

# FINANCIAL DISCLOSURE REPORT FOR CALENDAR YEAR 2004

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) <b>Katzmann, Robert A.</b>		2. Court or Organization <b>U.S. Court of Appeals - 2d Circuit</b>	3. Date of Report <b>4/20/05</b>
4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time) <b>Judge - Active</b>	5. Report Type (check appropriate type) Nomination, Date _____ Initial <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Final		6. Reporting Period <b>1/1/04 - 12/31/04</b>
7. Chambers or Office Address <b>40 Foley Square New York, New York 10007</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.  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.)

POSITION	NAME OF ORGANIZATION/ENTITY
<input type="checkbox"/> NONE (No reportable positions.)	
1 Director (unpaid)	The Governance Institute
2 Lecturer	NYU School of Law
3 Co moderator	Aspen Institute (1 week)

### II. AGREEMENTS. (Reporting individual only; see pp. 14-16 of Instructions.)

DATE	PARTIES AND TERMS
<input checked="" type="checkbox"/> NONE (No reportable agreements.)	
1 _____	
2 _____	

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

DATE	SOURCE AND TYPE	AMOUNT
A. Filer's Non-Investment Income		
<input checked="" type="checkbox"/> NONE (No reportable non-investment income.)		
1 _____		
2 _____		
3 _____		

FINANCIAL DISCLOSURE OFFICE

2005 APR 26 A 11:24

RECEIVED

### B. Spouse's Non-Investment Income - If you were married during any portion of the reporting year, please complete this section. (dollar amount not required except for honoraria)

<input type="checkbox"/> NONE (No reportable non-investment income.)
1 _____
2 _____

# FINANCIAL DISCLOSURE REPORT

Name of Person Reporting <b>Katzmann, Robert A.</b>	Date of Report <b>4/20/05</b>
--	----------------------------------

## IV. REIMBURSEMENTS -- transportation, lodging, food, entertainment. (Includes those to spouse and dependent children. See pp. 25-27 of Instructions.)

	<u>SOURCE</u>	<u>DESCRIPTION</u>
<input checked="" type="checkbox"/>	NONE (No such reportable reimbursements.)	
1		
2		
3		
4		
5		
6		
7		

## V. GIFTS. (Includes those to spouse and dependent children. See pp. 28-31 of Instructions.)

	<u>SOURCE</u>	<u>DESCRIPTION</u>	<u>VALUE</u>
<input checked="" type="checkbox"/>	NONE (No such reportable gifts.)		
1			\$
2			\$
3			\$
4			\$

## VI. LIABILITIES. (Includes those of spouse and dependent children. See pp. 32-33 of Instructions.)

	<u>CREDITOR</u>	<u>DESCRIPTION</u>	<u>VALUE CODE*</u>
<input checked="" type="checkbox"/>	NONE (No reportable liabilities.)		
1			
2			
3			
4			
5			

\*Value Codes: J=\$15,000 or less      K=\$15,001-\$50,000      L=\$50,001-\$100,000      M=\$100,001-\$250,000  
 N=\$250,001-\$500,000      O=\$500,001-\$1,000,000      P1=\$1,000,001-\$5,000,000  
 P2=\$5,000,001-\$25,000,000      P3=25,000,001-50,000,000      P4=50,000,001 or more

# FINANCIAL DISCLOSURE REPORT

Name of Person Reporting

Date of Report

Katzmann, Robert A.

4/20/05

## VII Page 1 INVESTMENTS and TRUSTS -- income, value, transactions (Includes those of spouse and dependent children. See pp. 34-57 of Instructions.)

A Description of Assets (including trust assets)  <i>Place "(X)" after each asset exempt from prior disclosure.</i>	B Income during reporting period		C Gross value at end of reporting period		D Transactions during reporting period				
	(1)	(2)	(1)	(2)	(1)	If not exempt from disclosure			
	Amt. Code1 (A-H)	Type (e.g., div. rent or int.)	Value Code2 (J-P)	Value Method Code3 (Q-W)	Type (e.g., buy, sell, merger, redemption)	(2) Date: Month- Day	(3) Value Code2 (J-P)	(4) Gain Code1 (A-H)	(5) Identity of buyer/seller (if private transaction)
<input type="checkbox"/> NONE (No reportable income.									
1 TI /CREF Pension		None	M	T					
2 TIAA/CREF SRA		None	K	T					
3 Vanguard 403(b)(7) -- Explorer Fund		None	M	T					
4 -- Index Fund (500 Fund)									
5 -- High Yield									
6 Salomon Smith Barney IRA -- Appreciation Fund		None	K	T					
7 -- Natural Resources Fund									
8 Chase Manhattan Bank	A	Int.	L	T					
9 First Republic	A	Int.	K	T					
10									
11									
12									
13									
14									
15									
16									
17									

1	Income/Gain Codes: (See Col. B1, 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 Col. C1, 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 Col. C2)	Q=Appraisal U=Book value	R=Cost (real estate only) V=Other	S=Assessment W=Estimated	T=Cash/Market	

FINANCIAL DISCLOSURE REPORT

Name of Person Reporting	Date of Report
Katzmann, Robert A.	4/20/05

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

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

4/20/05

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