

**UNITED STATES HOUSE OF REPRESENTATIVES**  
**CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT**

Form A  
For use by Members, officers, and employees

APR 10 2012

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Name: Jay Robert Tinslee Daytime Telephone \_\_\_\_\_

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LEGISLATIVE RESOURCE CENTER  
U.S. HOUSE OF REPRESENTATIVES  
(Office Use Only)

FH

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: <u>WA</u> District: <u>1</u>	<input type="checkbox"/> Officer or Employee	Employing Office: <u>Resignation</u>	Termination Date: <u>3-20-12</u>	A \$200 penalty shall be assessed against anyone who files more than 30 days late.
Report Type	<input type="checkbox"/> Annual (May 15, 2012)	<input type="checkbox"/> Amendment	<input checked="" type="checkbox"/> Termination			

**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 checked="" type="checkbox"/> No <input 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 checked="" 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 checked="" type="checkbox"/> No <input 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 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.	Yes <input checked="" type="checkbox"/> No <input 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"/>
EXEMPTION—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"/>

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**Exclude:** Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

**For payments to charity in lieu of honoraria, use Schedule II.**

# SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Name Jay Robert Inslee

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BLOCK A		BLOCK B													BLOCK C							BLOCK D											BLOCK E
Asset and/or Income Source		Value of Asset													Type of Income							Amount of Income											Transaction
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.)		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.													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 if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.							For assets for which you checked "Tax-Deferred" in Block C, 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.											Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
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 deposits totaling \$5,000 or less in a personal checking or saving account; 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.																																	
SP	SP	A None													NONE							I None											If only a portion of an asset is sold, please indicate as follows: (S) (partial) See below for example.
DC, JT	SP	B \$1 - \$1,000													DIVIDENDS							II \$1 - \$200											
	SP	C \$1,001 - \$15,000													RENT							III \$201 - \$1,000											
	SP	D \$15,001 - \$50,000													INTEREST							IV \$1,001 - \$2,500											
	SP	E \$50,001 - \$100,000													CAPITAL GAINS							V \$2,501 - \$5,000											
	SP	F \$100,001 - \$250,000													EXCEPTED/BLIND TRUST							VI \$5,001 - \$15,000											
	SP	G \$250,001 - \$500,000													TAX-DEFERRED							VII \$15,001 - \$50,000											
	SP	H \$500,001 - \$1,000,000													Other Type of Income (Specify: e.g., Partnership Income or Farm Income)							VIII \$50,001 - \$100,000											
	SP	I \$1,000,001 - \$5,000,000																				IX \$100,001 - \$1,000,000											
	SP	J \$5,000,001 - \$25,000,000																				X \$1,000,001 - \$5,000,000											
	SP	K \$25,000,001 - \$50,000,000																				XI Over \$5,000,000											
	SP	L Over \$50,000,000																															
	SP														R, S, E																		
	SP														S (partial)																		
	Examples: Mega Corp. Stock																																
	Simon & Schuster																																
	1st Bank of Paducah, KY Accounts																																
	Advanced Micro Systems																																
	Amazeon																																
	Congressional Federal Credit Union																																
	Costco																																
	Costco																																
	Proquas Liquid Assets																																
	Mercury Market																																

# SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Nay Robert Inslee

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BLOCK A		BLOCK B													BLOCK C							BLOCK D											BLOCK E	
Asset and/or Income Source		Year-End Value of Asset													Type of Income							Amount of Income											Transaction	
		A	B	C	D	E	F	G	H	I	J	K	L	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	TAX-DEFERRED	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	I	II	III	IV	V	VI	VII	VIII	IX	X	XI		
		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 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000									None	\$1 - \$200	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	\$1,000,001 - \$5,000,000	Over \$5,000,000		
SP, DC, JT	Account																																	
	Algonquin Energy																																	
	1 Shares 1000 Growth																																	
	1 Shares ENTE Sector																																	
	1 Shares Russell 1000 Value																																	
	1 Shares Russell 2000 Growth																																	
	1 Shares Russell 2000 Value																																	
	1 Shares Russell MicroCap																																	
	1 Shares 3x4 400 Value																																	
	1 Shares 5xP MidCap 400																																	
	Island Press																																	
	PowerShares Commodity Index																																	
	SV Energy Sector																																	
	Starbucks																																	
	Starbucks																																	
	Street Tracks Gold Sector																																	
	Sun Power Corp																																	
	2 Intel																																	

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**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.

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