

FINANCIAL DISCLOSURE REPORT
INITIAL FILINGReport Required by the Ethics
in Government Act of 1978
(5 U.S.C. app. §§ 101-111)

1. Person Reporting (last name, first, middle initial) Finkle, Diane	2. Court or Organization United States Bankruptcy Court, District of Rhode Island	3. Date of Report 10/04/2012
4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time) Judge- Full Time	5a. Report Type (check appropriate type) ☐ Nomination ☐ Date ☒ Initial ☐ Annual ☐ Final 5b. ☒ Amended Report	6. Reporting Period 01/10/2011 to 10/04/2012
7. Chambers or Office Address United States Bankruptcy Court, District of Rhode Island Federal Building, 380 Westminster Street, 6th Fl. Providence, RI 02903		
IMPORTANT NOTES: The instructions accompanying this form must be followed. Complete all parts, checking the NONE box for each part where you have no reportable information. Insert signature on last page.		

I. POSITIONS. (Reporting individual only; see pp. 9-13 of filing instructions.)
☐ NONE (No reportable positions.)

<u>POSITION</u>	<u>NAME OF ORGANIZATION/ENTITY</u>
1. Director, Officer, Employee and Shareholder	Winograd Shine Land & Finkle, P.C.
2. Director, Officer and Employee	Winograd, Shine, & Zacks, P.C.
3. Trustee	Winograd Shine Land & Finkle, P.C. 401 (K) Profit Sharing Plan, f/k/a Winograd, Shine & Zacks, P.C. 401 (K) Profit Sharing Plan
4. Legal Guardian, healthcare only, pro bono basis; 3 individual wards	Cornerstone Adult Services, Inc.
5. Secretary	Wescote Drive Association

II. AGREEMENTS. (Reporting individual only; see pp. 14-16 of filing instructions.)
☐ NONE (No reportable agreements.)

<u>DATE</u>	<u>PARTIES AND TERMS</u>
1. 2012	Winograd Shine Land & Finkle, P.C.; employee benefits: disability, health and long term care insurance and 401 (K) Profit Sharing Plan
2.	
3.	

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III. NON-INVESTMENT INCOME. *(Reporting individual and spouse; see pp. 17-24 of filing instructions.)***A. Filer's Non-Investment Income**☐ NONE *(No reportable non-investment income.)*

<u>DATE</u>	<u>SOURCE AND TYPE</u>	<u>INCOME</u> (yours, not spouse's)
1. 2010	Winograd Shine Land & Finkle, P.C.- salary	\$357,057.39
2. 2010	Winograd Shine Land & Finkle, P.C.-employee benefits	\$71,779.52
3. 2011	Winograd Shine Land & Finkle, P.C.- salary	\$208,535.74
4. 2011	Winograd Shine Land & Finkle, P.C.- employee benefits	\$60,758.00
5. 2012	Winograd Shine Land & Finkle, P.C.- salary (Estimated)	\$107,695.25
6. 2012	Winograd Shine Land & Finkle, P.C.- employee benefits (Estimated)	\$70,759.99
7.		
8.		
9.		
10.		

B. Spouse's Non-Investment Income - If you were married during any portion of the reporting year, complete this section.*(Dollar amount not required except for honoraria.)*☐ NONE *(No reportable non-investment income.)*

<u>DATE</u>	<u>SOURCE AND TYPE</u>
1. 2011	Ursillo, Teitz & Ritch, Ltd.-salary and employee benefits
2. 2012	Ursillo, Teitz & Ritch, Ltd.- salary and employee benefits
3.	
4.	

IV. REIMBURSEMENTS -- *transportation, lodging, food, entertainment.**(Includes those to spouse and dependent children; see pp. 25-27 of filing instructions.)*☐ NONE *(No reportable reimbursements.)*

<u>SOURCE</u>	<u>DATES</u>	<u>LOCATION</u>	<u>PURPOSE</u>	<u>ITEMS PAID OR PROVIDED</u>
1. Exempt				

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V. GIFTS. *(Includes those to spouse and dependent children; see pp. 28-31 of filing instructions.)*☐NONE *(No reportable gifts.)*

	<u>SOURCE</u>	<u>DESCRIPTION</u>	<u>VALUE</u>
1.	Exempt		
2.			
3.			
4.			
5.			

VI. LIABILITIES. *(Includes those of spouse and dependent children; see pp. 32-33 of filing instructions.)*☐NONE *(No reportable liabilities.)*

	<u>CREDITOR</u>	<u>DESCRIPTION</u>	<u>VALUE CODE</u>
1.	Coastway Community Bank	Commercial Real Estate Mortgage	L
2.			
3.			
4.			
5.			

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VII. INVESTMENTS and TRUSTS -- income, value, transactions (Includes those of spouse and dependent children; see pp. 34-60 of filing instructions.)

☐ NONE (No reportable income, assets, or transactions.)

A. Description of Assets (including trust assets) Place "(X)" after each asset exempt from prior disclosure	B. Income during reporting period		C. Gross value at end of reporting period		D. Transactions during reporting period				
	(1) Amount Code I (A-H)	(2) Type (e.g., div., rent, or int.)	(1) Value Code 2 (J-P)	(2) Value Method Code 3 (Q-W)	(1) Type (e.g., buy, sell, redemption)	(2) Date mm/dd/yy	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A-H)	(5) Identity of buyer/seller (if private transaction)

1. Winograd Shine Land & Finkle, P.C, Stock		None			Exempt				
2. Ursillo, Teitz & Ritch Realty IV, Appraisal, 12/08/2011	A	Dividend	L	Q					
3. First Eagle Gold Fund Class A, Mutual Fund		None	J	T					
4. Wells Fargo, Common Stock	A	Dividend	J	T					
5. MFS Municipal Income Fund-A	C	Interest	L	T					
6. Commonwealth Municipal Income Fund	C	Interest	M	T					
7. UBS Pace Select Fund (IRA), Mutal Fund	C	Int./Div.	L	T					
8. Sovereign/Santander Bank, Account	A	Interest			Exempt				
9. Bank Rhode Island, Account		None	J	T					
10. Hartford Select Dimensions Fund, (Annuity)		None	K	T					
11. Phoenix Big Edge Plus, Mutual Fund, (Annuity)		None	K	T					
12. Great West Maxim Moderately Conservative Profile II, 401(K)		None	P1	T					
13. Fidelity FA Freedom 2020 I, 401(K)/Profit Sharing Plan		None	O	T					
14. Pioneer Value Fund A		None	K	T					
15. Ursillo, Teitz, & Ritch, Ltd.		None	K	U					
16. American Express- Money Market Account	B	Interest	M	T					
17. UBS Pace Select Fund, Mutal Fund	C	Dividend	M	T					

1. Income Gain Codes: (See Columns B1 and D4)	A = \$1,000 or less F = \$50,001 - \$100,000	B = \$1,001 - \$2,500 G = \$100,001 - \$1,000,000	C = \$2,501 - \$5,000 H1 = \$1,000,001 - \$5,000,000	D = \$5,001 - \$15,000 H2 = More than \$5,000,000	E = \$15,001 - \$50,000
2. Value Codes (See Columns C1 and D3)	J = \$15,000 or less N = \$250,001 - \$500,000 P3 = \$25,000,001 - \$50,000,000	K = \$15,001 - \$50,000 O = \$500,001 - \$1,000,000	L = \$50,001 - \$100,000 P1 = \$1,000,001 - \$5,000,000 P4 = More than \$50,000,000	M = \$100,001 - \$250,000 P2 = \$5,000,001 - \$25,000,000	
3. Value Method Codes (See Column C2)	Q = Appraisal U = Book Value	R = Cost (Real Estate Only) V = Other	S = Assessment W = Estimated	T = Cash Market	

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☐ NONE (No reportable income, assets, or transactions.)

A. Description of Assets (including trust assets) Place "(X)" after each asset exempt from prior disclosure	B. Income during reporting period		C. Gross value at end of reporting period		D. Transactions during reporting period				
	(1) Amount Code 1 (A-H)	(2) Type (e.g., div., rent, or int.)	(1) Value Code 2 (J-P)	(2) Value Method Code 3 (Q-W)	(1) Type (e.g., buy, sell, redemption)	(2) Date mm/dd/yy	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A-H)	(5) Identity of buyer/seller (if private transaction)

18. UBS Pace Select Fund, Mutual Fund (IRA)	C	Interest	L	T					
19. UBS Pace Select Fund, Mutual Fund	C	Dividend	M	T					
20. Capital One Money Market Account	A	Interest	K	T					
21. Phoenix Big Edge Plus, Mutual Fund Annuity		None	K	T					
22. HSA Bank, Account	A	Interest	J	T					
23. Bank Rhode Island Account, (CD)	A	Interest			Exempt				

1. Income Gain Codes: (See Columns B1 and D4)	A = \$1,000 or less F = \$50,001 - \$100,000	B = \$1,001 - \$2,500 G = \$100,001 - \$1,000,000	C = \$2,501 - \$5,000 H1 = \$1,000,001 - \$5,000,000	D = \$5,001 - \$15,000 H2 = More than \$5,000,000	E = \$15,001 - \$50,000
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VIII. ADDITIONAL INFORMATION OR EXPLANATIONS. *(Indicate part of report.)*

Part I, page 1, Line 4- Position is as guradian for healthcare purposes only with no control over [REDACTED] personal finances or financial estate.

Amendement to Intial Report

Part 1, Line 5- Added position in unincorporated private association.

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IX. CERTIFICATION.

I certify that all information given above (including information pertaining to my spouse and minor or dependent children, if any) is accurate, true, and complete to the best of my knowledge and belief, and that any information not reported was withheld because it met applicable statutory provisions permitting non-disclosure.

I further certify that earned income from outside employment and honoraria and the acceptance of gifts which have been reported are in compliance with the provisions of 5 U.S.C. app. § 501 et. seq., 5 U.S.C. § 7353, and Judicial Conference regulations.

Signature: **s/ Diane Finkle**

NOTE: ANY INDIVIDUAL WHO KNOWINGLY AND WILLFULLY FALSIFIES OR FAILS TO FILE THIS REPORT MAY BE SUBJECT TO CIVIL AND CRIMINAL SANCTIONS (5 U.S.C. app. § 104)

Committee on Financial Disclosure
Administrative Office of the United States Courts
Suite 2-301
One Columbus Circle, N.E.
Washington, D.C. 20544