

UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

FORM A
For use by Members, officers, and employees

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Clifford B. Stearns

(Full Name)

(202)-225-5744

(Daytime Telephone)

Filer Status

☒ Member of the U.S. House of Representatives
State: FL District: 06

☐ Officer Or Employee
Employing Office:

Report Type

☒ Annual (May 15)

☐ Amendment

☐ Termination

Termination Date:

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? If yes, complete and attach Schedule I.	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)? If yes, complete and attach Schedule VI.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	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.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	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.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
IV. Did you, your spouse, or 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.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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.	Yes <input checked="" type="checkbox"/> No <input 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-- Detail regarding "Qualified Blind Trusts" approved by the Committee on Ethics 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 Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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U.S. (Office Use Only)

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

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SCHEDULE I - EARNED INCOME

Name Clifford B. Stearns

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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
College of Central Florida	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E 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 reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use ticker symbols.)</p> <p>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 for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.</p> <p>For rental or other real property held for investment, provide a complete address.</p> <p>For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.</p> <p>Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any partnership holding an 80% or more in a partnership; Alarion or SP.</p>				
Alarion Bank Stock	\$1,001 - \$15,000	None	NONE	
American Express Company	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
Bank of America Checking Account	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
SP Bank of America Savings	\$1,001 - \$15,000	None	NONE	
CD Alarion Bank	None	None	NONE	S (Gift)
Congress Federal Credit Union Checking Account	\$1,001 - \$15,000	None	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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First Silver Springs, Inc (a 100% owned C-Corporation in Silver Springs, FL: Cash, other receivables, investments and debt)

SP	Florida Retirement System (Vested in 2006)	\$250,001 - \$500,000	N/A	NONE	
	Gateway Bank CD	\$50,001 - \$100,000	INTEREST	NONE	P
	Grantham University Common Stock	\$15,001 - \$50,000	None	NONE	
	Harris Corporation	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
SP	ING 403(b) Plan: Evergreen Special Values Fund - A	\$1,001 - \$15,000	DIVIDENDS & CAPITAL GAINS	\$201 - \$1,000	P
SP	ING 403(b) Plan: ING Pioneer Eq Inc Port - Instl	\$1,001 - \$15,000	DIVIDENDS & CAPITAL GAINS	\$1,001 - \$2,500	P
SP	ING 403(b) Plan: ING VP Money Market Portfolio - 1	\$15,001 - \$50,000	None	NONE	P
SP	ING 403(b) Plan: Oppenheimer Developing Mkts Fund - A	\$1,001 - \$15,000	DIVIDENDS & CAPITAL GAINS	\$1,001 - \$2,500	P

SP	ING 403(b) Plan: Wanger Select	\$1,001 - \$15,000	DIVIDENDS & CAPITAL GAINS	\$201 - \$1,000	P
SP	ING 403(b) Plan: Fixed Plus Account II	\$1,001 - \$15,000	DIVIDENDS & CAPITAL GAINS	\$1 - \$200	P
SP	ING 403(b) Plan: ING Pioneer High Yield Port-Init	\$15,001 - \$50,000	DIVIDENDS & CAPITAL GAINS	\$2,501 - \$5,000	P
SP	ING 403(b) Plan: ING The Growth Fund of America - R4	\$1,001 - \$15,000	DIVIDENDS & CAPITAL GAINS	\$201 - \$1,000	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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KeyCorp	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
Mobil - Exxon Corporation	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
Regions Bank (Formerly AmSouth) - Joint Checking Account	\$1,001 - \$15,000	INTEREST	\$1 - \$200	

Rental Building (Marina Towers) Alexandria, Va	\$250,001 - \$500,000	GROSS RENT	\$15,001 - \$50,000	
Rental Building (Marina Towers) Alexandria, VA (continued)	None	Memo: Rent (net of expenses)	\$201 - \$1,000	

Rental Building (Matanza Cut Subdivision) St. Augustine, FL	\$1,000,001 - \$5,000,000	GROSS RENT	\$5,001 - \$15,000	
Rental Building (Matanza Cut Subdivision) St. Augustine, FL (continued)	None	Memo: Rent (net of expenses)	NONE	

Rental Building (Old Town Gateway Townhouse) Alexandria, VA	\$500,001 - \$1,000,000	GROSS RENT	\$1,001 - \$2,500	
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Rental Building (Old Town Gateway Townhouse) Alexandria, VA (Continued)	None	Memo: Rent (net of expenses)	NONE	
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Rental Office; 2950 NE 55th Ave, Silver Springs, FL	\$100,001 - \$250,000	GROSS RENT	\$5,001 - \$15,000	
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Rental Office; 2950 NE 55th Ave, Silver Springs, FL (continued)	None	Memo: Rent (net of expenses)	\$5,001 - \$15,000	
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Rental Restaurant; 5545 E. Silver Springs Blvd, Silver Springs, FL	\$500,001 - \$1,000,000	GROSS RENT	\$15,001 - \$50,000	
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SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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	Rental Restaurant; 5545 E. Silver Springs Blvd, Silver Springs, FL (continued)	None	Memo: Rent (net of expenses)	\$2,501 - \$5,000	
	Stearns House, Inc (an S-Corp located in Silver Springs, FL) Interest in Cash and Debt, 100%	\$15,001 - \$50,000	None	NONE	
	Stearns House, Inc. (an S-Corp located in Silver Springs, FL) (continued)	None	Dividends	NONE	
SP	T Rowe Price SEP IRA Summit Cash Reserves	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	
	T Rowe Price Summit Cash Reserves	\$100,001 - \$250,000	DIVIDENDS	\$1 - \$200	
	T Rowe Price Summit Cash Reserves (Non Retirement Assets)	\$50,001 - \$100,000	DIVIDENDS	\$1 - \$200	
JT	T Rowe Price Summit Cash Reserves IRA	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	
SP	T Rowe Price Summit Cash Reserves IRA	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	
	USSA Subscriber's Savings Account	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	

SCHEDULE IV - TRANSACTIONS

Name Clifford B. Steams

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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
	CD Alarion Bank (Given as a gift)	S	N/A	9-15-10	\$1,001 - \$15,000
	Gateway Bank CD	P	N/A	11-15-2010	\$50,001 - \$100,000
	ING 403(b) Plan: Evergreen Special Values Fund - A	P	N/A	Quarterly	\$1,001 - \$15,000
	ING 403(b) Plan: ING Pioneer Eq Inc Port - Instl	P	N/A	Quarterly	\$1,001 - \$15,000
	ING 403(b) Plan: ING VP Money Market Portfolio - I	P	N/A	Quarterly	\$1,001 - \$15,000
	ING 403(b) Plan: Oppenheimer Developing Mkts Fund - A	P	N/A	Quarterly	\$1,001 - \$15,000
	ING 403(b) Plan: Wanger Select	P	N/A	Quarterly	\$1,001 - \$15,000
	ING 403(b) Plan: Fixed Plus Account II	P	N/A	Quarterly	\$1,001 - \$15,000
	ING 403(b) Plan: ING Pioneer High Yield Port- Init	P	N/A	Quarterly	\$1,001 - \$15,000
	ING 403(b) Plan: ING The Growth Fund of America - R4	P	N/A	Quarterly	\$1,001 - \$15,000

SCHEDULE V - LIABILITIES

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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	Date Liability Incurred	Type of Liability	Amount of Liability
	Chase Home Finance LLC Columbus, OH	August 1996	Mortgage on Marina Towers Rental Alexandria, VA	\$50,001 - \$100,000
	Bank of America, N.A. Simi Valley, CA	February 1998	Mortgage on Old Town Gateway Rental Apartment Alexandria, VA	\$100,001 - \$250,000
	Regions Mortgage Hattiesburg, MS	August 2002	Mortgage on Mantanza Cut Subdivision Rental Home, St. Augustine, FL	\$250,001 - \$500,000
	First Silver Springs, Inc Ocala, FL	November 2010	Promissory Note	\$50,001 - \$100,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

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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
World Association of Domain Name Developers d.b.a T.R.A.F.F.I.C	Oct 17 -18	Jacksonville-Miami-Orlando	Y	N	N	None

SCHEDULE VIII - POSITIONS

Name Clifford B. Stearns

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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
President	First Silver Springs, Inc. Ocala, FL
President	Stearns House, Inc. Ocala, FL