13

This statement is to be filed in 2014

Financial information for calendar year 2013

Please type or print clearly. See instructions for assistance with this page.

| ECTION A. PERSONAL CO ast Name | | | First Name | | M |
|--|-------------------|--|---|--|----------------------------------|
| Drake | | | Michael | | |
| ECTION B. STATUS (Chec Candidate Write-in Candidate Elected to an office Appointed to an unexy term in elective office Public Official | | | orimary, special, or or name will appear Year | SEI | FILED P 2 9 2014 HICS COMMISSION |
| Voluntary Filer | | | 2014 | | |
| President ublic Entity you serve in 2 The Ohio State Universitublic Salary: | ty Start Date: | | End Date; | ☑ Hold ☐ Held | |
| Uncompensated Less than \$16,000 \$16,000 or more | Month Day | | Month Day | Year | |
| ECTION D. ADDITIONAL osition/Title (Example: co | ouncil member, sh | eriff, board member | | Seeking Hold Held | THIN SEP 29 A |
| ublic Salary: Uncompensated Less than \$16,000 \$16,000 or more | Start Date: | Year | End Date: | Year | 4MISSION |
| Walk-in Inter Office No Check | Filer has an | OR OHIO ETHICS COM nswered every requir ot answered these qu | | Date incomplete for returned to fit Date completed for | ler: |

| Source of Income | Service Provided | Amount |
|--|--|---|
| Bank of the West | Savings and checking accounts-inte | rest |
| Bank of the West IRA | Retirement savings | |
| Bank of the West Investment / Mutual Funds | Retirement savings | |
| Wells Fargo | Savings and checking accounts-inte | rest less than \$50 |
| University of California-Irvine | Employment-Chancellor | |
| See attached State of California Form 700 | | |
| SOURCES OF GIFTS - ALL FILERS MUST ANSWER THIS QUEST | אסו: | (For help, see instructions page |
| Source of Gift | Source | e of Gift |
| See attached State of California Form 700 | D | |
| | E | |
| E | F | |
| Husband/Wife Residing in Household Brenda Jackson Drake Dependent Children | , | (For help, see instructions pag |
| Brenda Jackson Drake | Depen | dent Children (For help, see instructions pag |
| Husband/Wife Residing in Household Brenda Jackson Drake Dependent Children N/A NAMES OF BUSINESSES - ALL FILERS MUST ANSWER THIS If you or anyone you listed in Question 3 owns or ope There are no business names that I am required to | QUESTION: erates a business, list the name of the busilist. | dent Children (For help, see instructions paginess. |
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| | | Condition |
|--|--|--|
| Creditor | | Creditor |
| A | D | * |
| В | E | |
| С | F | |
| DEBTORS OVER \$1,000 - ALL FILERS MUST ANSWER THIS QUESTION I have no debtors that I am required to list. | on: | (For help, see instructions page |
| Debtor | | Debtor |
| Α . | c | |
| В | D | |
| INVESTMENTS OVER \$1,000 - ALL FILERS MUST ANSWER THIS QUE I have no investments that I am required to list. Corporation, Trust, Business Trust, Partnership, or | | (For help, see instructions page 6 and Nature of Investment |
| A Bank of the West Mutual Fund/Investment Account | | Retirement |
| B Bank of the West IRA | | Retirement |
| Ç | | |
| D | + | |
| E | | |
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| F | Î | |
| F IF YOU NEED ADDITIONAL SPACE | CE, PLEASE ATTACH A S | EPARATE SHEET. |
| IF YOU NEED ADDITIONAL SPACE | VER THIS QUESTION: | |
| IF YOU NEED ADDITIONAL SPACE. OFFICES/FIDUCIARY RELATIONSHIPS - ALL FILERS MUST ANSW | ver this question: ired to list. | |
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| IF YOU NEED ADDITIONAL SPACE OFFICES/FIDUCIARY RELATIONSHIPS - ALL FILERS MUST ANSW I have no offices or fiduciary relationships that I am required to a comporation, Trust, Business Trust, Partnership, or A See attached State of California Form 700 and suppose and the control of the contr | PER THIS QUESTION: ired to list. Association Plemental list City, township official or empless than \$16,000000000000000000000000000000000000 | Office or Nature of Relationship s, school district, ESC, or sanitary district ployee serving in a position that is paid |

| NON-DISPUTED INFORMATION - ALL state employees, state officials and state board and commission members (except college and united are ROUGED to answer Question 12. All other filers should skip this question and go to question 13. Thave no information that I am required to list. (For help, see instruction Non-Disputed Information) Non-Disputed Information (For help, see instructions page 5 signing this statement: I swear or affirm that this statement and any additional attachments have been prepared or carefully reviewed be and constitute my complete, truthful, and correct disclosure of all required information, and that the address list page 11s a correct malling address. I acknowledge and understand that, among other potential violations and penalties, knowingly filing a false state a criminal misdemeanor of the first degree, in violation of Sections 102.02(b) and 2921.13(Al7) of the Revised Copunishable by a fine of not more than \$1,000, imprisonment of not more than six months, or both. I acknowledge and understand that filing a false statement may be grounds for removal from public office or dist from public employment pursuant to Sections 3.04 and 124.34 of the Revised Code. I acknowledge that, in 2013, I served in, or in 2014, I am serving in or a candidate for, the position indicated on puthis statement. Provided upon the provided of the statement of the statement of the statement of the statement. For a public employment pursuant to Sections 3.04 and 124.34 of the Revised Code. I acknowledge that, in 2013, I served in, or in 2014, I am serving in or a candidate for, the position indicated on puthis statement. For a public employment pursuant to Sections 3.04 and 124.34 of the Revised Code. I acknowledge that, in 2013, I served in, or in 2014, I am serving in or a candidate for, the position indicated on puthis statement. For a pursuant to Sections a subject to criminal in the statement to the public employment pursuant to Sections 3.04 and 124.34 of the Revised Code. I acknowledge that, in | |
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| I swear or affirm that this statement and any additional attachments have been prepared or carefully reviewed by and constitute my complete, truthful, and correct disclosure of all required information, and that the address list page 1 is a correct mailing address. I acknowledge and understand that, among other potential violations and penalties, knowingly filing a false state a criminal misdemeanor of the first degree, in violation of Sections 102.02(D) and 2921.13(A)(7) of the Revised Copunishable by a fine of not more than \$1,000, imprisonment of not more than six months, or both. I acknowledge and understand that filing a false statement may be grounds for removal from public office or district from public employment pursuant to Sections 3.04 and 124.34 of the Revised Code. I acknowledge that, in 2013, I served in, or in 2014, I am serving in or a candidate for, the position indicated on puthis statement. I acknowledge that, in 2013, I served in, or in 2014, I am serving in or a candidate for, the position indicated on puthis statement. I acknowledge that, in 2013, I served in, or in 2014, I am serving in or a candidate for, the position indicated on puthis statement. I acknowledge that, in 2013, I served in, or in 2014, I am serving in or a candidate for, the position indicated on puthis statement. I acknowledge that, in 2013, I served in, or in 2014, I am serving in or a candidate for, the position indicated on puthis statement. I acknowledge that, in 2013, I served in, or in 2014, I am serving in or a candidate for, the position indicated on puthis statement. I acknowledge that, in 2013, I served in, or in 2014, I am serving in or a candidate for, the position indicated on puthis statement. I acknowledge that, in 2013, I served in, or in 2014, I am serving in or a candidate for, the position of the Revised Code. I acknowledge that, in 2013, I served in, or in 2014, I am serving in or a candidate fo | and 1 |
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| from public employment pursuant to Sections 3.04 and 124.34 of the Revised Code. • Lacknowledge that, in 2013, I served in, or in 2014, I am serving in or a candidate for, the position indicated on pathis statement. For have any questions before signing this form, please contact the Ohio Ethics Commission at (614) 466-7090. If ore signing this statement, please review to make sure that you have answered each question you are required to answere nothing to list in response to any question, check the box indicating that you have nothing to list. If the response quired question is omitted, the Commission will return the statement to you as incomplete. Any person who fails to fill implete statement by the appropriate filing deadline will be assessed a late filing fee and may be subject to criminal publications for the propriate filing deadline will be assessed as late filing fee and may be subject to criminal publications for the propriate filing deadline will be assessed as late filing fee and may be subject to criminal publications for the propriate filing deadline will be assessed as late filing fee and may be subject to criminal publications for the propriate filing deadline will be assessed as late filing fee and may be subject to criminal publications for the propriate filing deadline will be assessed as late filing fee and may be subject to criminal publications for the propriate filing deadline will be assessed as late filing fee and may be subject to criminal publications for the propriate filing deadline will be assessed as late filing fee and may be subject to criminal publications. | |
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| whave nothing to list in response to any question, check the box indicating that you have nothing to list. If the response quired question is omitted, the Commission will return the statement to you as incomplete. Any person who fails to fil implete statement by the appropriate filing deadline will be assessed a late filing fee and may be subject to criminal publication of the completed statement to: Ohio Ethics Commission, 30 W. Spring St., L3, Columbus, OH 43215 If filing fee is: Enclosed (check or money order payable to "Ohio Ethics Commission") Submitted Online | |
| y filing fee is: Enclosed (check or money order payable to "Ohio Ethics Commission") Submitted Online | e to ar e a |
| Enclosed (check or money order payable to "Ohio Ethics Commission") Submitted Online | - |
| My public agency is required or has agreed to pay my filing fee. | |
| A // | s page |
| OUR SIGNATURE IS REQUIRED HERE: Multan Date: 9[22] | s page |

2013 Offices and Fiduciary Relationships

Michael V. Drake, MD

| Corporation/Not for Profit | <u>Relationship</u> | | |
|--|---------------------|--|--|
| Association of American Universities (AAU) | Board Member | | |
| Blue Ridge Academic Health Group | Board Member | | |
| University of California Global Health Institute | Board Member | | |
| California HealthCare Foundation | Board Member | | |
| California HealthCare Institute | Board Member | | |
| The Commonwealth Fund | Board Member | | |
| NCAA Division I | Board Member | | |



STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received

Please type or print in ink.

| | FILER | (LAST) | (FIRST) | (MIDDLE) |
|------------|---|-----------------------------------|-----------------------------------|---|
|)rake | | Mic | chael | V. |
| Offic | ce, Agency, or Court | | | |
| Agen | cy Name (Do not use acron | yms) | | |
| | versity of Catifornia | | | |
| | ion, Board, Department, Distr | ict, if applicable | Your Position | |
| Irvir | ne Campus | | Chancellor | |
| ► If | filling for multiple positions, lis | st below or on an attachment. (Oc | nol use acronyms) | |
| Agen | жу: | | Position: | |
| . Juri | isdiction of Office (c | heck at least one box) | | |
| ⊘ S | itate | | ☐ Judge or Court | Commissioner (Statewide Jurisdiction) |
| | Aulti-County | | County of | <u> </u> |
| | lity of | | Other | |
| . Тур | e of Statement (Check | k at least one box) | | |
| Z) | December 31, 2013 | is January 1, 2013, through | Leaving Office (Check one) | :: Date Left |
| | -or- The period covered December 31, 2013 | is, th | rough O The period leaving office | covered is Jenuary 1, 2013, through the date of £. |
| | Assuming Office: Date ass | итес | | covered is |
| | Candidate: Election year | and office so | ought, if different than Part 1: | - |
| Sch | nedule Summary | | | |
| Chec | ck applicable schedules or | "None." | Total number of pages in | ncluding this cover page: |
| | Schedule A-1 - Investments | - schedule attached | ✓ Schedule C - Income | e, Loans, & Business Positions - schedule attached |
| | Schedule A-2 - Investments | | | e – Gifts – schedule attached |
| _ | | | Schedule E - Income | e - Gifts - Travel Payments - schedule ettached |
| _ | Schedule B - Real Property | - schedule attached | | |
| | Schedule B - Real Property | -or- | le interests on any schedula | |
| <u> </u> | Schedule B - Real Property | -or- | | |

FPPC Form 700 (2013/2014)

FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

| Name Michael V. Drake | CALIFORM | IIA FO | RM 7 | 00 |
|------------------------|------------|--------|------|-------|
| | | | | SSION |
| Michael V. Drake | Name | | | |
| | Michael V. | Drake | | |

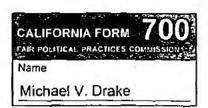
| | 1 INCOME RECEIVED |
|---|---|
| NAME OF SOURCE OF INCOME | NAME OF SOURCE OF INCOME |
| Gilead Sciences | Glaucoma Research and Education Group |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| 333 Lakeside Drive, Foster City CA BUSINESS ACTIVITY, IF ANY, OF SOURCE | 55 Stevenson Street, San Francisco BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| | IEI |
| medical research and development YOUR BUSINESS POSITION | non-profit research and education YOUR BUSINESS POSITION |
| Member, Health Policy Advisory Board | Speaker |
| | |
| GROSS INCOME RECEIVED | GROSS INCOME RECEIVED |
| ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000 ☑ \$10,001 - \$100,000 ☐ OVER \$100,000 | |
| A 110'001 - 2100'000 | S10,001 - \$100,000 QVER \$100,000 |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED | CONSIDERATION FOR WHICH INCOME WAS RECEIVED |
| Salary Spouse's or registered domestic partner's income | Safary Spouse's or registered domestic partner's income |
| Loan repayment Pannership | Loan repayment Partnership |
| Sale of | Sale of |
| (Real property, car, boat, etc.) | (Real property, car, boat, etc.) |
| Commission or Rental Income, as each source of \$10,000 or more | Commission or Rental Income, ass each source of \$10,000 or more |
| Other Board fees (Oescribe) | Other Speaking fee |
| You are not required to report loans from commercial retail installment or credit card transaction, made in the | lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to status. Personal loans and loans received not in a lender's |
| You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official section. | lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to status. Personal loans and loans received not in a lender's |
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SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

| CALIFORNIA FORM | 700 |
|-----------------------------|----------|
| FAIR POLITICAL PRACTICES CO | worszum. |
| Name | |
| Michael V. Drake | |
| | |

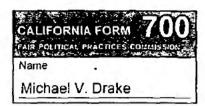
| IAME OF SOURCE OF INCOME | NAME OF SOURCE OF INCOME |
|--|---|
| Bank of the West / BancWest | California HealthCare Foundation |
| DDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| 180 Montgomery Street, San Francisco | 1438 Webster Street, Oakland |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| banking | пол-for-profit health promotion |
| OUR BUSINESS POSITION | YOUR BUSINESS POSITION |
| Member, Board of Directors | Member, Board of Directors |
| ROSS INCOME RECEIVED | GROSS INCOME RECEIVED |
| \$500 - \$1,000 \$1,001 - \$50,000 | 5500 - \$1,000 |
| \$10,001 + \$100,000 VER \$100,000 | Ø \$10,001 - \$100,000 ☐ OVER \$100,000 |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED | CONSIDERATION FOR WHICH INCOME WAS RECEIVED |
| Salary Spouse's or registered domestic partner's income | Sa'ary Spouse's or registered correstic partner's income |
| Losn repayment Pertnership | Loan repayment Partnership |
| Sale of | Sale of |
| (Real property, dar, boal, etc.) | (Real property car, boat, etc.) |
| Commission or Rental Income, as each source of \$10,000 or more | Commission or Rental Income, ast each source of \$10,000 or more |
| | |
| | |
| Other Board fees | Other Board fees |
| Other Board fees (Describe) | Other Board fees (Describe) |
| Other Board fees (Cesobe) | Other Board fees (Describe) |
| Other Board fees (Describe) 32*LOANS: RECEIVED OR OUTSTANDING: DURING THE REPORTING F | Interest. |
| Section of the control of the contro | I lending institutions, or any indebtedness created as part the lender's regular course of business on terms available status. Personal loans and loans received not in a lender' |
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| You are not required to report loans from commercia retail installment or credit card transaction, made in the members of the public without regard to your official regular course of business must be disclosed as followante of Lender- ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$1,001 - \$1,000 | I lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available status. Personal loans and loans received not in a lender ows: INTEREST PATE TERM (Months/Years) None SECURITY FOR LOAN Real Property Street eddress Coy |

SCHEDULE D Income - Gifts



| ► NAME OF SOURCE (Not an Acronym |) | ► NAME OF SOURCE (Not an Acronym) | | |
|-----------------------------------|------------------------|---|-------------------------|--|
| John Croul | | Hazem Chehabi | • (4) | |
| ADDRESS (Business Address Accepta | tie) | ADDRESS (Business Address Acceptable) | | |
| PO Box 1287, Santa Ana, C | CA, 92702 | 1605 Avocado, Suite 203, Newport Bea | | |
| BUSINESS ACTIVITY, IF ANY, OF SO | URCE | BUSINESS ACTIVITY, IF ANY, OF SOL | IRCE | |
| | | UCI Foundation Trustee | | |
| DATE (mm/dd/yy) VALUE | DESCRIPTION OF GIFT(S) | DATE (mm/dd/yy) VALUE | DESCRIPTION OF GIFT(S) | |
| 02,21,13 , 120.00 | Business Dinner | 02,21,13 \$ 40.00 | Business Lunch | |
| | (incl. Mrs. Drake) | 12,12,13 \$ 40.00 | Business Lunch | |
| s | | \\\\ | | |
| ► NAME OF SOURCE (Not an Acronym |) | ► NAME OF SOURCE (Not an Acronym) | | |
| Charles Martin | | James Mazzo | | |
| ADDRESS (Business Address Accepta | ble) | ADDRESS (Business Address Acceptate | ole) | |
| 660 Newport Center Dr., #1 | 220, Newport Beach, CA | 32 Discovery, Suite 200, Irvi | ine, CA 92618 | |
| BUSINESS ACTIVITY, IF ANY, OF SO | URCE | BUSINESS ACTIVITY, IF ANY, OF SOL | JRCE | |
| UCI Foundation Trustee | | UCI Foundation Trustee | | |
| DATE (mm/dd/yy) VALUE | DESCRIPTION OF GIFT(S) | OATE (mm/dxl/yy) VALUE | DESCRIPTION OF GIFT(S) | |
| 02,19,13 , 100.00 | Business Dinner | 04,02,13 \$ 160.00 | Dinner(incl.Mrs.Drake) | |
| 07,11,13 \$ 200.00 | Dinner(incl.Mrs.Drake) | | | |
| 07,23,13 100.00 | Business Dinner | | | |
| NAME OF SOURCE (No! an Acronym |) | NAME OF SOURCE (Not an Acronym) | | |
| Geoffrey Stack | | James Swinden | | |
| ADDRESS (Business Address Accepta | sble) | ADDRESS (Business Address Acceptal | bie) | |
| 18802 Bardeen Ave., Irvins | e, CA 92612 | 18881 Von Karman Ave., # | 1275, Irvine, CA, 92612 | |
| BUSINESS ACTIVITY, IF ANY, OF SO | URCE | BUSINESS ACTIVITY, IF ANY, OF SOLUCI Foundation Trustee | JRCE | |
| DATE (mm/dd/yy) VALUE | DESCRIPTION OF GIFT(S) | DATE (mm/dd/yy) VALUE | DESCRIPTION OF GIFT(S) | |
| 08,14,13 , 100.00 | Dinner(incl.Mrs.Drake) | 03,22,13 , 100.00 | Dinner(incl.Mrs.Drake) | |
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| Comments: | <u> </u> | | | |

SCHEDULE D Income - Gifts



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| Thomas Tierne | | | ► NAME OF SOURCE | livet an Acronym | y |
| ADDRESS (Business | | | ADDOTOS (Diministra | | 100 |
| 2802 Dow Ave. | | | ADDRESS (Business Address Acceptable) | | |
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| UCI Foundation | | NCE | BUSINESS ACTIVITY | T. IF ANY, OF SU | oukce |
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| 10 , 03 , 13 | 60.00 | Business Dinner | | s | |
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| Akre | Dreyfus | Loomis Sayles | Schroder |
| Alger | DWS | Managers | ScoutSelected |
| Allianz | Emerald | Manning & Napier | Smead |
| American Beacon | Federated | Matthews | SSgA |
| American Century | Fidelity | Merger | Stratton |
| Ariel | FMI | Metropolitan | TCW Galileo |
| Artio | FPA | Morgan Stanley | Third Avenue |
| Artisan | Gabelli | Muhlenkamp | Thomas White |
| Aston | Glenmede | Munder | TIAA CREF |
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| Baron | Guinness Atkinson | Nicholas | Touchstone |
| BlackRock | Guggenheim | Northern | T. Rowe Price |
| ВМО | Harbor | Oak | Turner |
| Brandes | Harding Loevner | Oakmark | Value Line |
| Brown | Heartland | OCM Gold | Vanguard |
| Buffalo | Henderson | Osterweis | Wall Street |
| Burnham | Hennessy | Paradigm | Wasatch |
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| Capital Advisors | ICON | Permanent | Wells Fargo |
| Causeway | Intrepid | Perritt | Advantage |
| Chase | Jacob | PIA | Westcore |
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| CNI/Rochdale | James | PIMCO | Westport |
| CNI/Rochdale Cohen & Steers | James Janus | PIMCO PRIMECAP | Westport William Blair |
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Mutual Funds or ETFs--Which to Choose?

Traditional open-end mutual funds have long been the staple of many investors' portfolios. Over the past 20 years, however, an alternative has emerged--exchange-traded funds. While ETFs have been around since the early 1990s, their popularity has soared in recent years, and they are being used by more and more brokers and financial advisors. In addition, ETFs are popping up in company retirement plans.

ETFs, like conventional mutual funds, hold a basket of securities (stocks or bonds). The primary difference is how the investor buys and sells his or her shares. Whereas investors in conventional mutual funds buy their shares from a fund company and sell them back to the fund shop when they want to redeem, investors buying or selling ETF shares must trade with other investors in the market, much as they would do if they want to buy or sell shares of Microsoft. For that reason, individual investors must use a broker when they want to buy and sell ETF shares.

As the name suggests, exchange-traded funds are priced and traded on an exchange (for example, NYSE or Nasdaq) throughout the day just like stocks. In contrast, traditional mutual funds' prices are set once a day (usually 4 p.m. Eastern) and investors must place their orders before that time in order to get that day's price. Also unlike mutual funds, you can do just about anything with ETF shares that you can with a stock, including setting market and limit orders, shorting, and buying on margin.

So, how do you tell whether an ETF or a conventional mutual fund is best for you? Here are some things to consider:

What You Want to Invest In

ETF providers have increasingly aimed to provide funds for investors looking to invest in a narrow market segment. The ETF universe is flush with funds that focus on a single market sector, industry, or geographic region. Say you favor indexing and want to own a specific corner of the market such as biotech. There may not be many index mutual funds that track those sectors--but there are ETFs that do. Also, there are many more ETFs than funds that track single foreign countries. Exchange-traded funds offer investors a way to invest in a corner of the market without having to load up on just one or two individual stocks (plus, it's more cost-efficient in terms of brokerage commissions).

However, it's also worth noting that narrowly focused funds--whether ETFs or conventional offerings--can be too hot to handle for many investors. That's because investors are often inclined to buy and sell narrowly focused funds at inopportune times, as evidenced by Morningstar Investor Return statistics.

That's not to say that focused ETFs can't be used intelligently, however. For example, ETFs may trade at discounts to the aggregate value of their holdings. If you're inclined to invest in more-focused ETFs, it often makes sense to be a contrarian, not to chase what's been hot recently.

Taxes

ETFs are also structured to shield investors from capital gains better than conventional funds. Currently, nearly all ETFs are index funds, so they typically trade less than most actively



managed funds and should generate fewer taxable capital gains. Also, because most investors buy and sell ETF shares with other investors on an exchange, the ETF manager doesn't have to worry about selling holdings--thereby triggering capital gains--to meet investor redemptions. Moreover, because the big institutions can make share redemptions "in-kind" (rather than redeem shares for cash, the ETF gives the institution a basket of stocks equal in value to the share redemption), ETFs can unload their lowest-cost-basis stocks in the portfolio, thereby reducing their capital gains exposure.

Costs

Because ETFs don't have to manage hundreds of customer accounts or staff call centers, they have lower overhead charges that translate into lower expense ratios. However, you will pay brokerage commissions to buy and sell ETF shares, and the costs of rapid--or even occasional-trading can more than offset the initial advantage of an ETF's lower expense ratio. For those reasons, an ETF will be the most cost-effective choice for those who use discount brokers, invest a large lump sum of money, and are willing to hold the investment for the long term. For others, an exchange-traded fund may not have a big cost advantage over a plain-vanilla, low-cost index fund.

Special Situations

ETFs may also be a suitable option for areas of the market where traditional mutual fund offerings are scarce, expensive, or run by managers with little experience. As in choosing traditional index mutual funds, it's best to evaluate an ETF's fees and the usefulness of the benchmark it tracks before buying in.

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