UNITED STATES HOUSE OF REPRESENTATIVES

CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT

FORM A
For use by Members, officers, and employees

HAND DELIVERED

LEGISLATIVE RESOURCE CENTER
2009 MAY 15 AM 11:00
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

MC

Bob Inglis
(Full Name)

864.517.2898
(Daytime Telephone)

Filer Status: [x] Member of the U.S. House of Representative — State: SC — District: 4
[ ] Officer Or Employee — Employing Office:

Report Type: [x] Annual (May 15) [ ] Amendment [ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

		Yes	No
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.**	✓	
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? **If yes, complete and attach Schedule II.**		✓
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.**	✓	
IV.	Did you, your spouse, or 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.**	✓	
V.	Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	✓	
VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $335 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**		✓
VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $335 from one source)? **If yes, complete and attach Schedule VII.**		✓
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.**	✓	
IX.	Did you have any reportable agreement or arrangement with an outside entity? ***If yes, complete and attach Schedule IX.***		✓

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

		Yes	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?		✓
Exemptions--	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 Standards of Official Conduct.		✓

SCHEDULE I - EARNED INCOME

Name Bob Inglis

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
Inglis for Congress Committee. Inc.	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Bob Inglis

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 assets 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), 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. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent or sibling; any deposits totaling $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.	BLOCK B **Year-End 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 and is included only because it is generated income, the value should be "None."	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 the calendar year.	BLOCK D **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 earned or generated.	BLOCK E **Transaction** Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding $1,000 in reporting year.
IRA FIDELITY INVESTEMENTS COMPOSED OF THE FOLLOWING:	$15,001 - $50,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$1,001 - $2,500	
FIDELITY ADVISOR EQUITY GROWTH CLT	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$201 - $1,000	
FIDELITY ADVISOR EQUITY INCOME CL T	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$201 - $1,000	
FIDELITY ADVISOR INTERMED BOND CL T	$15,001 - $50,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$201 - $1,000	

	IRA WITH WELLS FARGO ADVISORS (FORMERLY WACHOVIA, FORMERLY AG EDWARDS) COMPSED OF THE FOLLOWING:	$15,001 - $50,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$201 - $1,000	
	ADVISORS INNER CIRCLE FD II INC NEW PERIMETER SMALL CAP GROWTH FD	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	P
	AMERIAN CENTURY QUANTITATIVE EQUITY FUND INCOME AND GROWTH	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	
	COLUMBIA FUNDS SER TR MARSICO FOCUSED EQUITIES	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	
	COLUMBIA MARISCO INTERATIONALL OPPORTUNITY	None	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	S
	DWS VALUE SERIES INC SMALL CAP VALUE FUND	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS/INTEREST/None	$1 - $200	
	DWS VALUE SERIES INC DREMAN HIGH RETURN EQUITY FUND	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	
	DAVIS NEW YORK VENTURE FUND INC	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS/INTEREST/None	$1 - $200	
	DREYFUS INTERNATIONAL FUNDS INC EMERGING MARKETS FUND	$1 - $1,000	CAPITAL GAINS/DIVIDENDS/INTEREST/None	$1 - $200	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Bob Inglis

	GOLDMAN SACHS TR FINL SQUARE MONEY MARKET FD	$1 - $1,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	P
	HARBOR FD INTERNATIONAL FD INV CL	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	
	HARBOR FUND MID CAPITAL GROWTH FUND	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	
	HARBOR FUND INTERNATIONAL GROWTH FD	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	P
	HARBOR FUND CAP APPRECIATION FD INV	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	
	HOTCHKISS & WILEY FDS MID CAP VALUE FD	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	
	Lord Abbett Mid Cap Value CL A	$1 - $1,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	P
	Lord Abbett Mid Cap Value CL A	None	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	S
	PUTNAM SMALL CAP GROWTH	$1 - $1,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$201 - $1,000	P
	PUTNAM SMALL CAP GROWTH	None	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	S
	T. ROWE PRICE BLUE CHIP GROWTH FUND INC	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Bob Inglis

T. ROW PRICE MID-CAP GROWTH FD	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	S(part)
T. ROWE PRICE INTERNATIONAL FDS EMERGING MARKETS STK FD	$1 - $1,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	S(part)
SECURITY EQUITY FUND MID CAP VALUE FUND	$1 - $1,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	P
TEMPLETON DEVEL MKTS I	$1 - $1,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	S(part)
TEMPLETON DEVEL MKTS I	None	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	S
WASHINGTON MUT INV FD	$1,001 - $15,000	CAPITAL GAINS/DIVIDENDS/INTEREST	$1 - $200	S(part)
Allick Wyllie Inglis, Jr. Qualified Personal ResidenceTrust and Helen McCullough Inglis Qualified Personal Residence Trust (1/5 interest in both)	$250,001 - $500,000	RENT	$2,501 - $5,000	

SCHEDULE IV - TRANSACTIONS

Name Bob Inglis

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	ADVISORS INNER CIRCLE FD II INC NEW PERIMETER SMALL CAP GROWTH FD	P	12-04-08	$1,001 - $15,000
	HARBOR FD INTERNATIONAL GROWTH FD	P	12-05-08	$1,001 - $15,000
	COLUMBIA MARISCO INTERATIONALL OPPORTUNITY	S	12-04-08	$1,001 - $15,000
	LORD ABBETT MID CAP VALUE CLA	P	01-22-08	Less than $1,000.00
	LORD ABBETT MID CAP VALUE CLA	S	12/04-08	Less than $1,000.00
	PUTNAM SMALL CAP GROWTH	P	01-22-08	Less than $1,000.00
	PUTNAM SMALL CAP GROWTH	S	12/04/08	$1,001 - $15,000
	DREYFUS INTERNATIONAL FUNDS INC EMERGING MARKETS FUND	P	12-05-08	Less than $1,000.00
	GOLDMAN SACHS TR FINL SQUARE MONEY MARKET FD	P	*11-24-08*	Less than $1,000.00
	SECURITY EQUITY FUND MID CAP VALUE FUND	P	12-05-08	Less than $1,000.00
	T. ROW PRICE MID-CAP GROWTH FD	S(part)	01-22-08	Less than $1,000.00

SCHEDULE IV - TRANSACTIONS

Name Bob Inglis

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SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	T. ROWE PRICE INTERNATIONAL FDS EMERGING MARKETS STK FD	S(part)	01-22-08	Less than $1,000.00
	TEMPLETON DEVEL MKTS I	S(part)	01-22-08	Less than $1,000.00
	TEMPLETON DEVEL MKTS I	S	12-04-08	Less than $1,000.00
	WASHINGTON MUT INV FD	S(part)	01-22-08	Less than $1,000.00

SCHEDULE V - LIABILITIES

Name Bob Inglis

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 all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; 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.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	Bank of Travelers Rest (South Carolina)	Home Equity Loan	$15,001 - $50,000

SCHEDULE VIII - POSITIONS

Name Bob Inglis

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Trustee	Allick Wyllie Inglis, Jr. Qualified Personal Residence Trust
Trustee	Helen McCullough Inglis Qualified Personal Residence Trust