

HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES  
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

FORM A  
For use by Members, officers, and employees

Page 1 of 3

Rep. Betty McCollum

(202) 225-6631

2011 MAY 16 PM 3:49

(Full Name)

(Daytime Telephone)

0: (Office Use Only)

Filer Status ☒ Member of the U.S. House of Representatives State: MN District: 04

☐ Officer Or Employee Employing Office:

Report Type ☒ Annual (May 15) ☐ Amendment ☐ Termination Termination Date:

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

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 type="checkbox"/> No <input checked="" 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 type="checkbox"/> No <input checked="" 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 type="checkbox"/> No <input checked="" 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 type="checkbox"/> No <input checked="" 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 type="checkbox"/> No <input checked="" 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 type="checkbox"/> No <input checked="" 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- Details 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"/>

# SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Rep. Betty McCollum

Page 2 of 3

BLOCK A <b>Asset and/or Income Source</b> <small>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 source of income which generated more than \$200 in "unearned" income during the year. Provide complete 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 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. For rental or other real property held for investment, provide a complete address. 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. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any derivative financial instrument or other investment or</small>	BLOCK B <b>Year-End Value of Asset</b> <small>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."</small>	BLOCK C <b>Type of Income</b> <small>Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.</small>	BLOCK D <b>Amount of Income</b> <small>For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.</small>	BLOCK E <b>Transaction</b> <small>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</small>
Alger Small & Midcap Growth A Open End Mutual Fund	\$1,001 - \$15,000	DIVIDENDS	\$2,501 - \$5,000	
Davis NY Venture Mutual Fund	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
Goldman Sachs Capital Growth Mutual Fund	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
Goldman Sachs Growth & Income Fund	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
Hartford Capital Apprec Fund	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
Minnesota State Def. Comp - T. Rowe Price Small Cap Fund	\$1,001 - \$15,000	DIVIDENDS	\$1,001 - \$2,500	

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Name Rep. Betty McCollum

Page 3 of 3

Minnesota State Def. Comp -- Fidelity Div Inter Fund	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
Minnesota State Def. Comp. - Janus Twenty	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
Minnesota State Def. Comp. Vanguard Index Funds Plus	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
Oppenheimer Global Allocation FD	\$1,001 - \$15,000	None	NONE	P
Oppenheimer Quest Balanced Fund-A Mutual Fund	None	CAPITAL GAINS	\$1 - \$200	S
Oppenheimer Quest Opportunity Value Mutual Fund	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	