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UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT	Form A For use by Members, officers, and employees	MAY 1 4 2012
Name: Adam Smith Daytime	Daytime Telephone: 202-225-8901	2012 MAY 23 PM 4: 59 2012 MAY 23 PM 4: 59 SPECE OF THE CLERK SP
Filer Status Member of the U.S. State: WA Officer or Employee Report Annual (May 15, 2012) Amendment	yee Termination Date:	A \$200 penalty shall be assessed against anyone who files more than 30 days late.
PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS	SE 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? Yes No	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)? If yes, complete and attach Schedule VI.	receive any regating more Yes No
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? No XIII yes, complete and attach Schedule II.	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 from one source)? If yes, complete and attach Schedule VII.	d receive any n the reporting Yes No No
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.	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.	or before the date Yes No X
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.	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	arrangement with Yes No No
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.	Each question in this part rappropriate schedule attache	ion in this part must be answered and the schedule attached for each "Yes" response.
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	RMATION — ANSWER EACH O	- ANSWER EACH OF THESE QUESTIONS
TRUSTS —Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	nd certain other "excepted trusts" need not be disclosed. Have you shild?	closed. Have you Yes No
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spothey meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	ansactions, or liabilities of a spouse or dependent child because I with the Committee on Ethics.	child because Yes No X

Name
Adam
Smith

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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.

Source Keene State	Type Approved Teaching Fee	Amount \$6,000
Examples: Civil War Roundtable (Oct. 2nd) Ontario County Board of Education	Spouse Speech Spouse Salary	\$1,000 NA
University of Washington, Seattle, WA	Approved teaching fee	8,500.50
		,

UT Chas checking	UT USAA Savinos	UT USAA Checkins	SP IRA - IBH Stock	SP ILA - Calamas Growth B	JT Admicconv. of scolings find		DC, Examples: Simon & Schuster	SP SP Mega Corp. Stock	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 deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. 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 with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	BLOCK A 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 reportable asset or sources 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
	×	><			X	×	Indefinite	X	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$5,000,001 - \$50,000,000 \$0 \$25,000,001 - \$50,000,000 \$0 \$25,000,001 - \$50,000,000 \$0 \$25,000,001 - \$50,000,000 \$0 \$25,000,001 - \$50,000,000 \$0 \$0 \$0 \$0 \$0 \$0 \$0	AND "UNEARNED" INCOME BLOCK B Value of Asset Indicate 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 during the reporting year and is included only because it generated income, the value should be "None."
	>		×		×	×	Royalties	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	BLOCK C Type of Income 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 "Tax-Deferred" column. Dividends, interest, and capital gains, even it reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.
						×	×	X	None - \$1 ~ \$200 = \$201 ~ \$1,000 ≡ \$1,001 ~ \$2,500 ⋜ \$2,501 ~ \$5,000 <	BLOCK D Amount of Income For assets for which you checked "Tax- Deferred" in Block C, you may check the "None" column. For all other assets, indi- cate 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.
								S (partial)	Over \$5,000,000 XI portion of an asset is sold, please indicate as follows: (S) (partial) See below for example. P, S,	Page 3 of 4 BLOCK E Transaction Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding 1,000 in as reporting was year.

This page may be copied if more space is required.

SCHEDULE III—ASSETS AND Continuation Sheet (if needed)	-ASSETS AND "UNEARNED" INCOME et (if needed)	Name A	Adam Smith	Page 4 of
BLOCK A Asset and/or income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E
S.P.	ے 0	ST		×
DC.	0,000 00,000 250,000 500,000 1,000,000 \$5,000,000 \$25,000,000	INS BLIND TRUST RED f Income , ncome or	00 00 000 ,000 0,000 ,000,000	ш îv .
	None \$1 - \$1,000 \$1,001 - \$15,0 \$15,001 - \$50 \$50,001 - \$10 \$100,001 - \$5 \$500,001 - \$1 \$1,000,001 - \$ \$5,000,001 - \$ \$25,000,001 - \$ \$25,000,001 - \$	NONE DIVIDENDS RENT INTEREST CAPITAL GAIN EXCEPTED/B TAX-DEFERR Other Type of (Specify: e.g., Partnership In	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,00 \$50,001 - \$100 \$100,001 - \$1,00 \$1,000,001 - \$5	Over \$5,000,000
DC! Wash SI GET Fund	X	X	X	
wash st. GET				
2 2				
Thwest ?		X	X	S
Thrusco vous lampeles the A		X	X	S
T Calamos Growth Fund B	X	X	X	S
T Federaltol Kaufmann B		×	X	S
Ĺi	X	X	×	S
C				-
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SCHEDULE IV— TRANSACTIONS

Name Adam Smith

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Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real prop-	Type of Transaction	Type ansactic	<u> </u>		Date		1	} │	Amount	으	Tran	Transaction	9	ľ	
resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent chil-				apital I \$200	(MO/DAY/YH)	>	₩ .	ဂ	0	m	TI	۵	I	-	د
dren, or the purchase or sale or your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	HASE 	IANCE	IANGE	Box if C	Quarterly, Monthly, or										,000
Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.		SALE	EXCH	Check I Gain Ex	Bi-weekly, if applicable	\$1,001- \$15,000	\$15,001 \$50,000	\$50,001 \$100,00	\$100,00 \$250,00	\$250,00 \$500,00	\$500,00 \$1,000,0	\$1,000,0 \$5,000,0	\$5,000,0 \$25,000	\$25,000 \$50,000	Over \$50,000
SP, DC, JT Asset			-												
Example: Mega Corpor		×			10-12-11		×								
JT Invesco van Kampen Eauit > Income B	~	×		×	5-9-11		×								
JT Invesco Van Kampen Equity & Income A		×		×	5-9-11	×				1					
JT Calamos Growth Fund Cl B	~	×		×	5-9-11		X								
JT Federated Kaufmann Cl B	×	_		×	5-9-11		×								
JT First Eaak Global Fund A	×	<u> </u>		×	59-11		X		,						
JT Cambiar Small Cap Fund	\times				5-11-11	\times									
JT Cambia's small cap Fund	~				8-22-11		:								
ince Comm. Sin	×	 			5-11-11	×									
JT Faton vance comm. Strat. CI I	×		<u> </u>		8-22-11										
JT Goldman Sachs TR Grawth opp Instit	×		<u> </u>		5-11-11	×									
JT Goldman Sachs Abs. Return Track I	×		<u> </u>		5-11-11	\times									
JT Goldman Sachs TC Growth Opp Int	~				(6-3,-11	×									
JT Goldman Sach, Alon Roburn Troct I	~	<u> </u>	! !		8-22-11	\succ									
	×				5-11-11	×									
JT ING Global Real Estat CII	~				8-22-11	\times									
JT I'W Mid Cap Growth CII	<u>×</u>				6-3-11	×									

SCHEDULE IV— TRANSACTIONS

Name Adam Smith

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Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000 Include transactions that	Type of Transaction	e action		Date			Am	Amount of	t of	Tran	Transaction	ion		
resulted in a capital loss. Provide a brief description of any exchange trans- action. Exclude transactions between you, your spouse or dependent chil-				(MO/DAY/YR)	٧	₩	င	D	Ш	П	က	I	_	ے
dren, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	HASE	ANGE	Box if Ca	or Quarterly, Monthly, or		,			 1- 0	1-	01-	01- 000	.001-	,000
Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.	PURC	EXCH		Bi-weekly, if applicable	\$1,001- \$15,000	\$15,001- \$50,000	\$50,001- \$100,000	\$100,00° \$250,000	\$250,00 \$500,000	\$500,00° \$1,000,0	\$1,000,0 \$5,000,0	\$5,000,0 \$25,000,	\$25,000, \$50,000,	Over \$50,000,
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OF Champie. Mega Corporation Continuon Cooks (pariar sais)	\ \ \ \			3 5	\	>					1		1	
JT I'M HID Cap Growth Fund I	×	,		8-72-11	\times									
JT JP Horgan Dynamic Small cap I	×			5-11-11	×					-				
JT JP Horosun Dynsumic Small Cap I	×			8-22-1	×									
JT Hainshay Lovak Cap Growth I	×			5-11-11		×								
Lavolc cap Give	×			8-22-11		X			i					
JT Manages Alula Systematic Inst.	×			6-3-11	×									
	×			8-22-11	×						-			
JT Hehrapitan West Class I	×			611-11	×									
JT Lichopolitan west Total Return CII	×			8-22-11	×									
JT PINCo Emerging Local Bond ?	×			54-1	×									
JT PINICO Emerging Local Bord ?	×		-	8-22-11	\times									
JT RYDEX SGI Harvaged Futures H	\times			5-11-11	×									
JT AYDEX SGI Nounagra Futures H	×			8-22-11	X									
IT TOW value operation to Film I	×			5-11-11	~									
JT TCW value Opportunities Florizi	×			6-3-11	×						_			
JT Thornburg Int'll Value. I	\succeq			6-11-11	×									

SCHEDULE IV— TRANSACTIONS

Name Adam Smith

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									JT VIAUS Emerging Navuts I	JT Victus Emarging Naurus I	JT Thornburg Int'l Value I	Example: Mega Corpor	SP, DC, JT Asset	Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.	dren, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is soid, please so indicate (i.e., "partial sale"). See example below.	resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent chil-	Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that
					7.					×				PURC	HASE		of Tr
									\times		×	×		SALE		*	Type of Transaction
														EXCH	ANGE		tion
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									8-22-11	5-11-11	8-22-11	10-12-11		Bi-weekly, if applicable	Quarterly,	(MO/DAY/YR)	Date
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		L		 			 							\$50,000,0	000	_	

SCHEDULE V— LIABILITIES

Name Adom Smith

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. NOTE: Pending legislation may require Members to report mortgages on personal residences.

		JT		JT, DC,	
	رن	Chase Hortagge	Example: First Bank of Wilmington, DE	Creditor	
		JUNC 2010	May 1998	Date Liability Incurred Mo/Year	
	د	June 2010 Hortgage on Personal Resid.	Mortgage on 123 Main St., Dover, DE	Type of Liability	
				\$10,001- \$15,000	
				\$15,001- \$50,000	
				\$50,001- \$100,000	
		X	×	\$100,001- \$250,000 D	$\left\ \cdot \right\ $
				\$500,000 m	
				\$1,000,000	
				\$5,000,000 \$5,000,001- —	
				\$25,000,000 \$ \$25,000,001 \$50,000,000	
				Over \$50,000,000	

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than \$350 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 \$140 or less need not be added towards the \$350 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
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	\$375

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SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

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 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 Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$350 received by

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.

Source	Date(s)	City of Departure—Destination— City of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Number of days <u>not</u> at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2		z		Z	None
Roycroft Corporation	Aug. 6–11	eland	Υ	Y	Y	2 Days
American Israel Education Found Aug 5-15	Aug 5-15	Seattk-Israel-Seattk	y	y	y	2 days
			•			
				·		
			-			