Trusts— Details regarding "Qualified Bind Trusts" approved by the Confinition of Such a trust benefiting you, your spouse, or dependent trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? 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 Standards of Official Conduct.	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EACH	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting Yes No Visconting IX. entity? Period? If yes, complete and attach Schedule IV.	ceive "unearned" income of any reportable asset worth Yes V No VIII.	nation to charity in lieu of paying e reporting period? Yes No VII. reimbursements for tr from one source)? If yes, complete an	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 Yes No VI. reporting period (i.e., aggregating exempt)? If yes, complete and attach S	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	Report Type Termination Date: Type Termination	Filer Nember of the U.S. State: UT Officer Or Employing C Status Status Officer Or Employee	Jason E. Chaffetz 801 (Full Name)	UNITED STATES HOUSE OF REPRESENTATIVES For use by Members, office and a second statement.
eta by the Collimete on Standards of Chicker Consulted with the Committee on Yes No 🗹 No 🗸	MATION ANSWER EACH OF THESE QUESTIONS	×	VIII,	<u>≨</u>	Did you, your spouse, VI. reporting period (i.e., exempt)? If yes, complete an	QUESTIONS	Termination Date:		801-404-1300 200 (Office Use Only)	For use by Members, officers, and employees Page 1 of 5 Page 1 of 5 DELIVERED





SCHEDULE III - ASSETS AND "UNEARNED" INCOME	
Name Jason E. Chaffetz	

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ŢŢ	TL	JT	JT	T	JT	If you so choo that of your sp in the optiona	Exclude: Your debt owed to y parent or sibli savings accounts of the control of t	ASSE Identify (a) ead a fair market v and (b) any oth than \$200 in " land, provide mutual funds retirement plain which you f investments), in the account plans that are and its value a that is not put its activities, a information, s
Personal Residence: 315 Westfield Circle, Alpine, UT	Marriott Vacation Club	IRA-Wells Fargo Bank Cash	IRA-Federated Equity FDS Cap Appreciation FD CL A	IRA-Evergreen Equity TR Asset Allocation FD CL B	IRA-Delta Petroleum Corporation	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.	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 refirement programs.	Asset and/or income. Source Asset and/or 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.
\$500,001 - \$1,000,000	\$15,001 - \$50,000	\$1,001 - \$15,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$1,001 - \$15,000			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 "Nome."
None	None	NTEREST	DIVIDENDS	DIVIDENDS	DIVIDENDS			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 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.
NONE	NONE	\$1 - \$200	\$1 - \$200	\$201 - \$1,000	\$1 - \$200			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.

SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Jason E. Chaffetz	Chaffetz		Page 3 of 5
DC3	The Investment Company of America-Class 529B	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC2	The Investment Company of America-Class 529B	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC1	The Investment Company of America-Class 529B	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JŢ	Utah State Retirement-Long Horizon Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
T	Wells Fargo Bank, Alpine, UT	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
DC1	Zions Bank, Alpine, UT	\$1,001 - \$15,000 INTEREST	INTEREST	\$1 - \$200	
DC2	Zions Bank, Alpine, UT	\$1 - \$1,000	INTEREST	\$1 - \$200	
DC3	Zions Bank, Alpine, UT	\$1,001 - \$15,000 INTEREST	INTEREST	\$1 - \$200	

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SCHEDULE V - LIABILITIES

Name Jason E. Chaffetz

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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 all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; 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.

SP, DC,			
Τľ	Mountain America Credit Union, Alpine, UT	Personal Auto	\$10,001 - \$15,000
JT	PNC Bank, Dayton, OH	Personal Residence: 315 S. Westfield Circle, Alpine, UT	\$250,001 - \$500,000
SP	Bank of America, Charlotte, NC	Personal Auto	\$10,001 - \$15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Jason E. Chaffetz

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spouse or dependent child that is totally independent of his or her relationship to you. 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 sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the 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 Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 received by you,

	<u> </u>	Point of Departure	Lodging?	Food?	Was a Family Lodging? Food? Member Included?	Days not at sponsor's
Source	Date(s)	DestinationPoint of Return		(Y/N)	(Y/N)	expense
US Association of Former Members of Congress	May 26- 31, 2009	SLC-Germany-SLC	Υ	Υ	Υ	None
American Israel Education Foundation	August 1- 9, 2009	SLC-Israel-SLC	Y	~	Υ	None