If yes, complete and attach Schedule II. Did you, your spouse, or a dependent child receive "unearned" income of more than \$2,00 in the reporting period? III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$2,00 in the reporting period or hold any reportable asset worth yes. On Did you, your spouse, or dependent child purchase, sell, or exchange any period? III. Did you, your spouse, or dependent child purchase, sell, or exchange any period? III. Did you, your spouse, or dependent child purchase, sell, or exchange any period? III. Did you have any reportable asset in a transaction exceeding \$1,000 during the reporting when the reporting with an outside period? If yes, complete and attach Schedule IV. Did you, your spouse, or dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule IX. Did you have any reportable agreement or arrangement with an outside yes. On the reporting period? If yes, complete and attach Schedule IX. Did you have any reportable agreement or arrangement with an outside yes. On the period? If yes, complete and attach Schedule IX. Did you have any reportable agreement or arrangement with an outside yes. On the period? If yes, complete and attach Schedule IX. Each question in this part must be answered and the appropriate schedule IX. Each question in this part must be answered and the appropriate schedule IX. Each question in this part must be answered and the appropriate schedule IX. Each question in this part must be answered and the appropriate schedule IX. Each question in this part must be answered and the appropriate schedule IX. Each question in this part must be answered and the appropriate schedule IX. Each question in this part must be answered and the appropriate schedule IX. Each question in this part must be answered and the appropriate schedule IX. Each question in the reporting where and attach Schedule IX. If yes, complete and attach Schedule IX	SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EACH OF THES Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" nee disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	detalls of sucn a t	ried blind Trusts appr cluded from this report			
Yes Yes appi	MATION ANSWER	oved by the Comm	or a blink thinks and	Details regarding "Quali disclosed. Have vou exc	Trusts-	
the Yes Yes the appi		UST INFORM	NDENT, OR TR	OF SPOUSE, DEPE	XCLUSION (m
the Yes Yes the appi	schedule attacher			If yes, complete and attach Schedule V.	If yes, complete	
the Yes		Yes 🗌 No 🗸	any reportable liability	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?		.<
the Yes	If yes, complete and a			If yes, complete and attach Schedule IV.	If yes, complete	!
the Yes	×	Yes 🗌 No 🗸	se, sell, or exchange any 0 during the reporting	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting reside?		<u>.</u>
the Yes	If yes, complete and a			If yes, complete and attach Schedule III.	If yes, complete	!
Yes	≨ ,	Yes ✔ No	/e "unearned" income of y reportable asset worth	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 nnn at the and of the period?		
Yes	If yes, complete and attach Schedule VII.			If yes, complete and attach Schedule II.	If yes, complete	"
Did you, your spouse, or a dependent child receive any reportable travel	≦	Yes No 🗸	on to charity in lieu of the reporting period?	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?		. =
lete and attach Schedule VI.	Ě			If yes, complete and attach Schedule I.	If yes, complete	
spouse, or a dependent child receive any reportable gift in period (i.e., aggregating more than \$335 and not otherwise Yes No	VI. the reporting) Yes ☐ No 🗹	g., salaries or fees) of \$20	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	Did you or your spor more from any	٦.
	QUESTIONS	H OF THESE	ANSWER EAC	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	RELIMINAR	ס
	Termination Date: nation	Termination	☐ Amendment	Annual (May 15)	Report Type	
Employing Office: A \$200 penalty shall be assessed against anyone who files	Officer Or Employing Employee Rep. Lujan		State: NM ive District: 03	Member of the U.S. House of Represen	Filer Status	
(Daytime Telephone) (Office Use Only)			(Full Name)	(Ful	:	
CAPACIÓN DELIVERED DELIVER			Ben R. Lujan	Ben F		
Members, officers, and employees 2011 MAY 13 PM 1: 13	For use by Member	EMENT	ISCLOSURE STAT	CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT	ALENDAR YE	Γ_{Δ}
_	FORM A	TATIVES	FREPRESEN	UNITED STATES HOUSE OF REPRESENTATIVES	JNITED ST	\equiv

		Exclude vacatior period);	For an c publical activities	For rent	retireme the insti reportin	exercise asset he	For all the	Provide c	more th	Identify fair mark	_		ָּטְּלְיִלְּיִלְיִּלְיִילְיִילְיִילְיִילְיִ
Wells Fargo Bank Checking	New Mexico Public Employees Retirement Plan, State Pension	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or	For an ownership interest in a privately-held business that is not publically traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental or other real property held for investment, provide a complete address.	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.	exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For	For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.eplans in which you have the power, even if not	Provide complete names of stocks and mutual funds (do not use ticker symbols.)	(b) any other reportable asset of sources of income which generated more than \$200 in "unearned" income during the year.	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	Asset and/or Income Source	BLOCK A	Source of the contract of the
\$1,001 - \$15,000	\$15,001 - \$50,000				"None."	It is generated income, the value should be	asset was sold and is included only because	than fair market value, please specify the method used. If an	year. If you use a valuation method other	Value of Asset	Year-End	BLOCK B	Name Ben R. Lujan
INTEREST	None			period.	disclosed as income. Check "None" if the asset generated no income during the reporting	capital gains, even if reinvested, must be	check the "None" column. Dividends, interest, and	generate tax-deferred income (such as 401(k)	you to choose specific investments or that	apply. For retirement	Type of Income	вгоск с	ijan .
\$1 - \$200	NONE			Q	reinvested, must be disclosed as income. Check "None" if no income was earned or generated.	Dividends, interest, and capital gains, even if	of income by checking the appropriate box below.	IRAs), you may check the "None" column. For all other assets indicate the category	generate tax-deferred income (such as 401(k) plans or	do not allow you to choose specific investments or that	Amount of Income	BLOCK D	
								\$1,000 in reporting year.	exchanges (E) exceeding	had purchases (P) sales (S) or	Transaction	BLOCK E	Page 2 of 2