Name
JOAQUIN
CASTRO

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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

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	efits received under the Social Secu	urity Act.
Source	Туре	Amount
	Approved Teaching Fee	\$6,000
	Legislative Pension	\$9,000
Examples: Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	NA
State of Texas	Legislative Salary	6,341,04

San Ambario, TK 78240 Generations Federal Calit Union - Checking Account	SP, SP Mega Corp. Stock DC, Examples: Simon & Schuster  Ist Bank of Paducah, KY Accounts  Residential - Property	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.	The end of the reporting period, and (v) 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) provide the value for each asset held in the account that exceeds the reporting thresholds.  For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property and state."	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 condition period and the any other
>	Indefinite X	京	If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."  (k)  * This column is for assets held solely by your spouse or dependent child.	
× ×	X X Royalties	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	ments 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.	
× ×	× × ×	None       -         \$1 - \$200       =         \$201 - \$1,000       ≡         \$1,001 - \$2,500       <	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.  1 This column is for income generated by assets held solely by your spouse or dependent child.	
	S (partial)	portion of an asset is sold, please indicate as follows: (S) (partial) See below for example.  P, S, E	(P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.	BLOCK E Transaction Indicate if the asset had purchases

### SCHEDULE V- LIABILITIES

Name JOAQUIN CASTRO

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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. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal close of the preceding calendar year exceeded \$10,000. \*This column is for liabilities held solely by your spouse or dependent child. 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 residence (unless it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you

	<del></del>	_				_	<del>,</del> -
	SP, DC, JT						
	Creditor	Example: First Bank of Wilmington, DE	Direct LOANS U.S. Dept. of Ed. 6/2000 LAW School Student LOANS	7			
Date	Liability Incurred Mo/Year	May 1998	4/2000				
	Type of Liability	Mortgage on 123 Main St., Dover, DE	LAW School Student LOANS				
П	\$10,001- \$15,000						
	\$15,001- \$50,000 <b>w</b>		×				
	\$50,001- \$100,000						
	\$100,001- \$250,000	×	 			ļ 	
Amount of Liability	\$250,001- \$500,000 m				ļ ——		
旨	\$1,000,000	_	} }				
V SIII	\$5,000,000 P						
	\$25,000,000 ± \$25,000,001-			·			
11	\$50,000,000 Over					<del> </del>	
1 1	\$50,000,000 Spouse/DC Liability	-					
11	Over \$1,000,000°				<u> </u>	<u> </u>	

#### 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:** Giffs from relatives, gifts of personal hospitality of an individual, local meals, and giffs to a spouse or dependent child that are totally independent of his or her relationship to you. Giffs 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
N/A		

## **SCHEDULE VIII—POSITIONS**

· JOAQUIN LASTINO

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organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

tions); and positions solely of an honorary nature. Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organiza-

acto), and positions solety of all tieriesary flataics	rai) Hawai C.
 Position	Name of Organization
 Director	Activities The DREAM
 Director	National College Advising Corp
Member	St. Phillip's College President's Advisory BOARD
Member	St. Mary's University Mission & Identity Conveither
 Member	National Association of Letino Elected Officials Education Task Force
 Member	2006 Magnolia LLC

## SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of

Date	Parties To	Terms of Agreement
	NA	