LEGISLATIVE ETHICS COMMISSION
STATE OF NEW YORK

MAIL: LEGISLATIVE OFFICE BUILDING • BOX 75 • ALBANY, NY 12247
LOCATION: ALFRED E. SMITH STATE OFFICE BUILDING • SUITE 1431 • ALBANY, NY 12210
PHONE: (518) 432-7837/7838

RECEIVED
MAY 13 2015
BY
LEG. ETHICS COMM.

ANNUAL STATEMENT OF FINANCIAL DISCLOSURE

For Calendar Year 2014

1. Name Elizabeth O'C. Little

2. (a) Title of Position Senator 45th S.D.

   (b) Department, Agency or other Governmental Entity Legislature

   (c) Address of Present Office LOB 310, Albany, N.Y. 12247

   (d) Office Telephone Number 518-455-2811

3. (a) Marital Status Divorced. If married, please give spouse's full name including maiden name where applicable.

   (b) List the names of all unemancipated children.

   none

Answer each of the following questions completely, with respect to calendar year 2014, unless another period or date is otherwise specified. If additional space is needed, attach additional pages.

Whenever a "value" or "amount" is required to be reported herein, such value or amount shall be reported as being within one of the following Categories in Table I or Table II of this subdivision as called for in the question: A reporting individual shall indicate the Category by letter only.

Whenever "income" is required to be reported herein, the term "income" shall mean the aggregate net income before taxes from the source identified.

The term "calendar year" shall mean the year ending the December 31st preceding the date of filing of the annual statement.

4. (a) List any office, trusteeship, directorship, partnership, or position of any nature, whether compensated or not, held by the reporting individual with any firm, corporation, association, partnership, or other organization other than the State of New York. Include compensated honorary positions; do NOT list membership or uncompensated honorary positions. If the listed entity was licensed by any state or local agency, was regulated by any state regulatory agency or local agency, or, as a regular and significant part of the business or activity of said entity, did business with, or had matters other than ministerial matters before, any state or local agency, list the name of any such agency.

Position	Organization	State or Local Agency
Director	Arrow Financial (National Bank)	Financial Services
Director	Glens Falls National Bank	"
Director	Double H Hole in the Woods Camp	Health, DOS

(b) List any office, trusteeship, directorship, partnership, or position of any nature, whether compensated or not, held by the spouse or unemancipated child of the reporting individual, with any firm, corporation, association, partnership, or other organization other than the State of New York. Include compensated honorary positions; do NOT list membership or uncompensated honorary positions. If the listed entity was licensed by any state or local agency, was regulated by any state regulatory agency or local agency, or, as a regular and significant part of the business or activity of said entity, did business with, or had matters other than ministerial matters before, any state or local agency, list the name of any such agency.

Position	Organization	State or Local Agency
not applicable		

5. (a) List the name, address and description of any occupation, employment (other than the employment listed under Item 2 above), trade, business or profession engaged in by the reporting individual. If such activity was licensed by any state or local agency, was regulated by any state regulatory agency or local agency, or, as a regular and significant part of the business or activity of said entity, did business with, or had matters other than ministerial matters before, any state or local agency, list the name of any such agency.

Position	Name & Address of Organization	Description	State or Local Agency
Former Teacher		lifetime cert. Have not taught since 1994	State Ed

(b) If the spouse or unemancipated child of the reporting individual was engaged in any occupation, employment, trade, business or profession which activity was licensed by any state or local agency, was regulated by any state regulatory agency or local agency, or, as a regular and significant part of the business or activity of said entity, did business with, or had matters other than ministerial matters before, any state or local agency, list the name, address and description of such occupation, employment, trade, business or profession and the name of any such agency.

Position	Name & Address of Organization	Description	State or Local Agency
not applicable			

6. List any interest, in EXCESS of $1,000, held by the reporting individual, such individual's spouse or unemancipated child, or partnership of which any such person is a member, or corporation, 10% or more of the stock of which is owned or controlled by any such person, whether vested or contingent, in any contract made or executed by a state or local agency and include the name of the entity which holds such interest and the relationship of the reporting individual or such individual's spouse or such child to such entity and the interest in such contract. Do NOT include bonds and notes. Do NOT list any interest in any such contract on which final payment has been made and all obligations under the contract except for guarantees and warranties have been performed, provided, however, that such an interest must be listed if there has been an

ongoing dispute during the calendar year for which this statement is filed with respect to any such guarantees or warranties. Do NOT list any interest in a contract made or executed by a local agency after public notice and pursuant to a process for competitive bidding or a process for competitive requests for proposals.

Self, Spouse or Child	Entity Which Held Interest in Contract	Relationship to Entity and Interest in Contract	Contracting State or Local Agency	Category of Value of Contract (In Table II)
not applicable				

7. List any position the reporting individual held as an officer of any political party or political organization, as a member of any political party committee, or as a political party district leader. The term "party" shall have the same meaning as "party" in the election law. The term "political organization" means any party or independent body as defined in the election law or any organization that is affiliated with or a subsidiary of a party or independent body.

not applicable

8. (a) If the reporting individual practices law, is licensed by the department of state as a real estate broker or agent or practices a profession licensed by the department of education, or works as a member or employee of a firm required to register pursuant to section one-e of the legislative law as a lobbyist, describe the services rendered for which compensation was paid including a general description of the principal subject areas of matters undertaken by such individual and principal duties performed. Specifically state whether the reporting individual provides services directly to clients. Additionally, if such an individual practices with a firm or corporation and is a partner or shareholder of the firm or corporation, give a general description of principal subject areas of matters undertaken by such firm or corporation.

not applicable

(b) APPLICABLE ONLY TO NEW CLIENTS OR CUSTOMERS FOR WHOM SERVICES ARE PROVIDED ON OR AFTER JULY FIRST, TWO THOUSAND TWELVE AND BEFORE DECEMBER THIRTY-FIRST, TWO THOUSAND FIFTEEN, OR FOR NEW MATTERS FOR EXISTING CLIENTS OR CUSTOMERS WITH RESPECT TO THOSE SERVICES THAT ARE PROVIDED ON OR AFTER JULY FIRST, TWO THOUSAND TWELVE AND BEFORE DECEMBER THIRTY-FIRST, TWO THOUSAND FIFTEEN: If the reporting individual personally provides services to any person or entity, or works as a member or employee of a partnership or corporation that provides such services (referred to hereinafter as a "firm"), then identify each client or customer to whom the reporting individual

personally provided services, or who was referred to the firm by the reporting individual, and from whom the reporting individual or his or her firm earned fees in excess of $10,000 during the reporting period for such services rendered in direct connection with:

(i) A contract in an amount totaling $50,000 or more from the state or any state agency for services, materials, or property;

(ii) A grant of $25,000 or more from the state or any state agency during the reporting period;

(iii) A grant obtained through a legislative initiative during the reporting period; or

(iv) A case, proceeding, application or other matter that is not a ministerial matter before a state agency during the reporting period.

For purposes of this question, "referred to the firm" shall mean: having intentionally and knowingly taken a specific act or series of acts to intentionally procure for the reporting individual's firm or knowingly solicit or direct to the reporting individual's firm in whole or substantial part, a person or entity that becomes a client of that firm for the purposes of representation for a matter as defined in subparagraphs (i)through (iv) of this paragraph, as the result of such procurement, solicitation or direction of the reporting individual. A reporting individual need not disclose activities performed while lawfully acting pursuant to paragraphs (c),(d), (e)and (f)of subdivision seven of section seventy-three of this article.

The disclosure requirement in this question shall not require disclosure of clients or customers receiving medical or dental services, mental health services, residential real estate brokering services, or insurance brokering services from the reporting individual or his or her firm. The reporting individual need not identify any client to whom he or she or his or her firm provided legal representation with respect to investigation or prosecution by law enforcement authorities, bankruptcy, or domestic relations matters. With respect to clients represented in other matters, where disclosure of a client's identity is likely to cause harm, the reporting individual shall request an exemption from the joint commission pursuant to paragraph (i) of subdivision nine of section ninety-four of the executive law, provided, however, that a reporting individual who first enters public office after July first, two thousand twelve, need not report clients or customers with respect to matters for which the reporting individual or his or her firm was retained prior to entering public office.

Client	Nature of Services Provided
not applicable	

(c) List the name, principal address and general description or the nature of the business activity of any entity in which the reporting individual or such individual's spouse had an investment in excess of $1,000 excluding investments in securities and interests in real property.

not applicable

9. List each source of gifts, EXCLUDING campaign contributions, in EXCESS of $1,000, received during the reporting period for which this statement is filed by the reporting individual or such individual's spouse or unemancipated child from the same donor, EXCLUDING gifts from a relative. INCLUDE the name and address of the donor. The term "gifts" does not include reimbursements, which term is defined in item 10. Indicate the value and nature of each such gift.

Self, Spouse or Child	Name of Donor	Address	Nature of Gift	Category of Value of Gift (In Table I)
not applicable				

10. Identify and briefly describe the source of any reimbursements for expenditures, EXCLUDING campaign expenditures and expenditures in connection with official duties reimbursed by the state, in EXCESS of $1,000 from each such source. For purposes of this item, the term "reimbursements" shall mean any travel-related expenses provided by nongovernmental sources and for activities related to the reporting individual's official duties such as, speaking engagements, conferences, or factfinding events. The term "reimbursements" does NOT include gifts reported under item 9.

Source	Description
not applicable	

11. List the identity and value, if reasonably ascertainable, of each interest in a trust, estate or other beneficial interest, including retirement plans (other than retirement plans of the state of New York or the city of New York), and deferred compensation plans

(e.g., 401, 403(b), 457, etc.) established in accordance with the internal revenue code, in which the REPORTING INDIVIDUAL held a beneficial interest in EXCESS of $1,000 at any time during the preceding year. Do NOT report interests in a trust, estate or other beneficial interest established by or for, or the estate of, a relative.

Identity	Category of Value* (In Table II)
N.Y. State deferred income	J
Vanguard PRM cap Adm	mutual funds
Vanguard Cap Oppr. Adm	
Stable Income Fund	

* The value of such interest shall be reported only if reasonably ascertainable.

12. (a) Describe the terms of, and the parties to, any contract, promise, or other agreement between the reporting individual and any person, firm, or corporation with respect to the employment of such individual after leaving office or position (other than a leave of absence).

Not applicable

(b) Describe the parties to and the terms of any agreement providing for continuation of payments or benefits to the REPORTING INDIVIDUAL in EXCESS of $1,000 from a prior employer OTHER THAN the State.(This includes interests in or contributions to a pension fund, profit-sharing plan, or life or health insurance; buy-out agreements; severance payments; etc.)

Not applicable

13. List below the nature and amount of any income in EXCESS of $1,000 from EACH SOURCE for the reporting individual and such individual's spouse for the taxable year last occurring prior to the date of filing. Each such source must be described with particularity. Nature of income includes, but is not limited to, all income (other than that received from the employment listed under Item 2 above) from compensated employment whether public or private, directorships and other fiduciary positions, contractual arrangements, teaching income, partnerships, honorariums, lecture fees, consultant fees, bank and bond interest, dividends, income derived from a trust, real estate rents, and recognized gains from the sale or exchange of real or other property. Income from a business or profession and real estate rents shall be reported with the source identified by the building address in the case of real estate rents and otherwise by the name of the entity and not by the

name of the individual customers, clients or tenants, with the aggregate net income before taxes for each building address or entity. The receipt of maintenance received in connection with a matrimonial action, alimony and child support payments shall not be listed.

Self/ Spouse	Source	Nature	Category of Amount (In Table I)
	Unit 315 Whiteface Inn	rental of condo	C
Self	Arrow Financial	Directorship	E
	Glens Falls Nat'l Bk	"	
	Morgan Stanley IRA distribution	Mutual funds	D
	Social Security benefits		E
	Pension of ex-husband	divorce decree	C
	American stock transfer trust	dividends	D
	USAA	sale of mutual fds to another, - gain	C
	Vanguard - 500 Index fund	mutual fd.	B

14. List the sources of any deferred income (not retirement income) in EXCESS of $1,000 from each source to be paid to the reporting individual following the close of the calendar year for which this disclosure statement is filed, other than deferred compensation reported in item 11 hereinabove. Deferred income derived from the practice of a profession shall be listed in the aggregate and shall identify as the source, the name of the firm, corporation, partnership or association through which the income was derived, but shall not identify individual clients.

Source	Category of Amount (In Table I)
not applicable	

15. List each assignment of income in EXCESS of $1,000, and each transfer other than to a relative during the reporting period for which this statement is filed for less than fair consideration of an interest in a trust, estate or other beneficial interest, securities or real property, by the reporting individual, in excess of $1,000, which would otherwise be required to be reported herein and is not or has not been so reported.

Item Assigned or Transferred	Assigned or Transferred to	Category of Value (In Table I)
not applicable		

16. List below the type and market value of securities held by the reporting individual or such individual's spouse from each issuing entity in EXCESS of $1,000 at the close of the taxable year last

occurring prior to the date of filing, including the name of the issuing entity exclusive of securities held by the reporting individual issued by a professional corporation. Whenever an interest in securities exists through a beneficial interest in a trust, the securities held in such trust shall be listed ONLY IF the reporting individual has knowledge thereof except where the reporting individual or the reporting individual's spouse has transferred assets to such trust for his or her benefit in which event such securities shall be listed unless they are not ascertainable by the reporting individual because the trustee is under an obligation or has been instructed in writing not to disclose the contents of the trust to the reporting individual. Securities of which the reporting individual or the reporting individual's spouse is the owner of record but in which such individual or the reporting individual's spouse has no beneficial interest shall not be listed. Indicate percentage of ownership ONLY if the reporting person or the reporting person's spouse holds more than five percent (5%) of the stock of a corporation in which the stock is publicly traded or more than ten percent (10%) of the stock of a corporation in which the stock is NOT publicly traded. Also list securities owned for investment purposes by a corporation more than fifty percent (50%) of the stock of which is owned or controlled by the reporting individual or such individual's spouse. For the purpose of this item the term "securities" shall mean mutual funds, bonds, mortgages, notes, obligations, warrants and stocks of any class, investment interests in limited or general partnerships and certificates of deposits (CDs) and such other evidences of indebtedness and certificates of interest as are usually referred to as securities. The market value for such securities shall be reported only if reasonably ascertainable and shall not be reported if the security is an interest in a general partnership that was listed in item 8 (a) or if the security is corporate stock, NOT publicly traded, in a trade or business of a reporting individual or a reporting individual's spouse.

Self/ ~~Spouse~~	Issuing Entity	Type of Security	Percentage of corporate stock owned or controlled (if more than 5% of publicly traded stock, or more than 10% if stock not publicly traded, is held)	Category of Market Value as of the close of the taxable year last occurring prior to the filing of this statement (In Table II)
	Arrow Financial	stock	N/A	I
	Morgan Stanley	IRA -	N/A	I
	Nat'l Coventry Funds	Mutual	N/A	C
	USAA - Intermed. Funds	Mutual	N/A	G
	" Capital Growth			
	Deferred income	Mutual	N/A	J
	Vanguard Index Fund	Mutual	N/A	F

17. List below the location, size, general nature, acquisition date, market value and percentage of ownership of any real property in

Starbucks	stock	N/A	E
Boston Scientific	stock	N/A	D
Kaycorp	stock	N/A	C
Metlife	stock	N/A	C

which any vested or contingent interest in EXCESS of $1,000 is held by the reporting individual or the reporting individual's spouse. Also list real property owned for investment purposes by a corporation more than fifty percent (50%) of the stock of which is owned or controlled by the reporting individual or such individual's spouse. Do NOT list any real property which is the primary or secondary personal residence of the reporting individual or the reporting individual's spouse, except where there is a co-owner who is other than a relative.

Self/ Spouse/ Corporation	Location Size	General Nature	Acquisition Date	Percentage of Ownership	Category of Market Value (In Table II)
Self	5 Whiteface Ln.	condo unit	9/14/04	1/2 thof unit	F

18. List below all notes and accounts receivable, other than from goods or services sold, held by the reporting individual at the close of the taxable year last occurring prior to the date of filing and other debts owed to such individual at the close of the taxable year last occurring prior to the date of filing, in EXCESS of $1,000, including the name of the debtor, type of obligation, date due and the nature of the collateral securing payment of each, if any, excluding securities reported in item 16 hereinabove. Debts, notes and accounts receivable owed to the individual by a relative shall not be reported.

Name of Debtor	Type of Obligation, Date Due, and Nature of Collateral, if any	Category of Amount (In Table II)
Non Applicable		

19. List below all liabilities of the reporting individual and such individual's spouse, in EXCESS of $10,000 as of the date of filing of this statement, other than liabilities to a relative. Do NOT list liabilities incurred by, or guarantees made by, the reporting individual or such individual's spouse or by any proprietorship, partnership or corporation in which the reporting individual or such individual's spouse has an interest, when incurred or made in the ordinary course of the trade, business or professional practice of the reporting individual or such individual's spouse. Include the name of the creditor and any collateral pledged by such individual to secure payment of any such liability. A reporting individual shall not list any obligation to pay maintenance in connection with

a matrimonial action, alimony or child support payments. Any loan issued in the ordinary course of business by a financial institution to finance educational costs, the cost of home purchase or improvements for a primary or secondary residence, or purchase of a personally owned motor vehicle, household furniture or appliances shall be excluded. If any such reportable liability has been guaranteed by any third person, list the liability and name the guarantor.

Name of Creditor or Guarantor	Type of Liability and Collateral, if any	Category of Amount (In Table II)
Non Applicable		

The requirements of law relating to the reporting of financial interests are in the public interest and no adverse inference of unethical or illegal conduct or behavior will be drawn merely from compliance with these requirements.

Elizabeth A. Lund
(Signature of Reporting Individual)

May 12, 2015
Date (month/day/year)

[CATEGORY OF INCOME TABLES]

TABLE I

Category A	none		
Category B	$ 1	to under	$ 1,000
Category C	$ 1,000	to under	$ 5,000
Category D	$ 5,000	to under	$ 20,000
Category E	$ 20,000	to under	$ 50,000
Category F	$ 50,000	to under	$ 75,000
Category G	$ 75,000	to under	$ 100,000
Category H	$ 100,000	to under	$ 150,000
Category I	$ 150,000	to under	$ 250,000
Category J	$ 250,000	to under	$ 350,000
Category K	$ 350,000	to under	$ 450,000
Category L	$ 450,000	to under	$ 550,000
Category M	$ 550,000	to under	$ 650,000
Category N	$ 650,000	to under	$ 750,000
Category O	$ 750,000	to under	$ 850,000
Category P	$ 850,000	to under	$ 950,000
Category Q	$ 950,000	to under	$1,050,000
Category R	$1,050,000	to under	$1,150,000
Category S	$1,150,000	to under	$1,250,000
Category T	$1,250,000	to under	$1,350,000
Category U	$1,350,000	to under	$1,450,000
Category V	$1,450,000	to under	$1,550,000
Category W	$1,550,000	to under	$1,650,000

Category X	$1,650,000 to under $1,750,000
Category Y	$1,750,000 to under $1,850,000
Category Z	$1,850,000 to under $1,950,000
Category AA	$1,950,000 to under $2,050,000
Category BB	$2,050,000 to under $2,150,000
Category CC	$2,150,000 to under $2,250,000
Category DD	$2,250,000 to under $2,350,000
Category EE	$2,350,000 to under $2,450,000
Category FF	$2,450,000 to under $2,550,000
Category GG	$2,550,000 to under $2,650,000
Category HH	$2,650,000 to under $2,750,000
Category II	$2,750,000 to under $2,850,000
Category JJ	$2,850,000 to under $2,950,000
Category KK	$2,950,000 to under $3,050,000
Category LL	$3,050,000 to under $3,150,000
Category MM	$3,150,000 to under $3,250,000
Category NN	$3,250,000 to under $3,350,000
Category OO	$3,350,000 to under $3,450,000
Category PP	$3,450,000 to under $3,550,000
Category QQ	$3,550,000 to under $3,650,000
Category RR	$3,650,000 to under $3,750,000
Category SS	$3,750,000 to under $3,850,000
Category TT	$3,850,000 to under $3,950,000
Category UU	$3,950,000 to under $4,050,000
Category VV	$4,050,000 to under $4,150,000
Category WW	$4,150,000 to under $4,250,000
Category XX	$4,250,000 to under $4,350,000
Category YY	$4,350,000 to under $4,450,000
Category ZZ	$4,450,000 to under $4,550,000
Category AAA	$4,550,000 to under $4,650,000
Category BBB	$4,650,000 to under $4,750,000
Category CCC	$4,750,000 to under $4,850,000
Category DDD	$4,850,000 to under $4,950,000
Category EEE	$4,950,000 to under $5,050,000
Category FFF	$5,050,000 to under $5,150,000
Category GGG	$5,150,000 to under $5,250,000
Category HHH	$5,250,000 to under $5,350,000
Category III	$5,350,000 to under $5,450,000
Category JJJ	$5,450,000 to under $5,550,000
Category KKK	$5,550,000 to under $5,650,000
Category LLL	$5,650,000 to under $5,750,000
Category MMM	$5,750,000 to under $5,850,000
Category NNN	$5,850,000 to under $5,950,000
Category OOO	$5,950,000 to under $6,050,000
Category PPP	$6,050,000 to under $6,150,000
Category QQQ	$6,150,000 to under $6,250,000
Category RRR	$6,250,000 to under $6,350,000
Category SSS	$6,350,000 to under $6,450,000
Category TTT	$6,450,000 to under $6,550,000
Category UUU	$6,550,000 to under $6,650,000
Category VVV	$6,650,000 to under $6,750,000
Category WWW	$6,750,000 to under $6,850,000
Category XXX	$6,850,000 to under $6,950,000
Category YYY	$6,950,000 to under $7,050,000
Category ZZZ	$7,050,000 to under $7,150,000
Category AAAA	$7,150,000 to under $7,250,000
Category BBBB	$7,250,000 to under $7,350,000

Category CCCC	$7,350,000 to under $7,450,000
Category DDDD	$7,450,000 to under $7,550,000
Category EEEE	$7,550,000 to under $7,650,000
Category FFFF	$7,650,000 to under $7,750,000
Category GGGG	$7,750,000 to under $7,850,000
Category HHHH	$7,850,000 to under $7,950,000
Category IIII	$7,950,000 to under $8,050,000
Category JJJJ	$8,050,000 to under $8,150,000
Category KKKK	$8,150,000 to under $8,250,000
Category LLLL	$8,250,000 to under $8,350,000
Category MMMM	$8,350,000 to under $8,450,000
Category NNNN	$8,450,000 to under $8,550,000
Category OOOO	$8,550,000 to under $8,650,000
Category PPPP	$8,650,000 to under $8,750,000
Category QQQQ	$8,750,000 to under $8,850,000
Category RRRR	$8,850,000 to under $8,950,000
Category SSSS	$8,950,000 to under $9,050,000
Category TTTT	$9,050,000 to under $9,150,000
Category UUUU	$9,150,000 to under $9,250,000
Category VVVV	$9,250,000 to under $9,350,000
Category WWWW	$9,350,000 to under $9,450,000
Category XXXX	$9,450,000 to under $9,550,000
Category YYYY	$9,550,000 to under $9,650,000
Category ZZZZ	$9,650,000 to under $9,750,000
Category AAAAA	$9,750,000 to under $9,850,000
Category BBBBB	$9,850,000 to under $9,950,000
Category CCCCC	$9,950,000 to under $10,000,000
Category DDDDD	$10,000,000 or over

TABLE II

Category A	none
Category B	$ 1 to under $ 1,000
Category C	$ 1,000 to under $ 5,000
Category D	$ 5,000 to under $ 20,000
Category E	$ 20,000 to under $ 50,000
Category F	$ 50,000 to under $ 75,000
Category G	$ 75,000 to under $ 100,000
Category H	$ 100,000 to under $ 150,000
Category I	$ 150,000 to under $ 250,000
Category J	$ 250,000 to under $ 500,000
Category K	$ 500,000 to under $ 750,000
Category L	$ 750,000 to under $1,000,000
Category M	$1,000,000 to under $1,250,000
Category N	$1,250,000 to under $1,500,000
Category O	$1,500,000 to under $1,750,000
Category P	$1,750,000 to under $2,000,000
Category Q	$2,000,000 to under $2,250,000
Category R	$2,250,000 to under $2,500,000
Category S	$2,500,000 to under $2,750,000
Category T	$2,750,000 to under $3,000,000
Category U	$3,000,000 to under $3,250,000
Category V	$3,250,000 to under $3,500,000
Category W	$3,500,000 to under $3,750,000
Category X	$3,750,000 to under $4,000,000
Category Y	$4,000,000 to under $4,250,000

Category Z	$4,250,000 to under $4,500,000
Category AA	$4,500,000 to under $4,750,000
Category BB	$4,750,000 to under $5,000,000
Category CC	$5,000,000 to under $5,250,000
Category DD	$5,250,000 to under $5,500,000
Category EE	$5,500,000 to under $5,750,000
Category FF	$5,750,000 to under $6,000,000
Category GG	$6,000,000 to under $6,250,000
Category HH	$6,250,000 to under $6,500,000
Category II	$6,500,000 to under $6,750,000
Category JJ	$6,750,000 to under $7,000,000
Category KK	$7,000,000 to under $7,250,000
Category LL	$7,250,000 to under $7,500,000
Category MM	$7,500,000 to under $7,750,000
Category NN	$7,750,000 to under $8,000,000
Category OO	$8,000,000 to under $8,250,000
Category PP	$8,250,000 to under $8,500,000
Category QQ	$8,500,000 to under $8,750,000
Category RR	$8,750,000 to under $9,000,000
Category SS	$9,000,000 to under $9,250,000
Category TT	$9,250,000 to under $9,500,000
Category UU	$9,500,000 or over

Form **1040** Department of the Treasury—Internal Revenue Service (99)

U.S. Individual Income Tax Return 2014

OMB No. 1545-0074 | IRS Use Only—Do not write or staple in this space.

For the year Jan. 1–Dec. 31, 2014, or other tax year beginning , 2014, ending , 20 | See separate instructions.

Your first name and initial	Last name	Your social security number
ELIZABETH	LITTLE	[redacted]
If a joint return, spouse's first name and initial	Last name	Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. [redacted] | Apt. no.

▲ Make sure the SSN(s) above and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). [redacted]

Foreign country name | Foreign province/state/county | Foreign postal code

Presidential Election Campaign [redacted] jointly, want $3 to go to this fund. Checking a box below will not change your tax or refund. ☒ You ☐ Spouse

Filing Status

Check only one box.

1 ☒ Single

2 ☐ Married filing jointly (even if only one had income)

3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶

4 ☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶

5 ☐ Qualifying widow(er) with dependent child

Exemptions

6a ☒ **Yourself.** If someone can claim you as a dependent, **do not** check box 6a

b ☐ **Spouse**

Boxes checked on 6a and 6b: 1

c **Dependents:**

(1) First name Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) ✓ if child under age 17 qualifying for child tax credit (see instructions)
			☐
			☐
			☐
			☐

If more than four dependents, see instructions and check here ▶ ☐

No. of children on 6c who:
- lived with you
- did not live with you due to divorce or separation (see instructions)

Dependents on 6c not entered above

d Total number of exemptions claimed

Add numbers on lines above ▶ 1

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see instructions.

7	Wages, salaries, tips, etc. Attach Form(s) W-2		7	79,767.
8a	**Taxable** interest. Attach Schedule B if required		8a	14.
b	**Tax-exempt** interest. Do not include on line 8a	8b		
9a	Ordinary dividends. Attach Schedule B if required		9a	16,455.
b	Qualified dividends	9b 15,463.		
10	Taxable refunds, credits, or offsets of state and local income taxes		10	
11	Alimony received		11	
12	Business income or (loss). Attach Schedule C or C-EZ		12	39,948.
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐		13	7,749.
14	Other gains or (losses). Attach Form 4797		14	
15a	IRA distributions	15a	b Taxable amount	15b 9,224.
16a	Pensions and annuities	16a	b Taxable amount	16b 2,468.
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		17	0.
18	Farm income or (loss). Attach Schedule F		18	
19	Unemployment compensation		19	
20a	Social security benefits	20a 26,337.	b Taxable amount	20b 22,386.
21	Other income. List type and amount		21	
22	Combine the amounts in the far right column for lines 7 through 21. This is your **total income** ▶		22	178,011.

Adjusted Gross Income

23	Educator expenses	23	
24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24	
25	Health savings account deduction. Attach Form 8889	25	
26	Moving expenses. Attach Form 3903	26	
27	Deductible part of self-employment tax. Attach Schedule SE	27	1,728.
28	Self-employed SEP, SIMPLE, and qualified plans	28	
29	Self-employed health insurance deduction	29	
30	Penalty on early withdrawal of savings	30	
31a	Alimony paid b Recipient's SSN ▶	31a	
32	IRA deduction	32	
33	Student loan interest deduction	33	
34	Tuition and fees. Attach Form 8917	34	
35	Domestic production activities deduction. Attach Form 8903	35	
36	Add lines 23 through 35	36	1,728.
37	Subtract line 36 from line 22. This is your **adjusted gross income** ▶	37	176,283.

Tax and Credits	38	Amount from line 37 (adjusted gross income)	38	176,283.
	39a	Check if: ☒ You were born before January 2, 1950, ☐ Blind. ☐ Spouse was born before January 2, 1950, ☐ Blind. Total boxes checked ▶ 39a 1		
	b	If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶ 39b ☐		
Standard Deduction for— • People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions. • All others: Single or Married filing separately, $6,200 Married filing jointly or Qualifying widow(er), $12,400 Head of household, $9,100	40	**Itemized deductions** (from Schedule A) **or your standard deduction** (see left margin)	40	29,594.
	41	Subtract line 40 from line 38	41	146,689.
	42	**Exemptions.** If line 38 is $152,525 or less, multiply $3,950 by the number on line 6d. Otherwise, see instructions	42	3,950.
	43	**Taxable income.** Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	142,739.
	44	Tax (see instructions). Check if any from: a ☐ Form(s) 8814 b ☐ Form 4972 c ☐	44	30,132.
	45	**Alternative minimum tax** (see instructions). Attach Form 6251	45	640.
	46	Excess advance premium tax credit repayment. Attach Form 8962	46	
	47	Add lines 44, 45, and 46 ▶	47	30,772.
	48	Foreign tax credit. Attach Form 1116 if required 48		
	49	Credit for child and dependent care expenses. Attach Form 2441 49		
	50	Education credits from Form 8863, line 19 50		
	51	Retirement savings contributions credit. Attach Form 8880 51		
	52	Child tax credit. Attach Schedule 8812, if required 52		
	53	Residential energy credits. Attach Form 5695 53		
	54	Other credits from Form: a ☐ 3800 b ☐ 8801 c ☐ 54		
	55	Add lines 48 through 54. These are your **total credits**	55	
	56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0- ▶	56	30,772.
Other Taxes	57	Self-employment tax. Attach Schedule SE	57	3,455.
	58	Unreported social security and Medicare tax from Form: a ☐ 4137 b ☐ 8919	58	
	59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59	
	60a	Household employment taxes from Schedule H	60a	
	b	First-time homebuyer credit repayment. Attach Form 5405 if required	60b	
	61	Health care: individual responsibility (see instructions) Full-year coverage ☒	61	
	62	Taxes from: a ☐ Form 8959 b ☐ Form 8960 c ☐ Instructions; enter code(s)	62	
	63	Add lines 56 through 62. This is your **total tax** ▶	63	34,227.
Payments	64	Federal income tax withheld from Forms W-2 and 1099 64 20,454.		
If you have a qualifying child, attach Schedule EIC.	65	2014 estimated tax payments and amount applied from 2013 return 65 14,320.		
	66a	**Earned income credit (EIC)** 66a		
	b	Nontaxable combat pay election 66b		
	67	Additional child tax credit. Attach Schedule 8812 67		
	68	American opportunity credit from Form 8863, line 8 68		
	69	Net premium tax credit. Attach Form 8962 69		
	70	Amount paid with request for extension to file 70		
	71	Excess social security and tier 1 RRTA tax withheld 71		
	72	Credit for federal tax on fuels. Attach Form 4136 72		
	73	Credits from Form: a ☐ 2439 b ☒ Reserved c ☒ Reserved d ☐ 73		
	74	Add lines 64, 65, 66a, and 67 through 73. These are your **total payments** ▶	74	34,774.
Refund	75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you **overpaid**	75	547.
	76a	Amount of line 75 you want **refunded to you.** If Form 8888 is attached, check here ▶ ☐	76a	0.
Direct deposit? See instructions.	▶ b	Routing number X X X X X X X X X ▶ c Type: ☐ Checking ☐ Savings		
	▶ d	Account number X X X X X X X X X X X X X X X X X		
	77	Amount of line 75 you want **applied to your 2015 estimated tax** ▶ 77 547.		
Amount You Owe	78	**Amount you owe.** Subtract line 74 from line 63. For details on how to pay, see instructions ▶	78	
	79	Estimated tax penalty (see instructions) 79		

Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions)? ☒ **Yes.** Complete below. ☐ **No**

Designee's name ▶ Stephen G. Bethel, CPA Phone no. ▶ (518)793-5166 Personal identification number (PIN) ▶ [redacted]

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See instructions. Keep a copy for your records.

Your signature	Date	Your occupation	Daytime phone number
		NY REPRESENTATIVE	
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Stephen G. Bethel, CPA	Stephen G. Bethel, CPA	04/03/2015		[redacted]

Firm's name ▶ Jenkins, Beecher & Bethel CPA's Firm's EIN [redacted]

Firm's address ▶ PO Box 1246 South Glens Falls NY 12803 Phone no. (518)793-5166

Morgan Stanley

Date Issued: FEBRUARY 09, 2015

ELIZABETH O'C. LITTLE
[redacted]

☐ CORRECTED (if checked)

PAYER'S name, street address, city, state, and ZIP code	1 Gross distribution	OMB No. 1545-0119	Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.
Morgan Stanley Smith Barney LLC 1 New York Plaza 12th Floor New York, NY 10004	$9,223.77	2014	
	2a Taxable amount $9,223.77	Form 1099-R	
	2b Taxable amount not determined ☒ Total distribution ☐		Copy B Report this income on your federal tax return. If this form shows federal income tax withheld in box 4, attach this copy to your return.
PAYER'S federal identification number: [redacted] / RECIPIENT'S identification number: [redacted]	3 Capital gain (included in box 2a) $	4 Federal income tax withheld $1,844.76	
RECIPIENT'S name, street address (including apt. no.), City, state and ZIP code ELIZABETH O'C. LITTLE [redacted]	5 Employee contributions/Designated Roth contributions or insurance premiums $	6 Net unrealized appreciation in employer's securities $	
	7 Distribution code(s): 7 / IRA/SEP/SIMPLE ☒	8 Other $ %	This information is being furnished to the Internal Revenue Service.
	9a Your percentage of total distribution %	9b Total employee contributions $	
10 Amount allocable to IRR within 5 years $ / 11 1st year of desig. Roth contrib.	12 State tax withheld $645.68 $	13 State/Payer's state no. [redacted]	14 State distribution $ $
Account number (see instructions) [redacted]	15 Local tax withheld $ $	16 Name of locality	17 Local distribution $ $

Form 1099-R

Department of the Treasury - Internal Revenue Service

77 MSGPDD03 003506

☐ CORRECTED (if checked)

PAYER'S name, street address, city, state, ZIP code and telephone no.	1a Total ordinary dividends	OMB No. 1545-0110	Dividends and Distributions
ARROW FINANCIAL CORP ESPP C/O American Stock Transfer & Trust Company, LLC 6201 15th Avenue Brooklyn, NY 11219 Phone: 866-668-8555	$3,451.38	2014	
	1b Qualified dividends $3,451.38	Form 1099-DIV	
	2a Total capital gain distr. $	2b Unrecap. Sec. 1250 gain $	Copy B For Recipient
150112.0071.0000.00415.01.01	2c Section 1202 gain $	2d Collectibles (28%) gain $	
ELIZABETH LITTLE [redacted]	3 Nondividend distributions $	4 Federal income tax withheld $	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
		5 Investment expenses $	
	6 Foreign tax paid $	7 Foreign country or U.S. possession	
	8 Cash liquidation distributions $	9 Noncash liquidation distributions $	
Account number (optional): [redacted]	10 Exempt-interest dividends $	11 Specified private activity bond interest dividends $	
PAYER'S federal identification number [redacted] / RECIPIENT'S identification number [redacted]	12 State / 13 State identification no.	14 State tax withheld $	

Form **1099-DIV** (keep for your records) Department of the Treasury - Internal Revenue Service

Service charge / commission paid by company (included in box 1a) = 3.91

0000.0415.01.01.60.1

Instructions for Recipient

Recipient's identification number. For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), or adoption taxpayer identification number (ATIN). However, the issuer has reported your complete identification number to the IRS and, where applicable, to state and/or local governments.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

Box 1a. Shows total ordinary dividends that are taxable. Include this amount on line 9a of Form 1040 or 1040A. Also, report it on Schedule B (1040A or 1040), if required.

Box 1b. Shows the portion of the amount in box 1a that may be eligible for reduced capital gains rates. See Form 1040/1040A instructions for how to determine this amount. Report the eligible amount on line 9b, Form 1040 or 1040A.

The amount shown may be dividends a corporation paid directly to you as a participant (or beneficiary of a participant) in an employee stock ownership plan (ESOP). Report it as a dividend on your Form 1040/1040A but treat it as a plan distribution, not as investment income, for any other purpose.

Box 2a. Shows total capital gain distributions from a regulated investment company or real estate investment trust. Report the amounts shown in box 2a on Schedule D (Form 1040), line 13. But, if no amount is shown in boxes 2c–2d and your only capital gains and losses are capital gain distributions, you may be able to report the amounts shown in box 2a on line 13 of Form 1040 (line 10 of Form 1040A) rather than Schedule D. See the Form 1040/1040A instructions.

Box 2b. Shows the portion of the amount in box 2a that is unrecaptured section 1250 gain from certain depreciable real property. Report this amount on the Unrecaptured Section 1250 Gain Worksheet-Line 19 in the Schedule D instructions (Form 1040).

Box 2c. Shows the portion of the amount in box 2a that is section 1202 gain from certain small business stock that may be subject to an exclusion. See the Schedule D (Form 1040) instructions.

Box 2d. Shows 28% rate gain from sales or exchanges of collectibles. If required, use this amount when completing the 28% Rate Gain Worksheet–Line 18 in the instructions for Schedule D (Form 1040).

Box 3. Shows the part of the distribution that is nontaxable because it is a return of your cost (or other basis). You must reduce your cost (or other basis) by this amount for figuring gain or loss when you sell your stock. But if you get back all your cost (or other basis), report future distributions as capital gains. See Pub. 550, Investment Income and Expenses.

Box 4. Shows backup withholding. A payer must backup withhold on certain payments if you did not give your taxpayer identification number to the payer. See Form W-9, Request for Taxpayer Identification Number and Certification, for information on backup withholding. Include this amount on your income tax return as tax withheld.

Box 5. Shows your share of expenses of a nonpublicly offered regulated investment company, generally a nonpublicly offered mutual fund. If you file Form 1040, you may deduct these expenses on the "Other expenses" line on Schedule A (Form 1040) subject to the 2% limit. This amount is included in box 1a.

Box 6. Shows the foreign tax that you may be able to claim as a deduction or a credit on Form 1040. See the Form 1040 instructions.

Box 7. This box should be left blank if a regulated investment company reported the foreign tax shown in box 6.

Boxes 8 and 9. Shows cash and noncash liquidation distributions.

Box 10. Shows exempt-interest dividends from a mutual fund or other regulated investment company paid to you during the calendar year. Include this amount on line 8b of Form 1040 or 1040A as tax-exempt interest. This amount may be subject to backup withholding. See box 4.

Box 11. Shows exempt-interest dividends subject to the alternative minimum tax. This amount is included in box 10. See the Instructions for Form 6251.

Boxes 12-14. State income tax withheld reporting boxes.

Nominees. If this form includes amounts belonging to another person, you are considered a nominee recipient. You must file Form 1099-DIV (with a Form 1096) with the IRS for each of the other owners to show their share of the income, and you must furnish a Form 1099-DIV to each. A spouse is not required to file a nominee return to show amounts owned by the other spouse. See the 2014 General Instructions for Certain Information Returns.

Future developments. For the latest information about the developments related to Form 1099-DIV and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099div.*

☐ CORRECTED (if checked)

PAYER'S name, street address, city, state, ZIP code and telephone no.	1a Total ordinary dividends	OMB No. 1545-0110	Dividends and Distributions
ARROW FINANCIAL CORPORATION C/O American Stock Transfer & Trust Company, LLC 6201 15th Avenue Brooklyn, NY 11219 Phone: 866-668-8555	$8,993.57	2014	
	1b Qualified dividends $8,993.57	Form 1099-DIV	
	2a Total capital gain distr. $	2b Unrecap. Sec. 1250 gain $	Copy B For Recipient
150112.0070.0000.00264.01.01	2c Section 1202 gain $	2d Collectibles (28%) gain $	
ELIZABETH O' C LUTTLE [redacted]	3 Nondividend distributions $	4 Federal income tax withheld $	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
		5 Investment expenses $	
	6 Foreign tax paid $	7 Foreign country or U.S. possession	
	8 Cash liquidation distributions $	9 Noncash liquidation distributions $	
Account number (optional): [redacted]	10 Exempt-interest dividends $	11 Specified private activity bond interest dividends $	
PAYER'S federal identification number [redacted]2 / number [redacted]	12 State / 13 State identification no.	14 State tax withheld $	

Form **1099-DIV** (keep for your records) Department of the Treasury - Internal Revenue Service

Service charge / commission paid by company (included in box 1a) = 10.18

0000.0264.01.01.00.1

Instructions for Recipient

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Account number. May show an account or other unique number the payer assigned to distinguish your account.

Box 1a. Shows total ordinary dividends that are taxable. Include this amount on line 9a of Form 1040 or 1040A. Also, report it on Schedule B (1040A or 1040), if required.

Box 1b. Shows the portion of the amount in box 1a that may be eligible for reduced capital gains rates. See Form 1040/1040A instructions for how to determine this amount. Report the eligible amount on line 9b, Form 1040 or 1040A.
The amount shown may be dividends a corporation paid directly to you as a participant (or beneficiary of a participant) in an employee stock ownership plan (ESOP). Report it as a dividend on your Form 1040/1040A but treat it as a plan distribution, not as investment income, for any other purpose.

Box 2a. Shows total capital gain distributions from a regulated investment company or real estate investment trust. Report the amounts shown in box 2a on Schedule D (Form 1040), line 13. But, if no amount is shown in boxes 2c–2d and your only capital gains and losses are capital gain distributions, you may be able to report the amounts shown in box 2a on line 13 of Form 1040 (line 10 of Form 1040A) rather than Schedule D. See the Form 1040/1040A instructions.

Box 2b. Shows the portion of the amount in box 2a that is unrecaptured section 1250 gain from certain depreciable real property. Report this amount on the Unrecaptured Section 1250 Gain Worksheet–Line 19 in the Schedule D instructions (Form 1040).

Box 2c. Shows the portion of the amount in box 2a that is section 1202 gain from certain small business stock that may be subject to an exclusion. See the Schedule D (Form 1040) instructions.

Box 2d. Shows 28% rate gain from sales or exchanges of collectibles. If required, use this amount when completing the 28% Rate Gain Worksheet–Line 18 in the instructions for Schedule D (Form 1040).

Box 3. Shows the part of the distribution that is nontaxable because it is a return of your cost (or other basis). You must reduce your cost (or other basis) by this amount for figuring gain or loss when you sell your stock. But if you get back all your cost (or other basis), report future distributions as capital gains. See Pub. 550, Investment Income and Expenses.

Box 4. Shows backup withholding. A payer must backup withhold on certain payments if you did not give your taxpayer identification number to the payer. See Form W-9, Request for Taxpayer Identification Number and Certification, for information on backup withholding. Include this amount on your income tax return as tax withheld.

Box 5. Shows your share of expenses of a nonpublicly offered regulated investment company, generally a nonpublicly offered mutual fund. If you file Form 1040, you may deduct these expenses on the "Other expenses" line on Schedule A (Form 1040) subject to the 2% limit. This amount is included in box 1a.

Box 6. Shows the foreign tax that you may be able to claim as a deduction or a credit on Form 1040. See the Form 1040 instructions.

Box 7. This box should be left blank if a regulated investment company reported the foreign tax shown in box 6.

Boxes 8 and 9. Shows cash and noncash liquidation distributions.

Box 10. Shows exempt-interest dividends from a mutual fund or other regulated investment company paid to you during the calendar year. Include this amount on line 8b of Form 1040 or 1040A as tax-exempt interest. This amount may be subject to backup withholding. See box 4.

Box 11. Shows exempt-interest dividends subject to the alternative minimum tax. This amount is included in box 10. See the Instructions for Form 6251.

Boxes 12-14. State income tax withheld reporting boxes.

Nominees. If this form includes amounts belonging to another person, you are considered a nominee recipient. You must file Form 1099-DIV (with a Form 1096) with the IRS for each of the other owners to show their share of the income, and you must furnish a Form 1099-DIV to each. A spouse is not required to file a nominee return to show amounts owned by the other spouse. See the 2014 General Instructions for Certain Information Returns.

Future developments. For the latest information about the developments related to Form 1099-DIV and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1099div.*

IMPORTANT TAX DOCUMENT

Vanguard
Contact Info: 800-662-2739

RECIPIENT'S identification number: [redacted]

ELIZABETH O'C LITTLE
[redacted]

2014 Form 1099-DIV
Dividends and Distributions

P.O. Box 2600
Valley Forge, PA 19482 - 2600

Copy B For Recipient
OMB No. [redacted]

Fund Name	PAYER'S federal identification number	Recipient Account number
500 INDEX FUND ADM	[redacted]	[redacted]

Total ordinary dividends (Box 1a)	Qualified dividends (Box 1b)	Total capital gain distr. (Box 2a)	Unrecap. Sec. 1250 gain (Box 2b)	Nondividend distributions (Box 3)	Federal income tax withheld (Box 4)	Foreign tax paid (Box 6)	Exempt-interest dividends (Box 10)	Specified private activity bond interest dividends (Box 11)	State (Box 12)	State identification no. (Box 13)	State tax withheld (Box 14)
454.34	454.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00			0.00

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. Please Note: Each specific fund name, NOT simply Vanguard, must be reported along with the related tax information on Form 1040, Schedule(s) B and D. This applies to Form 1099-DIV. CUSIP® is a trademark of American Bankers Association.

20150115 133747 TAXJDB08 102A T2 205706 128430

USAA

2014 SUPPLEMENTAL INFORMATION

ELIZABETH O C LITTLE

Account No. [redacted] Customer Service: 800-531-6347
Recipient ID No. [redacted] Payer's Fed ID Number: [redacted]

Note: This information is not reported to the IRS. It may assist you in tax return preparation.

To see an interactive guide to your National Financial Tax Statement visit mybrokerageinfo.com.

Details of 1099-DIV Transactions

Total Ordinary Dividends and Distributions Detail

Description, Symbol, CUSIP Date	1a Total Ordinary Dividends (includes 1b)	Dividend Distributions	Short-Term Capital Gain	1b Qualified Dividends	10 Exempt Interest Dividends	11 Specified Private Activity Bond Interest Dividends	6 Foreign Tax Paid
KEYCORP NEW, KEY, 493267108							
09/15/14	7.54			7.54			
12/15/14	7.58			7.58			
Subtotals	**15.12**			**15.12**			
STARBUCKS CORP, SBUX, 855244109							
11/28/14	71.47			71.47			
USAA MONEY MARKET, USAXX, 903288308							
08/29/14	0.21	0.21					
09/30/14	0.30	0.30					
10/31/14	0.32	0.32					
11/28/14	0.33	0.33					
12/09/14	0.05		0.05				
12/31/14	0.49	0.49					
Subtotals	**1.70**	**1.65**	**0.05**				
VANGUARD HEALTH CARE INVESTOR, VGHCX, 921908307							
12/22/14	636.12		146.23	491.89			
TOTALS	**726.41**	**1.65**	**146.28**	**578.48**	**0.00**	**0.00**	**0.0**

Short-term capital gain distributions reported on monthly/quarterly account statements are included in 1a Total Ordinary Dividends on Form 1099-DIV.

[redacted]

USAA

2014 SUPPLEMENTAL INFORMATION

ELIZABETH O C LITTLE

Account No. [redacted] Customer Service: 800-531-6347
Recipient ID No. [redacted] Payer's Fed ID Number: [redacted]

Note: This information is not reported to the IRS. It may assist you in tax return preparation.

Details of 1099-DIV Transactions

Total Capital Gains Distributions Detail

Description, Symbol, CUSIP Date	2a Total Capital Gain Distr. (m)	Capital Gain Distributions Subject to 15% Rate Gain (m)	2b Unrecaptured Section 1250 Gain	2c Section 1202 Gain	2d Collectibles (28%) Gain
USAA MONEY MARKET, USA[redacted]					
12/09/14	0.23	0.23			
VANGUARD HEALTH CARE INVESTOR, VGHCX, [redacted]					
12/22/14	3,352.37	3,352.37			
TOTALS	3,352.60	3,352.60	0.00	0.00	0.00

(m) **2a** Total Capital Gain includes **2b, 2c** and **2d**. The portion of Capital Gain Distributions subject to 15% Rate Gain is equal to 2a less amounts shown on 2b-2d.

Important Tax Return Document Enclosed.

[redacted]

USAA FEDERAL SAVINGS BANK
USAA INVESTMENT MANAGEMENT CO
2014

Detail for Dividends and Distributions

Account [redacted]

Security description	CUSIP and/or symbol	State	Date	Amount	Transaction type	Notes
KEYCORP NEW COM	[redacted] KEY		03/14/14	6.33	Qualified dividend	
			06/13/14	7.51	Qualified dividend	
	Dividends and Distributions:			13.84		
STARBUCKS CORP COM	[redacted] SBUX		02/21/14	57.46	Qualified dividend	
			05/23/14	57.67	Qualified dividend	
			08/22/14	57.87	Qualified dividend	
	Dividends and Distributions:			173.00		
USAA MONEY MARKET	[redacted] USAXX		01/31/14	0.34	Nonqualified dividend- money mkt	
			02/28/14	0.29	Nonqualified dividend- money mkt	
			03/31/14	0.30	Nonqualified dividend- money mkt	
			04/30/14	0.31	Nonqualified dividend- money mkt	
			05/30/14	0.33	Nonqualified dividend- money mkt	
			06/30/14	0.30	Nonqualified dividend- money mkt	
			07/31/14	0.32	Nonqualified dividend- money mkt	
			08/29/14	0.11	Nonqualified dividend- money mkt	
	Dividends and Distributions:			2.30		
	Total Dividends and Distributions:			**189.14**		

LEGISLATIVE ETHICS COMMISSION
STATE OF NEW YORK

MAIL: LEGISLATIVE OFFICE BUILDING • BOX 75 • ALBANY, NY 12247
LOCATION: ALFRED E. SMITH STATE OFFICE BUILDING • SUITE 1431 • ALBANY, NY 12247
PHONE: (518) 432-7837/7838 FAX: (518) 426-6850

SENATOR ANDREW J. LANZA
SENATE CO-CHAIR

ASSEMBLYMEMBER CHARLES D. LAVINE
ASSEMBLY CO-CHAIR

LISA P. REID
EXECUTIVE DIRECTOR/COUNSEL

RECEIVED
JUN 16 2015
BY
LEG. ETHICS COMM.

Question 17 AMENDMENT FORM
For Calendar Year 2014

Please complete the form. If a column is not applicable specify NONE.

17. List below the location, size, general nature, acquisition date, market value and percentage of ownership of any real property in which any vested or contingent interest in EXCESS of $1,000 is held by the reporting individual or the reporting individual's spouse. Also list real property owned for investment purposes by a corporation more than fifty percent (50%) of the stock of which is owned or controlled by the reporting individual or such individual's spouse. Do NOT list any real property which is the primary or secondary personal residence of the reporting individual or the reporting individual's spouse, except where there is a co-owner who is other than a relative. (see Table II)

Self/ Spouse/ Corporation	Location	Size	General Nature	Acquisition Date	Percentage of Ownership	Category of Market Value (In Table II)
5 Whiteface Ln, Lake Placid, NY.	condo unit 128			9/14/04	1/12 of unit	F

Name: Elizabeth O'C. Little

Title of Position: Senator

Address of Present Office: 310 LOB Albany, NY. 12247

Elizabeth O'C. Little
(Signature of reporting individual)

6-16-15
Date (month/day/year

TABLE II

Category A	none		
Category B	$ 1	to under	$ 1,000
Category C	$ 1,000	to under	$ 5,000
Category D	$ 5,000	to under	$ 20,000
Category E	$ 20,000	to under	$ 50,000
Category F	$ 50,000	to under	$ 75,000
Category G	$ 75,000	to under	$ 100,000
Category H	$ 100,000	to under	$ 150,000
Category I	$ 150,000	to under	$ 250,000
Category J	$ 250,000	to under	$ 500,000
Category K	$ 500,000	to under	$ 750,000
Category L	$ 750,000	to under	$1,000,000
Category M	$1,000,000	to under	$1,250,000
Category N	$1,250,000	to under	$1,500,000
Category O	$1,500,000	to under	$1,750,000
Category P	$1,750,000	to under	$2,000,000
Category Q	$2,000,000	to under	$2,250,000
Category R	$2,250,000	to under	$2,500,000
Category S	$2,500,000	to under	$2,750,000
Category T	$2,750,000	to under	$3,000,000
Category U	$3,000,000	to under	$3,250,000
Category V	$3,250,000	to under	$3,500,000
Category W	$3,500,000	to under	$3,750,000
Category X	$3,750,000	to under	$4,000,000
Category Y	$4,000,000	to under	$4,250,000
Category Z	$4,250,000	to under	$4,500,000
Category AA	$4,500,000	to under	$4,750,000
Category BB	$4,750,000	to under	$5,000,000
Category CC	$5,000,000	to under	$5,250,000
Category DD	$5,250,000	to under	$5,500,000
Category EE	$5,500,000	to under	$5,750,000
Category FF	$5,750,000	to under	$6,000,000
Category GG	$6,000,000	to under	$6,250,000
Category HH	$6,250,000	to under	$6,500,000
Category II	$6,500,000	to under	$6,750,000
Category JJ	$6,750,000	to under	$7,000,000
Category KK	$7,000,000	to under	$7,250,000
Category LL	$7,250,000	to under	$7,500,000
Category MM	$7,500,000	to under	$7,750,000
Category NN	$7,750,000	to under	$8,000,000
Category OO	$8,000,000	to under	$8,250,000
Category PP	$8,250,000	to under	$8,500,000
Category QQ	$8,500,000	to under	$8,750,000
Category RR	$8,750,000	to under	$9,000,000
Category SS	$9,000,000	to under	$9,250,000
Category TT	$9,250,000	to under	$9,500,000
Category UU	$9,500,000	or over	