<u></u>	No	lid Yes √	ndent chil ee on	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.	ne, transactions, or unless you have fire	ed" incon /er "yes"	ets, "unearn Do not answ	his report any other ass te tests for exemption?	Have you excluded from this report any other assets, "unearned" income, transactions, or because they meet all three tests for exemption? Do not answer "yes" unless you have firs Standards of Official Conduct.	Exemptions	Exem	
<u> </u>		ent Yes	r "excepte	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?	on Standards of Offi	mmittee	ed by the Co d from this re	ed Blind Trusts" approv sed. Have you exclude	Details regarding "Qualific trusts" need not be disclo child?	; 	Trusts-	!
J		SNOIT	QUES	TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS	ON ANSWE	RMATI	ST INFO	IDENT, OR TRU	EXCLUSION OF SPOUSE, DEPENDENT, OR	SION OF	EXCLUS	اجرا
		response.	h "Yes"	chedule attached for each "Yes" response.	appropriate sc				If yes, complete and attach Schedule V.	omplete and	If yes, o	
		and the	wered a	າ in this part must be answered and the	Each question		Yes 🗌 No		Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	your spouse, an \$10,000) du	V. (more th	_
			ļ ļ	and attach Schedule IX.	If yes, complete a	! 	 	! 	If yes, complete and attach Schedule IV.	complete and	If yes, o	
	□ 8 €	utside Yes	t with an ou	Did you have any reportable agreement or arrangement with an outside entity?		<u> </u>	Yes 🗸 No	¥	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?	your spouse, le asset in a tr	IV. reportab	
				ind attach Schedule VIII.	If yes, complete a				If yes, complete and attach Schedule III.	omplete and	If yes, c	
	S	Yes	date of filin	Did you hold any reportable positions on or before the date of filing in the current calendar year?	Did you hold any rep VIII. current calendar yea		Yes 🗸 No		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?	your spouse, on \$200 in the one of the second secon	III. more the	=
				If yes, complete and attach Schedule VII.	If yes, complete a	<u> </u>			If yes, complete and attach Schedule II.	omplete and	If yes, c	
	□ 8 <	travel or in \$335 Yes	reportable h more thar	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 🗌 No	lieu of paying	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?	individual or o	II. you for a	
			ļ	nd attach Schedule VI.	If yes, complete a	' 	 		If yes, complete and attach Schedule I.	omplete and	If yes, o	
	₹	Yes	reportable nd not othe	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)?		 <u>.</u> .	Yes 🗸 No		Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	or your spousi from any sour	Did you	_
					OF THESE QUESTIONS	IND 35	OF THES	NSWER EACH	PRELIMINARY INFORMATION ANSWER EACH	INARY II	PRELIM	ا ــــ ا
	0 days	more than 30 days		on Date:	Termination Date:	Termination	☐ Terr	Amendment	Annual (May 15)		Report Type	
	ny shall I against files	A \$200 penalty shall* be assessed against anyone who files		Employing Onice.	Employee			e District: AL	House of Representative	\ \	Filer Status	
ا رُ	e Chily	OUSE OF REPRESENTA	ر اور							-		1
// e	PH 1: 2:	2009 MAY 14 PM 1: 29		202-225-5765			j	vin Young	Donald Edwin Young			
CE C	URCE CEN	ASLATIVE RESOURCE CENTER										
			ees	For use by Members, officers, and employees	For use by Mem	ļ`	ENT [CLOSURE STATEN		AR YEAR	CALEND,	<u>۔</u>
Ū	EREC	ž .	of 8	Page 1 of 8	FORM A		ATIVES	OF REPRESENTATIVES	INITED STATES HOUSE OF	D.STAT		\neg
	֖֖֖֖֖֖֖֖֖֖֓ ֖֖֖֖֓	,										

SCHEDULE I - EARNED INCOME

Name Donald Edwin Young

Page 2 of 8

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.

4.,000.		
Source	Туре	Amount
State of Alaska	Legislative and Teaching Pension	\$5,109

SCHEDUL
E
- ASSETS
AND "
UNEARN
IED" I
NCOMI

SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Donald Edwin Young	win Young		Page 3 of 8
	BLOCK A	BLOCK B	вгоск с	BLOCK D	BLOCK E
Identify (a) ea a fair market and (b) any or than \$200 in the account investments) in the account plans that are and its value that is not put its activities, information, sinformation, sinformation, so in the options avoings account that of your so choot that of your sin the options	Asset and/or Income Source 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. 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. 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.	Year-End Value of Asset 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."	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.	Amount of Income 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.	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
If you so choo that of your s in the optiona	ose, you may indicate that an asset or income source is spouse (SP) or dependent child (DC) or is jointly held (JT), all column on the far left.				1
ΤΓ	Congressional FCU	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	
	Congressional FCU (IRA)	\$50,001 - \$100,000	Other: (Please specify) IRA	\$2,501 - \$5,000	
SP	Congressional FCU (IRA)	\$1,001 - \$15,000	None	NONE	
TL	Doyon, Limited	None	DIVIDENDS	\$201 - \$1,000	
	Gwitchyaa Zhee Village Corporation	None	DIVIDENDS	\$1 - \$200	
SP	KeyBank National Association	\$1 - \$1,000	INTEREST	\$1 - \$200	Pan-

SCHED	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	E Name Donald Edwin Young	Edwin Young	
	NY Life Insurance	\$50,001 - \$100,000	DIVIDENDS	\$5,001 - \$15,000
İ	Putnam Fund for Growth	\$100,001 - \$250,000	DIVIDENDS	\$2,501 - \$5,000
· · -	State Farm Insurance	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500
JT	State of AK Permanent Dividend Fund	None	DIVIDENDS	\$5,001 - \$15,000

Page 4 of 8

SCHEDULE IV - TRANSACTIONS

Name Donald Edwin Young

Page 5 of 8

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. 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

	SP, DC, JT	
Putnam Fund for Growth and Income	Asset	
P	Type of Transaction	
Quarterly Reinvestment	Date	
\$1,001 - \$15,000	Amount of Transaction	

Name Donald Edwin Young

Page 6 of 8

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 (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule. 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) profiloits acceptance of gints except as specifically provided in the rule.	except as specifically provided in the rule.	
Source	Description	Value
Aleutian Spray Fisheries, Inc. Seattle, WA	Legal Expense Fund	\$5,000
Bering Pacific Services Company Anchorage, AK	Legal Expense Fund	\$5,000
Boyer Towing, Inc. Ketchikan, AK	Legal Expense Fund	\$5,000
Cruz Construction, Inc. Palmer, AK	Legal Expense Fund	\$2,500
William A. Corbus Juneau, AK	Legal Expense Fund	\$2,500
Billy L. Evans/Renatta J. Evans Bradenton, FL	Legal Expense Fund	\$2,000
Jim Jansen Anchorage, AK	Legal Expense Fund	\$5,000
Chad R. Moore Anchorage, AK	Legal Exoense Fund	\$5,000
Osborne Construction Company Kirkland, WA	Legal Expense Fund	\$5,000
George R. Osborne, Jr. Kirkland, WA	Legal Expense Fund	\$5,000
Starbound, LLC Seattle, WA	Legal Expense Fund	\$5,000
Tatonduk Outfitters Limited Fairbanks, AK	Legal Expense Fund	\$2,000

SCHEDULE VI - GIFTS

Name Donald Edwin Young

Page 7 of 8

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
Trident Seafoods Corporation Seattle, WA	Legal Expense Fund	\$5,000
Hachler Investments, LLC Edmonds, WA	Legal Expense Fund	\$1,000
William Northey Brier, WA	Legal Expense Fund	\$1,000
Nellie M. Bohnert Seattle, WA	Legal Expense Fund	\$1,000
NORTHLAND SERVICES, INC. Seattle, WA	Legal Expense Fund	\$5,000
Ronald A. Duncan Anchorage, AK	Legal Expense Fund	\$5,000
OCEAN PROWLER LLC Petersburg, AK	Legal Expense Fund	\$5,000
PROWLER LLC Petersburg, AK	Legal Expense Fund	\$5,000

SCHEDULE VIII - POSITIONS

Name Donald Edwin Young

Page 8 of 8

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
Board of Directors	National Rifle Association
Board of Trustees - Ex Officio Member	Institutue of American Indian Arts