

AO 10  
Rev. 1/2006

**FINANCIAL DISCLOSURE REPORT  
FOR CALENDAR YEAR 2005**

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

<b>1. Person Reporting (last name, first, middle initial)</b> Rose, Thomas M	<b>2. Court or Organization</b> U.S. District Ct., S.D. Ohio	<b>3. Date of Report</b> 05/09/2006
<b>4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time)</b> U.S. District Judge (active)	<b>5a. Report Type (check appropriate type)</b> <input type="checkbox"/> Nomination, Date <input type="checkbox"/> Initial <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Final <b>5b:</b> <input type="checkbox"/> Amended Report	<b>6. Reporting Period</b> 01/01/2005 to 12/31/2005
<b>7. Chambers or Office Address</b> 200 West Second Street 9th Floor, Federal Building Dayton, OH 45402	<b>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.</b>  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 instructions.)

NONE (No reportable positions.)

<u>POSITION</u>	<u>NAME OF ORGANIZATION/ENTITY</u>
1. Partner	Wiggins & Rose Stables L.L.P.
2. Partner	Rose Stables
3. Co-Trustee	Trust #1
4. Co-Trustee	Trust #2
5.	

**II. AGREEMENTS.** (Reporting individual only; see pp. 14-16 of instructions.)

NONE (No reportable agreements.)

<u>DATE</u>	<u>PARTIES AND TERMS</u>
1. 1976	Public Employees Retirement System, no control, retirement
2. 1982	Ohio Deferred Compensation Fund, self-directed retirement fund (rolled over into NW Ind Retirement Account)
3. 2005	Northwestern Mutual Individual retirement account - self directed (rolled from Ohio Deferred Comp Fund)

FINANCIAL  
DISCLOSURE OFFICE  
MAY 9 9 55 AM '06

**FINANCIAL DISCLOSURE REPORT**

Page 2 of 11

Name of Person Reporting

Rose, Thomas M

Date of Report

05/09/2006

**III. NON-INVESTMENT INCOME.** *(Reporting individual and spouse; see pp. 17-24 of instructions.)*

**A. Filer's Non-Investment Income**

NONE *(No reportable non-investment income.)*

<u>DATE</u>	<u>SOURCE AND TYPE</u>	<u>INCOME</u> <i>(yours, not spouse's)</i>
1. 2005	Ohio Public Employee Retirement System (Retirement)	\$ 67,182.48
2. 2005	Principal Life Insurance Co. (Annuity Death Benefit)	\$ 17,172.52
3.		
4.		
5.		

**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.	
5.	

**IV. REIMBURSEMENTS** *-- transportation, lodging, food, entertainment.*

*(Includes those to spouse and dependent children. See pp. 25-27 of instructions.)*

NONE *(No reportable reimbursements.)*

<u>SOURCE</u>	<u>DESCRIPTION</u>
1.	
2.	
3.	

**FINANCIAL DISCLOSURE REPORT**

Page 3 of 11

Name of Person Reporting

Rose, Thomas M

Date of Report

05/09/2006

**V. GIFTS.** *(Includes those to spouse and dependent children. See pp. 28-31 of 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. 32-34 of instructions.)*

NONE *(No reportable liabilities.)*

	<u>CREDITOR</u>	<u>DESCRIPTION</u>	<u>VALUE CODE</u>
1.	Sky Bank	Mortgage on rental property #1 - Xenia, Ohio	K
2.			
3.			
4.			
5.			





**FINANCIAL DISCLOSURE REPORT**

Page 6 of 11

Name of Person Reporting

Rose, Thomas M

Date of Report

05/09/2006

**VII. INVESTMENTS and TRUSTS** – income, value, transactions (includes those of the spouse and dependent children. See pp. 34-57 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, merger, redemption)	If not exempt from disclosure			
						(2) Date Month - Day	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A-H)	(5) Identity of buyer/seller (if private transaction)
35. --Starwood Hotels	A	Dividend	J	T					
36. Trust #1 - Municipals									
37. --Broadview Heights	A	Interest	K	T					
38. --Butler County Ohio	A	Interest	J	T					
39. --Scanton, Ohio	A	Interest	K	T					
40. --Columbus (Franklin Co.) Ohio	B	Interest	K	T					
41. --Columbus (Franklin Co.) Ohio	B	Interest	K	T					
42. --Cuyahoga County, Ohio	A	Interest	J	T					
43. --Franklin Cty Ohio Imps	A	Interest	J	T					
44. --Franklin City (Warren Co.)	A	Interest	K	T					
45. --Greene County, Ohio	A	Interest	K	T					
46. --Greene County, Ohio	A	Interest	J	T					
47. --Hamilton County Hosp	A	Interest	K	T					
48. --Hamilton County Hosp	A	Interest	K	T					
49. --Hamilton County Stad	A	Interest	J	T					
50. --Highland Local	A	Interest	J	T					
51. --Huber Heights	B	Interest	K	T					

**FINANCIAL DISCLOSURE REPORT**

Page 7 of 11

Name of Person Reporting

Rose, Thomas M

Date of Report

05/09/2006

**VII. INVESTMENTS and TRUSTS** – income, value, transactions (includes those of the spouse and dependent children. See pp. 34-57 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, merger, redemption)	If not exempt from disclosure			
						(2) Date Month - Day	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A-H)	(5) Identity of buyer/seller (if private transaction)
52. --Independence, Ohio	A	Interest	J	T					
53. --Mansfield (Richland Co.)	B	Interest	K	T					
54. --Medina Co. Hosp	A	Interest	K	T					
55. --Montgomery Co. Spc 1	A	Interest	K	T					
56. --Montgomery Co. Ohio	A	Interest	K	T					
57. --Ohio Cap Corp HSG	A	Interest	J	T					
58. --Ohio State Pub. Facilities	B	Interest	K	T					
59. --Olentangy Loc. Sch Dist	A	Interest	J	T					
60. --Southern LSD (Meigs Co)	A	Interest	K	T					
61. --Toledo, Ohio General	A	Interest	K	T					
62. West Carrollton (Mont Co)	B	Interest	K	T					
63. West Carrollton (Mont Co)	A	Interest	L	T					
64. Trust #2 - Securities									
65. --Archer-Daniels-Midland	B	Dividend	M	T					
66. --Bob Evans	A	Dividend	L	T					
67. --First Energy Corp	A	Dividend	L	T					
68. --Huntington Ranchshares	B	Dividend	K	T					





**FINANCIAL DISCLOSURE REPORT**

Page 9 of 11

Name of Person Reporting

Rose, Thomas M

Date of Report

05/09/2006

**VII. INVESTMENTS and TRUSTS** – income, value, transactions (includes those of the spouse and dependent children. See pp. 34-57 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, merger, redemption)	If not exempt from disclosure			
						(2) Date Month - Day	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A-H)	(5) Identity of buyer/seller (if private transaction)
86. --Kettering (Mont County)	B	Interest	K	T					
87. --Montgomery County, Ohio	A	Interest	K	T					
88. --Ohio Building Authority	A	Interest	K	T					
89. --Ohio St. Bldg. Authority	A	Interest	K	T					
90. --Ohio St. Pub. Facs	A	Interest	L	T					
91. --Olentangy LSD	A	Interest	K	T					
92. --Olentangy LSD	A	Interest	L	T					

**FINANCIAL DISCLOSURE REPORT**

Page 10 of 11

<b>Name of Person Reporting</b>	<b>Date of Report</b>
Rose, Thomas M	05/09/2006

---

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

**FINANCIAL DISCLOSURE REPORT**

Page 11 of 11

Name of Person Reporting

Rose, Thomas M

Date of Report

05/09/2006

**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 \_\_\_\_\_ Date 5-10-06

**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)**

**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