

LEGISLATOR'S FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2012

NOTE: Before completing this Disclosure Statement, please carefully read the enclosed instructions. If additional space is needed, please duplicate this form as necessary and staple all pages together. An original signature is required on page 4; a facsimile, photocopy or stamp signature is not acceptable. Questions should be directed to Legislative Counsel at (609) 847-3901. The completed disclosure form is due May 15, 2013 and should be sent to: Joint Legislative Committee on Ethical Standards, 2nd Floor, State House Annex, Room 210, PO Box 068, Trenton, New Jersey 08625-0068.

Louis D. Greenwood
PRINT NAME

CHECK APPROPRIATE HOUSE: Senate General Assembly

Provide the following information for yourself, your spouse and minor children (unless otherwise indicated) for calendar year 2012. Please note that a minor child is a child under the age of 18. For each entry, mark the box of the appropriate recipient. When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000 - \$24,999.99; 3=\$25,000 - \$49,999.99; 4=\$50,000 or more.

I. EARNED INCOME: List the name, address and amount for each source of earned income. (Earned income includes salaries, bonuses, royalties, commissions, profit sharing and fees.)

	Name of Employer	Address of Employer	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	<u>Carlisle + Assoc.</u>	<u>1103 Laurel Oak Rd Ste 160 Voorhees</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	<u>Speziali Greenwood + Hawkins</u>	<u>1081 Winslow Rd Williamstown NJ</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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 LEGISLATIVE COUNSEL
 ETHICAL STANDARDS
 SERVICES

II. UNEARNED INCOME: List the name, address and amount for each source of unearned income. (Unearned income includes rents, dividends and income from investments, trusts and estates.)

A. RENTS

	Property Address	Tenant Name	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	<u>Unit 307 101 W. Spruce Ave. W. Wildwood, NJ</u>	<u>Rental Prop / oceanside realty</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000-\$24,999.99; 3=\$25,000-\$49,999.99; 4=\$50,000 or more.

B. DIVIDENDS

	Name	Address	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	See Attachment		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. INCOME from investments, trusts and estates (including capital gains).

	Name	Address	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	See Attachment		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

III. HONORARIA and FEES: List the name, address, nature and amount for each source of honorarium or fee received by you or your spouse for personal appearances, speeches or writings.

	Name & Nature of Honorarium or Fee	Address	Amount Code				Self	Spouse
			1	2	3	4		
1)	N/A		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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 SECURITIES
 DEPARTMENT

IV. REIMBURSEMENTS or PREPAID EXPENSES for TRAVEL, LODGING or SUBSISTENCE: List the name, address, nature and amount for each source of reimbursement or prepaid expense and indicate whether source is a profit (P), nonprofit (N), or governmental (G) entity.

	Name & Nature of Reimbursement or Prepaid Expense	Address	Amount Code				Self	Spouse	Child	Check Source			
			1	2	3	4				P	N	G	
1)	EFO Louis D. Greenwald work related	2240-15Rt 70 Cherry Hill NJ 08002	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	Carlisle + Assoc. work related	1103 Laurel Oak Rd Ste 120 Voorhees NJ 08043	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	Atlantic City Electric REIMBURSED	5100 Haddonway Mays Landing NJ 08330	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)	Chemistry Council REIMBURSED	150 W State Street Trenton NJ 08608	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

See Attachment

When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000-\$24,999.99; 3=\$25,000-\$49,999.99; 4=\$50,000 or more.

V. GIFTS: List the name, address, nature and amount for each source of gift to you, your spouse or minor child from a named donor connected to the legislative process.

	Name & Nature of Gift	Address	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	NIA		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

VI. LIABILITIES: List the name and address of each creditor for you or your spouse and the nature and amount of each liability except for liabilities which are: (a) less than \$15,000 and owed to a relative; (b) less than \$3,000 and owed to any other person; (c) loans secured by a personal motor vehicle or household furniture or appliances; or (d) revolving charge accounts.

	Name & Nature of Liability	Address	Amount Code				Self	Spouse
			1	2	3	4		
1)	GMAC Mortgage Marital Home	2 Shelburne Ct. Voorhees NJ 08043	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2)	Audubon Savings Loan	Unit 307 101 Spruce Ave Wildwood NJ	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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 STATE OF NEW JERSEY
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VII. FORGIVEN LIABILITIES: List the name and address of each former creditor for you or your spouse and the nature and amount of each forgiven liability which would have been required to be reported pursuant to VI above had it not been forgiven.

	Name & Nature of Forgiven Liability	Address	Amount Code				Self	Spouse
			1	2	3	4		
1)	NIA		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

VIII. BUSINESS ORGANIZATIONS: List the name and address of all business organizations in which you or your spouse held an interest.

	Name	Address	Self	Spouse
1)	The Pointe Commons LLC	9 Old Stevens Lane Voorhees NJ 08043	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)	DCI, LLC	1103 Laurel Oak Rd Stillers Voorhees, NJ 08043	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>

IX. OFFICES, TRUSTEESHIPS, OR DIRECTORSHIPS: List the title of each position held by you or your spouse in any firm, corporation, association, partnership or business and the name and address of the entity in which the position was held.

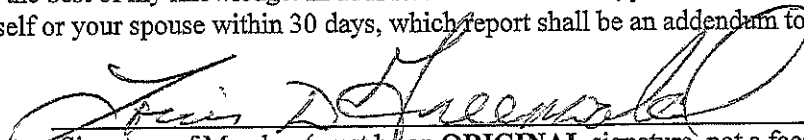
	Position Held	Name & Address of Entity	Self	Spouse
1)	N/A		<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>

X. REAL ESTATE: Provide the address and a brief description for all real property in New Jersey in which you, your spouse, or minor child held an interest.

	Property Address	Description of Property	Self	Spouse	Child
1)	2 Shelbourne Ct. Voorhees NJ 08043	Marital home	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)	Unit 307 101 Spruce Ave N. Wildwood	Rented prop of Pointe Commons LLC	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I certify that the above information is correct and complete to the best of my knowledge. In addition to this statement, you have a continuing obligation to report any termination or assumption of public employment of yourself or your spouse within 30 days, which report shall be an addendum to this statement.

5/3/13
Date


Signature of Member (must be an ORIGINAL signature, not a facsimile, stamp or photocopy)

CALENDAR YEAR 2012
BENEFIT PASSING - ALPHABETICAL BY RECIPIENT

LEGISLATIVE
SERVICES
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DATE	RECIPIENT	BENEFIT TYPE	NAME AND ADDRESS OF PAYEE	PROVIDER	AMOUNT
8/21/2012	ANDREW SCHWABB, ASSEMBLYMAN SCHAER'S CHIEF OF STAFF	F	NOBO WINE AND GRILL, TEANECK, NJ	NJ HOSPITAL ASSN - AMENDMENT	28.56
12/7/2012	ASSEMBLYMAN DANIEL R. BENSON	F	EAST BRUNSWICK HILTON, EAST BRUNSWICK, NJ	NJ STATE AFL-CIO	35.00
9/13/2012	ASSEMBLYMAN ERIK PETERSON*	F	OLD YORK COUNTRY CLUB, CHESTERFIELD, NJ	CHEMISTRY COUNCIL OF NJ	57.39
8/21/2012	ASSEMBLYMAN GARY S. SCHAER (DISTRICT 36)	F	NOBO WINE AND GRILL, TEANECK, NJ	NJ HOSPITAL ASSN - AMENDMENT	28.56
12/12/2012	ASSEMBLYMAN HERB CONAWAY, JR.	F	CAFE GALLERY, BURLINGTON, NJ	NJ EDUCATION ASSN - AMENDMENT	53.22
12/7/2012	ASSEMBLYMAN JERRY GREEN	F	EAST BRUNSWICK HILTON, EAST BRUNSWICK, NJ	NJ STATE AFL-CIO	35.00
9/13/2012	ASSEMBLYMAN JOHN F. AMODEO*	F	OLD YORK COUNTRY CLUB, CHESTERFIELD, NJ	CHEMISTRY COUNCIL OF NJ	57.39
4/19/2012	ASSEMBLYMAN JOHN J. BURZICHELLI*	F	OLD YORK COUNTRY CLUB, CHESTERFIELD, NJ	CHEMISTRY COUNCIL OF NJ	47.28
12/7/2012	ASSEMBLYMAN JOHN S. WISNIEWSKI	F	EAST BRUNSWICK HILTON, EAST BRUNSWICK, NJ	NJ STATE AFL-CIO	35.00
9/13/2012	ASSEMBLYMAN JON M. BRAMNICK*	F	OLD YORK COUNTRY CLUB, CHESTERFIELD, NJ	CHEMISTRY COUNCIL OF NJ	57.39
5/1/2012	ASSEMBLYMAN LOUIS D. GREENWALD*	F	THE CHOP HOUSE, GIBBSBORO, NJ	ATLANTIC CITY ELECTRIC	79.73
3/28/2012	ASSEMBLYMAN LOUIS D. GREENWALD*	F	OLD YORK COUNTRY CLUB, CHESTERFIELD, NJ	CHEMISTRY COUNCIL OF NJ	43.19
12/7/2012	ASSEMBLYMAN PATRICK J. DIEGNAN, JR.	F	EAST BRUNSWICK HILTON, EAST BRUNSWICK, NJ	NJ STATE AFL-CIO	35.00
3/17/2012	ASSEMBLYMAN PETER J. BARNES III	F	HOTOKE, NEW BRUNSWICK, NJ	NOVARTIS PHARMACEUTICALS CORP - AMENDMENT	43.75
9/13/2012	ASSEMBLYMAN RONALD S. DANCER*	F	OLD YORK COUNTRY CLUB, CHESTERFIELD, NJ	CHEMISTRY COUNCIL OF NJ	57.39
12/7/2012	ASSEMBLYMAN WAYNE P. DEANGELO	F	EAST BRUNSWICK HILTON, EAST BRUNSWICK, NJ	NJ STATE AFL-CIO	35.00
4/19/2012	ASSEMBLYWOMAN SHEILA Y. OLIVER*	F	OLD YORK COUNTRY CLUB, CHESTERFIELD, NJ	CHEMISTRY COUNCIL OF NJ	47.28
5/10/2012	BRIAN ALPERT, RESEARCH DIRECTOR - SENATE MINORITY OFFICE*	F	OLD YORK COUNTRY CLUB, CHESTERFIELD, NJ	CHEMISTRY COUNCIL OF NJ	34.65

*Benefit was reimbursed by recipient.

E = Entertainment F = Food and Beverage G = Gifts H = Honoraria T = Travel L = Lodging O = Other

This summary data reflects the information as reported on the Annual Lobbying reports covering calendar year 2012, received as of 5:00 p.m. on March 1, 2013.

Louis D. Greenwald
 Legislator's Financial Disclosure Statement
 For Calendar Year 2012

Interest

INVESTMENT COMPANY	ADDRESS	FUND NAME	SYMBOL	SELF	SPOUSE	JOINT	CHILD	INCOME
Principal Financial Group	711 High Street	Variable Annuity		X				1
	Des moines, IA 50392	Variable Annuity		X				1
	(800) 986-3343							

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 STATE OF IOWA
 OFFICE OF THE CLERK OF THE SUPREME COURT

Louis D. Greenwald
 Legislator's Financial Disclosure Statement
 For Calendar Year 2012

OFFICE
 LEGISLATIVE
 SERVICES

2013 MAY -6 A 10:10

Dividends

INVESTMENT COMPANY	ADDRESS	FUND NAME	SYMBOL	SELF	SPOUSE	JOINT	CHILD	INCOME
Wells Fargo, Inc.	Customer Service F4008-080 800 Walnut Des Moines, IA 50309 USA	Wells Fgo Avtg Emerg Markets Eqty A	EMGAX	X		X		1
Heartland Funds	c/o ALPS Fund Services 1290 Broadway, Ste 1100 Denver, CO 80201 (800) 432-7856	Heartland Value Plus FD	HRVIX	X				1
First Eagle Funds	1345 Avenue of the Americas New York, NY 10105 (800) 747-2008	First Eagle Overseas Fund A First Eagle US Value A	SGOVX FEVAX	X		X X		1 1
Fidelity	100 Crosby Parkway Covington, KY 41015 (800) 343-3548	Floating Rate High Income New Markets Income fund OTC Portfolio FD	FFRHX FNMIX FOCPX	X X		X X X		1 1 1
T. Rowe Price	100 East Pratt Street Baltimore, MD 21202 (800) 638-5660	Inflation Protect Bond New Income FD	PRIPX PRCIX	X X		X X		1 1
Virtus Investment Partners	100 Pearl Street 9th Floor Hartford, CT 06103 (800) 243-1574	Multi-Sector Short Term Bond Virtus Tax Exempt Bond A	NARAX HXBZX	X			X	1 1
MFS	C/O Boston Financial Data Se 30 Dan Road (800) 225-2606 Canton, MA 02021	MFS Value Fund-A	MEIAX	X		X		1

Louis D. Greenwald
 Legislator's Financial Disclosure Statement
 For Calendar Year 2012

WILLIAM W.
 LEGISLATIVE
 SERVICES

Capital Gains

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INVESTMENT COMPANY	ADDRESS	FUND NAME	SYMBOL	SELF	SPOUSE	JOINT	CHILD	INCOME
Heartland Funds	789 N. Water Street Ste 500 Milwaukee, WI 53202 (414)347-777	Heartland Value Plus	HRVIX	X				1
Thornburg	2300 North Ridgetop Rd. Santa Fe, NM 87506 (800) 847-0220	Thornburg LTD Term Income	THIFX			X		1
Merger Fund	100 Summit Lake Drive Valhalla, NY 10595 (914)741-5600	The Merger Fund	MERFX	X				1
Dreyfus	4400 N. Federal Highway Suite #156 Boca Raton, FL 33431 (800)373-9387	Dreyfus Intl Bond A	DIBAX			X		1
Delaware Investments	2005 Market Street Philadelphia, PA 19103 (215) 255-1200	Delaware Diversified Income A	DPDFX			X		1
Fidelity Funds	100 Crosby Parkway Covington, KY 41015 (800) 343-3548	Fidelity New Markets Income Fund	FNMIX	X		X		1
		Fidelity Floating Rate High Income	FFRHX	X		X		1
First Eagle Funds	1345 Avenue of the Americas New York, NY 10105 (800) 747-2008	First Eagle Overseas Fund A	SGOVX	X		X		2
		First Eagle US Value A	FEVAX			X		1

Louis D. Greenwald
 Legislator's Financial Disclosure Statement
 For Calendar Year 2012

OFFICE OF THE
 LEGISLATIVE
 SERVICES

Capital Gains

2013 MAY -6 A 10:10

INVESTMENT COMPANY	ADDRESS	FUND NAME	SYMBOL	SELF	SPOUSE	JOINT	CHILD	INCOME
DB Commodity Services	60 Wall Street	Powershs DB Multi Sect Comm	DBB	X				1
Deutsche Bank	New York, NY 10005	DB Base Metals						
	212-250-8779	Powershs DB Multi Sect Comm	DBA	X				1
		DB Base Agricul						
World Gold Trust Services, LLC	424 Madison Avenue 3rd Floor New York, NY 10017 (212) 317-3800	Gold	GLD	X		X		2
Guggenheim Investments	9601 Blackwell Rd. Ste 500 Rockville, MD 20850 (800) 820-0888	Rydex Inv Govt Lg Bd Stgy A	RYAQX	X				1
Franklin Templeton Funds	100 Fountain Parway St. Petersburg, FL 33716-1205 (800) 632-2301	Templeton Global Bond Fund A	TPINX	X				1
		Templeton Foreign Fund A	TEMFY	X		X		2
		Franklin Small Cap Growth Fd Cl A	FSGRX	X		X		1
American Realty Capital	405 Park Avenue, 15th Floor New York, NY 10022 info@aricap.com (877)373-2522	American Realty Capital Trust, Inc	ARCT	X				3
Credit Suisse Funds	P.O. Box 55030 Boston, MA 02205-5030 (800) 577-2321	Credit Suisse Commdty Retrn Str Com	CRSOX	X		X		2
JPMorgan	270 Park Ave, New York, NY 10017 (212) 270-6000	JPMorgan Research Market Neut Ir	JPMNX	X		X		2

Louis D. Greenwald
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 For Calendar Year 2012

STATE OF MASSACHUSETTS
 LEGISLATIVE SERVICES

Capital Gains

2013 MAY -6 A 10:10

INVESTMENT COMPANY	ADDRESS	FUND NAME	SYMBOL	SELF	SPOUSE	JOINT	CHILD	INCOME
Columbia Management	c/o BFDS	Columbia Mid Cap Growth Fund Z	CLSPX	X		X		1
Investment Services, Corp	30 Dan Road Canton, MA 02021-2809							
T. Rowe Price	100 East Pratt St. Baltimore, MD 21202 (800) 638-5660	Inflation Protect Bond New Income FD	PRIPX PRCIX	X X		X X		2 4
Virtus Investment Partners	100 Pearl Street 9th Floor Hartford, CT 06103 (800) 243-1574	Multi-Sector Short Term Bond Virtus Tax Exempt Bond A	NARAX HXBZX	X			X	2 1
MFS	C/O Boston Financial Data Serv 30 Dan Road Canton, MA 02021 (800) 225-2606	MFS Value Fund-A	MEIAX	X		X		3
Invesco Investment Services Inc.	C/O DST Systems, Inc 430 W. 7th Street Kansas City, MO 64105 800-959-4246	Invesco Small Cap Value Fd Class Select Companies A	VSMIX ATIAX	X		X X		2 1
Oppenheimer Funds	12100 E. ILIFF Avenue, Ste 300 Aurora, CO 80014 (888) 470-0862	Oppenheimer Developing Markets Fund Class Y	ODVYX	X		X		1
Putnam	PO Box 8383 Boston MA, 02266-8383 (800) 225-1581	Putnam International Capital Opp Y	PIVYX	X		X		2

