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No [V]	child because Yes	sactions, or liabilities of a spouse or dependent child because with the Committee on Standards of Official Conduct.	ed" income, trans first consulted v	<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
No No	d trusts" need not Yes	s of Official Conduct and certain other "excepted pouse, or dependent child?	ee on Standards iting you, your st	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?
STIONS	EACH OF THESE QUESTIONS	- ANSWER	ST INFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
ed and the s" response.	must be answer ed for each "Yes	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	N <sub>o</sub>	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.
No No	arrangement Yes	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	<b>S</b> 8	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.
as No	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	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 No	eceive any he reporting	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.	N <sub>N</sub>	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.
No N	receive any regating 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.	o No	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
		E QUESTIONS	OF THESE	PRELIMINARY INFORMATION - ANSWER EACH
shall be assessed who files more	A \$200 penalty shall be assessed against anyone who files more than 30 days late.	r Employing Office: e Termination Date:	Officer or Employee	Filer Member of the U.S. State: H S House of Representatives District: 0 4  Report Type Annual (May 17, 2010) Amendment
26 PM 3: 30	2010 MAY 26 PM 3: 30	Telephone: 202 - 225-5772	Daytime T	Name: CARY EUGENE "CENE" TAYLOR
2000	MAY 1 7 2010	Form A For use by Members, officers, and employees	EMENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT

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Page 2 of

## 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.

Source	Туре	Amount
	Approved Teaching Fee	\$6,000
State of Maryland	Legislative Pension	\$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
	Spouse Salary	NA
SOUTHERN GRAPHICS	Spouse commissions	77

HANCOCK BANK ACCOUNTS		SP, Mega Corp. Stock  DC. Examples: Simon & Schuster	reporting threshold. For retirement plans that are reporting threshold, hor 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 you or your spouse's child, parent, or sibling; any deposits totalling \$5,000 or less in personal savings accounts; and 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.	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 asset 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
×	×	Indefinite	None	BLOCK B  Value of Asset  ndicate value of asset at close of a control of an asset was sold during the reporting and is included only because the reporting asset was sold during the reporting asset was sold during the reporting asset was sold during the reporting as a sold during the reporting asset was sold during the reporting as a sold during the repor
X	X	X X A A A A A A A A A A A A A A A A A A	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST  Other Type of Income (Specify: For Example, Partnership Income or Farm Income	BLOCK C  Type of Income  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 <i>including all IRAs</i> , 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 calendar year.
×	X	×	None	BLOCK D  Amount of Income  Attrement plans or accounts that color you to choose specific investing you may write "NA" for income of the category of income to the category of income to the appropriate box belowends and interest, even if reind, should be listed as income "if no income was earned and income was earned."
		5 (paniai)	portion of an asset is sold, please indicate as follows: (S) (partial) See below for example.  P, S, E	BLOCK E Transaction Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.

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Page 4 of	

## SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling 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 paid directly by the sponsor

or were paid by you and reimbursed 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.

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Source	Date(s)	City of Departure – Destination – City of Return	Lodging?	Food? (Y/N)	Was a Family Member Included? (Y/N)	Number of days <u>not</u> at sponsor's expense
	Mar. 2	DC—Chicago—DC	z	z	Z	None
Roycroft Corporation	Aug. 6–11	DC-Los Angeles-Cleveland	Υ	Υ	γ	2 Days
AMERICAN SHIPBUILDING ASSNI	11/29-12/1	NOLA - FT. MYERS, FL - NOLA	4	7	ζ.	
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