ĭ	child because Yes	nsactions, or liabilities of a spouse or dependent child because with the Committee on Standards of Official Conduct.	l" income, trar irst consulted	<b>EXEMPTION</b> —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Standards of Official Conduct.
N N	trusts" need not Yes	ds of Official Conduct and certain other "excepted trusts" need not spouse, or dependent child?	e on Standarc ng you, your s	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent
S	NSWER EACH OF THESE QUESTIONS	- A	TINFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
the onse.	nust be answered and do for each "Yes" response	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	S M	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.
ž 	arrangement Yes	IX. Did you have any reportable agreement or arrangement with an outside entity?  If yes, complete and attach Schedule IX.	§ ⊠	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.
	or 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.	S <sub>8</sub>	ill. 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.
<b>₹</b>	freceive any the reporting Yes 7)?	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	It yes, complete and attach Schedule II.
Š X	receive any egating more Yes	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.	<b>₽</b>	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       If yes, complete and attach Schedule I.
		SE QUESTIONS	OF THESE	PRELIMINARY INFORMATION - ANSWER EACH
assessed es more	A \$200 penalty shall be assessed against anyone who files more than 30 days late.	or Employing Office: ee Termination Date:	Officer or Employee	Filer Status  Member of the U.S. State: N9 House of Representatives District: 02  Report Type  Annual (May 17, 2010)  Amendment
39 39	2010 MAY 17 AM 10: 39  OFFICE OF THE OLDAN OLS HOUSE OF HEAREST AND	Daytime Telephone:202.225.7896	Daytime	Name: Peter T. King
	HAND	Form A For use by Members, officers, and employees	MENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT
<u>-</u>				

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## SCHEDULE I - EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$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. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

Exclude. Williamy pay (such as Ivalional Guard of Leselve pay), redetal retirement programs, and benefits	is received ander the occini con	Sorry , we
Source	Type	Amount
Keene State	Approved Teaching Fee	\$6,000
State of Maryland	Legislative Pension	\$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
	C . D .	20 000
INOW TO IT STATE IS THEN WITH I CITY TOWN		
New York State Retirement Pension	Pension	*39,000

## DC, Examples S. or income source is that of your spouse (SP) or optional column on the far left dependent child (DC) or is jointly held (JT), in the If you so choose, you may indicate that an asset Government retirement programs. cial interest in or income derived from U.S. parent, or sibling; any deposits totalling \$5,000 or your spouse, or by you or your spouse's child, instruction booklet. Block A. For additional information, see the of its activities, and its geographic location od, and (b) any other asset or sources of income exceeding \$1,000 at the end of the reporting periless in personal savings accounts; and any finanthere is rental income); any debt owed to you by Exclude: Your personal residence(s) (unless traded, state the name of the business, the nature period. For an active business that is not publicly account and its value at the end of the reporting not self-directed, name the institution holding the reporting threshold. For retirement plans that are each asset in the account that exceeds the provide the value and income information on not exercised, to select the specific investments), plans (such as 401(k) plans) that are self directed land, provide a complete address. Provide full income during the year. For rental property or which generated more than \$200 in "unearned" duction of income with a fair market value (i.e., plans in which you have the power, even if ticker symbols). For **all IRAs** and other retirement names of stocks and mutual funds (do not use Identify (a) each asset held for investment or pro-Nassau (oun] w/ trd Asset and/or income Source ria Se Simon & Schuster Bark Mega Corp. Stock 1st Bank of Paducah, **BLOCK A** KY Accounts × None generated income, the value should be If an asset was sold during the reporting please specify the method used. method other than fair market value, year and is included only because it reporting year. If you use a valuation Indicate value of asset at close of None," œ Indefinite \$1 ~ \$1,000 Ö \$1,001 - \$15,000 Ö \$15,001 - \$50,000 Value of Asset ш \$50,001 - \$100,000 BLOCK B 'n \$100,001 - \$250,000 G \$250,001 - \$500,000 I \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 ب \$5,000,001 - \$25,000,000 × \$25,000,001 ~ \$50,000,000 Over \$50,000,000 NONE investments, you may write "NA." For ate any income during calendar year vested, should be listed as income. Dividends and interest, even if reinindicate the type of income by checkall other assets including all IRAs, not allow you to choose specific Check all columns that apply. For retirement plans or accounts that do Check "None" if asset did not gener-DIVIDENDS the appropriate box below. RENT Type of Income INTEREST BLOCK C CAPITAL GAINS EXCEPTED/BLIND TRUST Royalties Other Type of Income (Specify: For Example, Partnership Income or Farm Income) \_ Check "None" if no income was earned checking the appropriate box below. indicate the category of income not allow you to choose specific invest-For retirement plans or accounts that do None or generated. Dividends and interest, even if rem-For all other assets, including all IRAs, ments, you may write "NA" for income vested, should be listed as income. \$1 - \$200 = ≡ **>**< × \$201 - \$1,000 Amount of Income 2 \$1,001 - \$2,500 BLOCK D \$2,501 - \$5,000 < ≤ \$5,001 - \$15,000 ≦ \$15,001 - \$50,000 \$50,001 - \$100,000 × \$100,001 - \$1,000,000 $\bar{\mathsf{x}}$ × \$1,000,001 - \$5,000,000 ϫ Over \$5,000,000 sales (S), or exceeding exchanges (E) purchases (P), asset had example. portion of an if only a \$1,000 in See below for as follows: please indicate asset is sold, iransaction Indicate if the eporting year. S (S) (partial) BLOCKE (partial) ur io la

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Name Peter T. King

Page -+ of 1+

organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any non profit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

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		•	Board Member	Position	zanono), and posmento ecicif et an nonciar y mataros
			Notre Dame law Association (Alumni Association of Notre Dame law School)	Name of Organization	onemy name.

## SCHEDULE IX - AGREEMENTS

employee welfare or benefit plan maintained by a former employer; or publication of a book. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; continuing participation in an 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

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	Date	Parties To	Terms of Agreement