

UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT

FORM A

For use by Members, officers, and employees

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LEGISLATIVE RESOURCE CENTER
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MAY 14 PM 1:37

Dean Arthur Heller
(Full Name)

(202) 225-6155
(Daytime Telephone)

U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC

Filer ☒ Member of the U.S. House of Representatives
State: NV District: 02

Officer Or Employee
Employing Office:

Report Type ☒ Annual (May 15)

Amendment

☐ Termination

Termination Date:

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

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?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II. If yes, complete and attach Schedule I. 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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. If yes, complete and attach Schedule VI. 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)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
III. If yes, complete and attach Schedule II. 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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VIII. If yes, complete and attach Schedule VII. Did you hold any reportable positions on or before the date of filing in the current calendar year?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
IV. If yes, complete and attach Schedule III. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. If yes, complete and attach Schedule VIII. Did you have any reportable agreement or arrangement with an outside entity?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
V. If yes, complete and attach Schedule IV. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	X. If yes, complete and attach Schedule IX.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Exemptions- 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.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

SCHEDULE 1 - EARNED INCOME

Name Dean Arthur Heller

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount
Carson School District	Spouse Salary	\$2,058

SCHEDULE II - PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

Name

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List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. A green envelope for transmitting the list is included in each Member's filing package. Employees may request a green envelope from the Clerk or use a plain envelope that is appropriately labeled.

Source	Activity	Date	Amount
N/A			

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Dean Arthur Heller

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BLOCK A					BLOCK B		BLOCK C		BLOCK D		BLOCK E
Asset and/or Income Source					Year-End Value of Asset		Type of Income		Amount of Income		Transaction
<p>Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other assets or sources of income which generated more than \$200 in "unearned" income during the year. For rental property or land, provide a complete address. Provide full 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 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.</p> <p>Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent or sibling; any deposits totaling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.</p> <p>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.</p>					<p>at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."</p>		<p>Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA". For all other assets including all IRAs, indicate the type of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if asset did not generate any income during the calendar year.</p>		<p>For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, including all IRAs, indicate the category of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" if no income was earned or generated.</p>		<p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
SP	AD Clark Family Ltd Pshp % of Rental Property, see attached.				\$250,001 - \$500,000		RENT		NONE		
DC	Bank of America				\$50,001 - \$100,000		None/INTEREST		\$201 - \$1,000		
JT	Bank of America				\$1 - \$1,000		INTEREST		\$1 - \$200		
SP	Brombach Family Ltd Pshp % of, see attached.				\$1,000,001 - \$5,000,000		INTEREST		\$50,001 - \$100,000		
	Loan for Congress				\$15,001 - \$50,000		NONE		NONE		
DC	Mass Mutual Life Ins				\$15,001 - \$50,000		NONE		NONE		

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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	Mass Mutual Life Ins	\$50,001 - \$100,000	NONE	NONE
SP	Mass Mutual Life Ins	\$15,001 - \$50,000	NONE	NONE
	State of Nevada Retirement	\$50,001 - \$100,000	NONE	NONE

SCHEDULE IV - TRANSACTIONS

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Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
SP	Brombach Family Ltd Pshp (See attached)	S(part)	Yes	various	\$250,001 - \$500,000
SP	Brombach Family Ltd Pshp (See attached)	P	N/A	various	\$250,001 - \$500,000

SCHEDULE V - LIABILITIES

Name

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability
	N/A		

SCHEDULE VI - GIFTS

Name

Dean Arthur Heller

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Report the source, a brief description, and the value of all gifts totaling more than \$335 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$134 or less need not be added towards the \$335 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
N/A		

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name

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Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling 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 reimbursed or paid directly 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.

Source	Date(s)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
N/A			Y	Y	Y	

SCHEDULE VII - POSITIONS

Name

Dean Arthur Heller

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Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
N/A	

SCHEDULE IX - AGREEMENTS

Name

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Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
N/A		

SCHEDULE III ATTACHMENT
BROMBACH FAMILY LP
12/31/2009

DEAN HELLER

		ASSET VALUE	ESTIMATED INCOME
CMA MONEY FUND/CASH		\$29,844	
ACCRUED INTEREST		\$15,472	-
MUNI BONDS			
(NEW)	BONITA CALIF UNI SCH	\$49,319	\$1,935
(NEW)	METROPOLITAN WTR DT SO	\$53,034	\$2,419
(NEW)	PERALTA CALIF CMNTY	\$68,488	\$2,488
	CALIFORNIA ST ECONOMIC	\$49,377	\$2,419
	BAKERSFIELD CA WASTEWTR	\$42,688	\$2,073
	LOS ANGELES CO CA CTFS	\$64,758	\$3,265
	LOS ANGELES CA MTA SLS	\$52,099	\$2,419
	BENICIA CA UNI SCH DIST	\$30,390	\$1,161
	LOS ANGELES CA CMNTY CLG	\$73,970	\$3,455
	CALIFORNIA EDL FAC AUTH	\$89,306	\$4,146
	SAN FRAN CA CY-CO PUB	\$89,593	\$4,146
	CALIFORNIA ST DPT WTR RES PSR SER A OID	\$38,385	\$1,771
	SAN FRANCISCO CA CY-CO	\$74,747	\$3,455
	CALIFORNIA ST ECONOMIC	\$49,185	\$2,249
	CALIFORNIA ST ECONOMIC	\$44,417	\$2,104
	SAN JOAQUIN DELTA CCD	\$75,180	\$2,764
	ORANGE CNTY CA SANTN	\$50,933	\$2,246
	UNIVERSITY CA REVS GEN	\$39,243	\$1,728
	BVRLY HLLS CA PUB FN AT	\$60,801	\$2,902
	CENTRAL COAST WTR AUTH	\$77,481	\$3,455
(NEW)	METROPOLITAN WTR DT SO	\$32,389	\$1,189
	SAN DIEGO CA UNI SCH	\$80,276	\$3,455
	LOMPOC CA UNI SCH DIST	\$22,739	\$933
(NEW)	CALIFORNIA ST PUB WKS	\$38,220	\$1,728
	SACRAMENTO CA MUN UTIL	\$39,654	\$1,728
	SAN DIEGO CO CA WTR AT	\$92,495	\$4,146
(NEW)	MESA CALIF CONS WTR DIST	\$60,435	\$2,729
	MONTEREY PENINSULA CA	\$44,347	\$1,866
	SANFRANCISCO CA CMNTY	\$83,793	\$3,939
		\$1,713,058	\$74,313

**SCHEDULE III ATTACHMENT
AD CLARK FAMILY LTD PARTNERSHIP
12/31/2009**

DEAN HELLER

ADDRESS OF PROPERTY OWNED

12901 WEST JEFFERSON BLVD
LOS ANGELES CALIFORNIA

ESTIMATED VALUE OF PROPERTY	\$414,600
RENTAL GROSS INCOME	\$0
RENTAL NET INCOME (LOSS)	(\$6,045)

*Net results at a loss for 2009 due to the property being vacant.

SCHEDULE IV ATTACHMENT

DEAN HELLER

BROMBACH FAMILY LP

12/31/2009

PROCEEDS

LOS ANGELES CA UNI SCH	7/1/2009	\$104,687
MONTEREY CNTY CA COP	8/3/2009	\$69,100
PUERTO RICO MUN FIN AGY	8/3/2009	\$62,812
SAN MATEO CA UN HIGH SCH	11/20/2009	\$73,717

TOTAL

\$310,316

PURCHASES

	DATE PUCHASED	ASSET VALUE	ESTIMATED INCOME
MESA CALIF CONS WTR DIST	7/23/2009	\$60,435	\$2,729
METROPOLITAN WTR DT SO	7/31/2009	\$53,034	\$2,419
PERALTA CALIF COUNTY	8/26/2009	\$68,488	\$2,488
BONITA CALIF UNI SCH	9/11/2009	\$49,319	\$1,935
CALIFORNIA ST PUB WKS	11/24/2009	\$38,220	\$1,728
METROPOLITAN WTR DT SO	12/2/2009	\$32,389	\$1,189

TOTAL

\$301,885

\$12,488

EXCHANGES

OUT	CALIFORNIA ST ECONOMIC (Amt - 600,000)	3/9/2006	\$90,957	\$4,353
IN	CALIFORNIA ST ECONOMIC (Amt - 310,000)	3/9/2006	\$49,289	\$2,249
	CALIFORNIA ST ECONOMIC (Amt - 290,000)	3/9/2006	\$44,504	\$2,104