/17/2012	X										
3	J	CARBON CNTY WY SCH DIST #1	X			06/14/2012	X										
4	J	LARAMIE COUNTY WYOMING HOSP	X			02/09/2012		X									
5		DWS BLUE CHIP FUND CLASS A +			X	02/24/2012	X										
6		DWS CORE EQUITY FUND CLASS A			X	02/24/2012	X										
7	J	FORWARD COREPLUS FUND INSTITUTIONAL +		X		12/14/2012	X										
8	J	FORWARD INTERNATIONAL		X		04/27/2012	X										
9																	
10																	
11																	
12																	

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.

*** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

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