\$	Yes	nsactions, or liabilities of a spouse or dependent child with the Committee on Standards of Official Conduct.	d" income, tran first consulted	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Standards of Official Conduct.
S S	Yes	s of Official Conduct and certain other "excepted tr	e on Standard	TRUSTS —Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?
S	ANSWER EACH OF THESE QUESTIONS	1	T INFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
the onse.	tion in this part must be answered and the schedule attached for each "Yes" response	Each question in this part must be answered and the appropriate schedule attached for each "Yes" respons	≥ ×	V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.
No X	Yes	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	o No	IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.
⊗	before the date Yes	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	No No	III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.
<u>8</u>	eceive any the reporting Yes	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	₹ X	II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.
×	ceive any Jaling more Yes	VI. Did you, your spouse, or a dependent child receive any reportable git in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI.	× ×	I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.
. :		SE QUESTIONS	OF THES	PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS
assessed es more	A \$200 penalty shall be assessed against anyone who files more than 30 days late.	Employing Office: Termination Date:	Officer or Employee	Filer Status Member of the U.S. State: Mo Status House of Representatives District: 2 Report Type Annual (May 17, 2010) Amendment
ee olaa 12: 10	2010 MAY 13 PM 12: 10 OFFICE OF THE CLASS	Daytime Telephone: 202 225 256 l	Daytime	Name: WILLIAM TODO AKIN
Page 1 of <u>5</u>	HAND Page	Form A For use by Members, officers, and employees	MENT	JNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name WILLIAM TODO AKIN

TODO AKIN Page

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	of

Continuation Sheet (if needed)		Total Inc.		
BLOCK A Asset and/or income Source		вьоск с Туре	BLOCK D Amount of Income	BLOCK E
	Value of Asset	of Income		
SP,	ABCDEFGHIJKL			ָּט.
DC,	00 ,000 0,000			πŷπ
5	0,000 00,000 250,000 500,000 ,000,0 \$5,000 \$25,00	NS LIND	000,000	
	- \$15 1 - \$5 1 - \$1 01 - \$ 01 - \$ 01 - \$,001 - ,001 -	EST AL GA	\$1,000 - \$2,50 - \$5,00 - \$15,00 1 - \$50,00 1 - \$100 01 - \$1,00	
	None \$1 - \$ \$1,001 \$15,00 \$50,00 \$100,0 \$250,0 \$1,000 \$5,000	Over \$ NONE DIVIDI RENT INTER CAPIT EXCE	\$100,0 \$1,000	
ST AT+T	*	ж.	X	
		X	*	
T DU PONT	X	X	×	
TI GENERAL ELECTRIC	x	×	×	
TT GOOD YEAR TIME	x	X	*	
IT INTERNATIONAL POPER	×	×	X	
ST UP MOREN CHOSE	×	×		
	×	*	*	
UT MORCK	X		X	
	X	X		
TT VERIBOR	X	X	*	
ST GENERAL WOTOTLS	X	*	X	

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Rona Tra	ROTH IRA DWS Dreman	IRA - Aim Weingarten	IRA - Aim Weingarten	MARRICCINCH RETIREMENT	1	, Examples:	SP, SP Mega Corp. Stock	Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by you or your spouse's child, parent, or sibling; any deposits totalling \$5,000 or less in personal savings accounts; and any financial interest in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	each asset in the account that exceeds the reporting threshold. For retirement plans that are not self-directed, name the institution holding the account and its value at the end of the reporting period. For an active business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. For additional information, see the instruction booklet.	names of stocks and mutual funds (do not use ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) that are self directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value and income information on	which generated more than \$200 in "unearned" income during the year. For rental property or land, provide a complete address. Provide full	duction of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other asset or sources of income	Identify (a) each asset held for investment or pro-	Asset and/or Income Source	BLOCK A
*	*	×	×	X	×	Indefinite	×	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 Over \$50,000,000	P B C C T C T C T T C T T T T T T T T T T	year and is included only because it generated income, the value should be "None."	please specify the method used.	year. If you use a valuat other than fair market val	Indicate value of asset at close of	Value of Asset	BLOCK B
				Anne 1974	×	Royalties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify: For Example, Partnership	p Income or Farm Income)	dends and interest, even ted, should be listed as in ted, should be listed as in ted, "None" if asset did not any income during calendary income durin	all other assets <i>including all IRAs</i> , indicate the type of income by checking the appropriate box below.	retirement plans or accounts that do not allow you to choose specific investments, you may write "NA." For	Check all columns that apply. For	Type of Income	вгоск с
X	X	X	x	X	×	×	×	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000	- = = = = = = = = = = = = = = = = = = =	vested, should be listed as income. Check "None" if no income was earned or generated.	indicate the category of income by checking the appropriate box below. Dividends and interest, even if rein-		For retirement plans or accounts that do	Amount of Income	BLOCK D
							S (partial)	example.	portion of an asset is sold, please indicate as follows: (S) (partial)	exceeding \$1,000 in reporting year.	sales (S), or exchanges (E)	asset had purchases (P),	Indicate if the	Transaction	BLOCK E

SCHEDULE IV- TRANSACTIONS

Name WILLIAM TOO AKIN

Page 4 of 5

TT VERISON (PARTIAL)	(PARTIAL)	(PARTIAL)	ST LSI CORP (PARTIAL) X	37 JP MORGAN (PARTIAL) X	TT INTERNATIONAL PAPER(R) X	UT GOOD YEAR TIRK (PARTIAL) X	JT GENERAL ELECTRIC (MM) X	JT DU PONT (PARTAL) X	TT BRISTOL MAS SOUISB(PARK) X	TT AT+T (PAPTIAL SALES) X	SP Example: Mega Coporation Common Stock (partial sale) X	SP, DC, JT Asset	ates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below. Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.		Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that	
= :	_							6-1	6-1	কূ	10-1		Check Box if (Gain Exceede Mont appli	d \$200		•
7-09			×	×	= X	×	ء <u>×</u>	≈-8 ×	6-12-09 >	-i2-69 X)-12-09		Quarterly, Monthly, or Bi-weekly, if applicable \$1,001	Y/YR)	Date	•
X	XX	\ \ \			^		^	_	X	^	×		\$15,000 \$15,001- \$50,000	B C	-	
	+												\$50,000 \$50,001- \$100,000	o o	Αn	
	 												\$100,001- \$250,000	ш	Amount of Transaction	
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													\$500,001- \$1,000,000	മ	Trans	
													\$1,000,001- \$5,000,000	I	sacti	
													\$5,000,001- \$25,000,000	_	2	
													\$25,000,001- \$50,000,000	ر		
													Over		┥	

SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$335 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor

or were paid by you and reimbursed by the sponsor. **Exclude:** Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to

a spouse or dependent child that is totally independent of his or her relationship to you.

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							THE HERITAGE FOUNDATION	Roycroft Corporation	Chicago Chamber of Commerce	Source
							Feb 5-7	Aug. 6–11	Mar. 2	Date(s)
							DC-BAHIMORE-DC	DC—Los Angeles—Cleveland	DC—Chicago—DC	City of Departure — Destination — City of Return
							۲	Y	z	Lodging?
							<u>۲</u>	Y	Z	Food? (Y/N)
1							γ	Υ	Z	Was a Family Member Included? (Y/N)
							None	2 Days	None	Number of days not at sponsor's expense