

AO 10
Rev. 1/2010

**FINANCIAL DISCLOSURE REPORT
FOR CALENDAR YEAR 2009**

*Report Required by the Ethics
in Government Act of 1978
(5 U.S.C. app. §§ 101-111)*

1. Person Reporting (last name, first, middle initial) STEEH, GEORGE C.	2. Court or Organization U.S. DISTRICT COURT EASTERN DISTRICT MICHIGAN	3. Date of Report 05/11/2010
4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time) U.S. DISTRICT JUDGE - ACTIVE	5a. Report Type (check appropriate type) ☐ Nomination, Date ☐ Initial ☒ Annual ☐ Final 5b. ☐ Amended Report	6. Reporting Period 01/01/2009 to 12/31/2009
7. Chambers or Office Address 231 W. LAFAYETTE #235 DETROIT, MI. 48226	8. On the basis of the information contained in this Report and any modifications pertaining thereto, it is, in my opinion, in compliance with applicable laws and regulations. Reviewing Officer _____ Date _____	
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. Sign 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. BOARD OF DIRECTORS	CHILD ADVOCACY CENTER - CARE HOUSE
2. BOARD OF DIRECTORS	MARCH OF DIMES - SOUTHEASTERN MICHIGAN CHAPTER
3. BOARD OF DIRECTORS	COMPREHENSIVE YOUTH SERVICES
4. BOARD OF DIRECTORS	MT. CLEMENS REGIONAL MEDICAL CENTER
5. EXECUTIVE BOARD MEMBER	FEDERAL BAR 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. 1990	COUNTY OF MACOMB EMPLOYEE RETIREMENT PLAN (NO CONTROL)
2. 1996	DEFERRED COMPENSATION PLAN 457-MACOMB COUNTY EMPLOYEES
3.	

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Steeh, George C.

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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. VARIOUS	STATE OF MICHIGAN EMPLOYEE RETIREMENT PLAN	\$19,277.00
2. VARIOUS	COUNTY OF GENESSEE	\$4,256.00
3. VARIOUS	MACOMB COUNTY FINANCE	\$4,371.00
4.		

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.	
2.	
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.	GEORGE MASON UNIVERSITY LAW & ECONOMICS CENTER	10/18/09-10/21/09	TUSCAN, ARIZONA	EVENT HELD	TRANSPORTATION, LODGING, AND MEALS
2.	NORTHWESTERN LAW JUDICIAL EDUCATION PROGRAM	4/21/09	CHICAGO, IL	EVENT HELD	TRANSPORTATION, LODGING, AND MEALS
3.	NORTHWESTERN LAW JUDICIAL EDUCATION PROGRAM	11/8/09-11/13/09	CHICAGO, IL	EVENT HELD	TRANSPORTATION, LODGING, AND MEALS
4.	NORTHWESTERN LAW JUDICIAL EDUCATION PROGRAM	12/7/09-12/8/09	CHICAGO, IL	EVENT HELD	TRANSPORTATION, LODGING, AND MEALS

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5. _____

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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.		
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.		
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 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)
1. BENNETT PROMISSORY NOTE		None	J	W					
2. COMMUNITY CENTRAL BANK	A	Interest	J	T					
3. EUROPACIFIC GROWTH FUND CL - HELD BY UBS FINANCIAL SERVICES	A	Dividend	K	T					
4. GROWTH FUND OF AMERICA CL A	A	Dividend	M	T					
5. INVESTMENT COMPANY OF AMERICA CL A	B	Dividend	L	T					
6. DWS SCUDDER HIGH INCOME FUND CLASS A	C	Dividend	K	T					
7. EUROPACIFIC GROWTH FUND CLASS A	B	Dividend	K	T					
8. CALAMOS GROWTH FUND CLASS A		None	J	T					
9. BAC CAPITAL TRUST XII	B	Dividend	K	T					
10. UBS FINANCIAL SERVICES (RMA) - CASII		None	J	T					
11. UBS FINANCIAL SERVICES (IRA) - CASII	A	Interest	K	T					
12. CHESTERFIELD PUB, LLC		None	L	V					
13.									
14.									
15.									
16.									
17.									

1. Income Gain Codes: (See Columns B1 and D4)	A = \$1,000 or less F = \$50,001 - \$100,000 J = \$15,000 or less N = \$250,001 - \$500,000 P3 = \$25,000,001 - \$50,000,000	B = \$1,001 - \$2,500 G = \$100,001 - \$1,000,000 K = \$15,001 - \$50,000 O = \$500,001 - \$1,000,000	C = \$2,501 - \$5,000 H1 = \$1,000,001 - \$5,000,000 L = \$50,001 - \$100,000 P1 = \$1,000,001 - \$5,000,000 P4 = More than \$50,000,000	D = \$5,001 - \$15,000 I12 = More than \$5,000,000 M = \$100,001 - \$250,000 P2 = \$5,000,001 - \$25,000,000	E = \$15,001 - \$50,000
2. Value Codes (See Columns C1 and D3)	Q = Appraisal U = Book Value	R = Cost (Real Estate Only) V = Other	S = Assessment W = Estimated	T = Cash Market	
3. Value Method Codes (See Column C2)					

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VIII. ADDITIONAL INFORMATION OR EXPLANATIONS. *(Indicate part of Report.)*

EXPLANATION REGARDING PART VII LINE 12, COL C2: VALUE WAS DETERMINED BY MEMBERS AT THEIR ANNUAL MEETING.

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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.

NOTE: ANY INDIVIDUAL WHO KNOWINGLY AND WILFULLY
AND CRIMINAL SANCTIONS (5 U.S.C. app. § 104)

CIVIL

FILING INSTRUCTIONS

Mail signed original and 3 additional copies to:

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