hiid Yes ☐ No 🗸	come, transactions, or liabilities of a spouse or dependent child	Have you excluded from this report any other assets, "unearned" income, transactions, or because they meet all three tests for exemption?	Exemptions— Have you excluded from this report any other ass because they meet all three tests for exemption?
pted Yes No V	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?	ed Blind Trusts" approved by the Commi sed. Have you excluded from this repor	Trusts- Details regarding "Qualifi trusts" need not be disck child?
STIONS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS	IDENT, OR TRUST INFORM	EXCLUSION OF SPOUSE, DEPE
	schedule attached for each "Yes" response.		If yes, complete and attach Schedule V.
and the appropriate	Each question in this part must be answered and the appropriate	reportable liability (more Yes ☑ No 🔲	V. than \$10,000) during the reporting period?
	If yes, complete and attach Schedule IX.		If yes, complete and attach Schedule IV.
outside Yes   No 🗸	Did you have any reportable agreement or arrangement with an outside IX. entity?	sell, or exchange any uring the reporting Yes V No	Did you, your spouse, or dependent child purchase, sell, or exchange any IV. reportable asset in a transaction exceeding \$1,000 during the reporting
	If yes, complete and attach Schedule VIII.		If yes, complete and attach Schedule III.
ling in the	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	*unearned* income of  portable asset worth Yes ✓ No	Did you, your spouse, or a dependent child receive "unearned" income of ill. more than \$200 in the reporting period or hold any reportable asset worth
	If yes, complete and attach Schedule VII.		If yes, complete and attach Schedule II.
nan \$305 Yes 🗸 No 🗌	Did you, your spouse, or a dependent child receive any reportable travel or VIII. reimbursements for travel in the reporting period (worth more than \$305 from one source)?	to charity in lieu of paying ting period? Yes ☐ No ✔	Did any individual or organization make a donation to charity in lieu of paying II. you for a speech, appearance, or article in the reporting period?
	If yes, complete and attach Schedule VI.		If yes, complete and attach Schedule I.
therwise Yes No	Utild you; your spouse, or a dependent child receive any reportable given  Vi. the reporting period (i.e., aggregating more than \$305 and not otherwise  exempt)?	salaries or fees) of \$200 Yes 🕢 No 📋	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 in or more from any source in the reporting period?
	UESTIONS	- ANSWER EACH OF THESE QUESTIONS	PRELIMINARY INFORMATION -
late.	ion	Amendment	Type ( ) Annual (May 15)
more than 30 days	Termination Date:		Report
be assessed against anyone who files	Employee	es District: 3	<i></i>
A \$200 behalfy shall	Employing Office:	State: WA	✓ Member of the U.S.
(Office Use Only)	(Daytime Telephone)	(Full Name)	(Full
5 PH 3: 35	202-225-3536 2009 HAY	ton Baird	Brian Norton Baird
RESOURCE CENTER			
	For use by Members, officers, and employees	FOR CALENDAR YEAR 2007	FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2007
DELIVERED	FORM A Page 1 of 9	REPRESENTATIVES	UNITED STATES HOUSE OF REPRESENTATIVES
HAND			

## SCHEDULE I - EARNED INCOME

Name Brian Norton Baird

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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. Center for Global Development Source Spouse Salry Type N/A Amount

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SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Brian Norton Baird	ton Baird		Page 3 of 9
	BLOCK A	вгоск в	вгоск с	BLOCK D	BLOCK E
Identify (a) a fair mark and (b) any than \$200 i land, provid mutual fun retirement in which ye investment in the accoplans that is not its activitie information Exclude: Ye debt owed parent or savings ac Governmen in the option	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."	Type of Income Check all columns that apply. Check "None" if asset did not generate any income during the calendar year. If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)	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, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income. Check "None" if no income was earned.	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
If you so che that of your in the option	hoose, you may indicate that an asset or income source is ir spouse (SP) or dependent child (DC) or is jointly held (JT), onal column on the far left.				
	Congressional Credit Union Checking Account	\$1 - \$1,000	None	\$1 - \$1,000	
	Congressional Credit Union Savings Account	\$1 - \$1,000	None	\$1 - \$1,000	
	Congressional Credit Union Money Market	\$1,001 - \$15,000	Dividends	\$1-\$1,000	
SP	Hartford HAFCX	None	Dividends	\$1 - \$200	
SP	TIAA - CRF	\$100,001 - \$250,000	Dividends	\$2,501 - \$5,000	
	Davis NRVCX	None	Dividends	\$1 - \$200	

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME SP Sp SP SP SP SP SP SP SP ЗS SP SP SP SP Washington TIAA-CREF SEI INVESTMENTS (IRA) 82 Salmon Beach Tacoma POLARIS INDUSTRIES (IRA) Bank of America 508 Seward Square, SE Washington DC 20003 (Value Allied Capitol Corp NEW (IRA) Donaldson Company INC (IRA) (RA) First INDL Realty Trust INC INTEL CORP (IRA) of Entire Property) Autozone INC (IRA) Prentice Hall Royalties market CLA Wachovia Securities Money AIMFDS - Group FD, CL, L \$15,001 -\$50,000 \$15,001 -\$50,000 \$1,000 - \$15,000 \$250,000 \$100,001 -\$1,000,000 \$500,001 -\$1 - \$1,000 \$1,001 - \$15,000 \$50,000 \$15,001 -\$50,000 \$15,001 -\$50,000 \$50,000 \$15,001 -\$15,001 \$1,000,000 \$500,001 -\$1,001 - \$15,000 Indefinate Name Brian Norton Baird NONE Interest Dividends RENT None RENT Dividends Dividends Dividends Dividends Dividends Dividends Dividends Royalties NONE None \$15,001 - \$50,000 \$1 - \$200 \$15,001 - \$50,000 \$1,001 - \$2,500 \$1 - \$200 \$1 - \$200 \$1,001 - \$2,500 \$1 - \$200 \$15,001 - \$50,000 \$15,001 - \$50,000 \$1 - \$200 \$1 - \$200 Page 4 of 9

SCHEDULE III - ASSETS AND "UNEARNED" INCOME SP SP SP SP SP SP SP SP SP ЗS SP SP SP SP FUND **UBS BANK USA MONEY** Donaldson Co INC (UBS INVESTMENT) Microsoft (UBS INVESTMENT) **Guaranteed Education Tuition** Polaris (Investment) Staples (UBS INVESTMENT) Account #2 NVR INC (IRA) **Universal Forest Products** CharterMac (UBS Municipal LLC Growth (UBS **UBS Global Account** Account #1 **Guaranteed Education Tuition UBS** Investment NVR (UBS INVESTMENT) (UBS INVESTMENT) INVESTMENT) INVESTMENT) \$15,001 -\$50,000 \$15,001 -\$50,000 \$15,001 -\$50,000 \$100,001 -\$250,000 \$15,001 -\$50,000 \$15,001 -\$50,000 \$15,001 -\$50,000 \$15,001 -\$50,000 \$1,001 - \$15,000 | Interest \$1 - \$1,000 \$1 - \$1,000 \$1,001 - \$15,000 \$1,001 - \$15,000 \$1,001 - \$15,000 Name Brian Norton Baird None None None Dividends None Dividends Dividends Dividends None Dividends Dividends Dividends Dividends None None NONE None \$1 - \$200 NONE NONE \$1 - \$200 \$1,001 - \$2,500 \$1 - \$200 \$1 - \$200 \$1 - \$200 \$1 - \$200 \$2,501 - \$5,000 Page 5 of 9

## SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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SEI Investments (UBS INVESTMENT) STAPLES (IRA) STARBUCKS CORP (IRA) (IRA) UNIVERSAL FOREST Account) PRODUCT INC ( UBS WINNEBAGO INUSTRIES INC Autozone (UBS Investment Investment Account) \$15,001 -\$50,000 \$15,001 -\$50,000 \$1,001 - \$15,000 NONE \$1,001 - \$15,000 \$1,001 - \$15,000 \$1,001 - \$15,000 | Dividends/None Name Brian Norton Baird None Dividends Dividends Dividends NONE None \$1 - \$200 NONE \$1 - \$200 \$1 - \$200 Page 6 of 9

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## SCHEDULE IV - TRANSACTIONS

Name Brian Norton Baird

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transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. Provide a brief 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 or series of transactions exceeded \$1,000. Include transactions that resulted in a loss. Do not report a

	SP Guarateed	SP, DC, JT
	Guarateed Education Tutition Account	Asset
2000	Pirchase	Type of Transaction
2007	2007	Date
	\$15,001-50,000	Amount of Transaction

### SCHEDULE V - LIABILITIES

Name Brian Norton Baird

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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.

		ΤĽ	JT	SP, DC,
Croo none Equity	Title)	Homecomings Financial (formely called Capitol	Creditor	
nome Equity Loan	DE Washington DC	Mortagage on 208 Seward Square	Type of Liability	
\$100,001-\$250,000	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	\$500,000-\$1,000,000	Amount of Liability	

# SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Brian Norton Baird

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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 \$305 received by you,

					Was a Family	Days not at
Source	Date(s)	Point of Departure DestinationPoint of Return	Lodging? (Y/N)	Food? (Y/N)	g? Food? Member Included? ) (Y/N) (Y/N)	sponsor's expense
Aspen Institute	March 31- April 8	DC - Bejing- Shanghai- DC	Υ	Y	Z	None