HAND DELIVERED
Page 2 of 12

hics. Yes No 🗹	Have you excluded from this report any other assets, "unserned" 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.	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilitiescause they meet all three tests for exemption? Do not answer "yes" unless you have first con	Exemptions— Have you excluded from because they meet all ti	
Yes No 🗹	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?	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain othe disclosed. Have you excluded from this report details of such a trust benefiting you, your spous	Trusts- Details regarding "Qual disclosed. Have you ex	
STIONS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS	ENDENT, OR TRUST INFORMA	CLUSION OF SPOUSE, DEPE	贝
	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	any reportable liability Yes No	Did you, your spouse, or a dependent child have any reportable fishing (more than \$19,000) during the reporting period?	.<
	If yes, complete and attach Schedule IX.		If yes, complete and attach Schedule IV.	İ
Yes No	IX. antity?	₹ 3 3	one yout who expenses or expenses in a many personal year, we existing any reportable asset in a transaction exceeding \$1,000 during the reporting reside?	₹
			If yes, complete and attach Schedule III.	
Yes No S	VIII. current calender year?	Y	The yout, your sponses, or a department time reserve timement income or more than 1200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period?	Ħ,
	, ,		If yee, complete and attach Schedule it.	
han \$336 Yes No 🔀	VII. Into you, your spouse, or a dependent crists receive any reportable uses or VII. reimbursements for travel in the reporting period (worth more than \$336 from one source)?	ON O	you for a speech, appearance, or article in the reporting period?	7
	If yes, complete and attach Schedule VI.		If yes, complete and attach Schedule I.	
theretes Yes No 🕗	Did you, your apouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., apprepating more than \$335 and not otherwise exempt?	g., saluries or fees) of \$200 Yes 🕢 No 🖂	Did you or your spowse have "semed" income (s.g., salaries or fees) of \$200 or more from any source in the reporting period?	
	UESTIONS	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	ELIMINARY INFORMATION -	몼
more than 30 days	Termination Date: on	☐ Amendment ☐ Termination	Report Type () Annual (May 15)	
be assessed against	Employee	District: 02	Status House of Representatives	
A \$200 penalty shall	Officer Or Employing Office:	State: NV	Filer Member of the U.S.	
(Childe Dae Only) IEEE WATER	(Daytime Telephone)	(Full Name)	(Fu	
HC 2011 HAY - 6 AM 11: 44	(202) 225-8155	Dean Arthur Heiler	Dean A	
TEGISI ATIVE RESCURCE CLAIL!	For use by Members, officers, and employees	ISCLOSURE STATEMENT	CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT	δ
Page 2 of 12	FORM A Page-Onfo	OF REPRESENTATIVES	UNITED STATES HOUSE OF REPRESENTATIVES	

SCHEDULE I - EARNED INCOME

Carson School District

Spouse Salary

\$1,953

Name Dean Arthur Heller

Page 3 of 12

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. Source Type Amount

SCHEDULE II - PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics. A green envelope for transmitting the list is included in each Member's filing package. Employees may request a green envelope from the Clerk or use a plain envelope that is Name Dean Arthur Heller Page 4 of 12

N/A	Source Activity	appropriately labeled.
	Date	
	Amount	

m Name Dean Arthur Heller

- (Name Dean Arthur Heller	IUT Heller		Page 5 of 12
	BLOCK A	BLOCK B	BLOCK C	BLOCK D	BLOCK E
ASSET I Identify (a) each : a fair market valuand (b) any other generated more to provide complete symbols.) For all IRAs and : self-directed (i.s. exercised, to seld asset held in the retirement account the institution reporting period. For rental or othe address. For an ownership publically traded, activities, and its exclude: Your provided to the rection homes (control of the self-direction homes)	and, report name 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 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 "None" 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.	Amount of income 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 "None" column. For all other assets, indicate the catagory 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.	Transaction Indicate if asset had purchases (P), sales (8), or exchanges (E) exceeding \$1,000 in reporting year.	
publically tra activities, and Exclude: You vacation home	ided, state the name of the business, the nature of its disa geographic location in Block A. ur personal residence, including second homes and ness (unless there was rental income during the reporting				
	AD Clark Family Ltd Pshp % of Rental Property, see attached	\$250,001 - \$500,000	RENT	NONE	
JΓ	Bank of America	\$1 - \$1,000	INTEREST	NONE	
DC	Bank of America	\$50,001 - \$100,000	INTEREST	\$1 - \$200	
JT	Bank of America Money Market Savings (new -12/29/10)	\$1,001 - \$15,000	None	NONE	
SP	Brombach Family Ltd Pshp 13.82 % of, see attached	None	CAPITAL GAINS	\$15,001 - \$50,000	S
SP	Brombach Family Ltd Pshp 13.82 % of, see attached	\$1,000,001 - \$5,000,000	INTEREST	\$50,001 - \$100,000	see attached

ta

SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	E Name Dean Arthur Heller	hur Heller		Page 6 of 12
dS	Mass Mutual Life Ins	\$15,001 - \$50,000	None	NONE	
	Mass Mutual Life Ins	\$50,001 - \$100,000	None	NONE	
S	Mass Mutual Life Ins	\$15,001 - \$50,000	None	NONE	
	State of Nevada Retirement	\$50,001 - \$100,000	None	NONE	

SCHEDULE IV - TRANSACTIONS

Name Dean Arthur Heller

Page 7 of 12

transection. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See exemple below. 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 exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange

	SP Bromb	SP Brombi	SP, DC, JT
attached schedule.	Brombach Family I Td Pehn 13 82 % of see	Brombach Family Ltd Pshp 13.82 % of, see attached schedule	Asset
•	S(part)	q	Type of Transaction
	No	N/A	Capital Gain in Excess of \$200?
	Various	Various	Date
\$250,001 - \$500,000	\$100,001 - \$250,000	\$500,001 - \$1,000,000	Amount of Transaction

SCHEDULE V - LIABILITIES

Name Dean Arthur Heller

Page 8 of 12

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, perent, 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,
N/A	Creditor
	Date Liability Incurred
	Type of Liability
	Amount of Liability

SCHEDULE VI - GIFTS

Report the source, a brief description, and the value of all gifts totaling more than \$335 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 \$134 or less need not be added towards the \$335 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule. Name Dean Arthur Heller Page 9 of 12

	r	Г
N/A	Source	
	Description	
-	Value	

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Dean Arthur Heller Page 10 of 12

amount of time, if any, that was not at the sponsor's expense. Disciosure is required regardless of whether the expenses were reimbursed or paid directly 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 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, 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 spouse or dependent child that is totally independent of his or her relationship to you.

N/A	Source
	Date(s)
	Point of Departure DestinationPoint of Return
~	Lodging? (Y/N)
Y	Food? (Y/N)
Y	Was a Family Food? Member included? (Y/N) (Y/N)
	Days not at sponsor's expense

SCHEDULE VIII - POSITIONS

Position

× A

Name Dean Arthur Heller

Page 11 of 12

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Name of Organization

SCHEDULE IX - AGREEMENTS

Date

Parties To

Terms of Agreement

X

Name Dean Arthur Heller

Page 12 of 12

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 government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

SCHEDULE III ATTACHMENT AD CLARK FAMILY LTD PARTNERSHIP 12/31/2010

DEAN HELLER

ADDRESS OF PROPERTY OWNED

12901 WEST JEFFERSON BLVD LOS ANGELES CALIFORNIA

ESTIMATED VALUE OF PROPERTY \$414,600

RENTAL GROSS INCOME \$0

RENTAL NET INCOME (LOSS) (\$5,535)

^{*}Net results at a loss for 2010 due to the property being vacant.

SCHEDULE III ATTACHMENT BROMBACH FAMILY LP (13.82%) 12/31/2010

		ASSET VALUE	ESTIMATED INCOME
CMA MOI	NEY FUND/CASH	\$47,120	
ACCRUE	INTEREST	\$14,528	_

MUNI BO	NDS		
	LOS ANGELES CA MTA SLS	\$49,983	\$2,418
	BENICIA CA UNI SCH DIST	\$29,513	\$1,161
	LOS ANGELES CA CMNTY CLG	\$70,986	\$3,455
	CALIFORNIA EDL FAC AUTH	\$85.837	\$4,146
	METROPOLITAN WTR DT SO	\$ 51,348	\$2,419
	SAN FRANCISCO CA CY-CO	\$72,999	\$3,455
	CALIFORNIA ST ECONOMIC	\$43,742	\$2,104
	SAN JOAQUIN DELTA CCD	\$73,789	\$2,764
	ORANGE CNTY CA SANTN	\$49,934	\$2,246
	UNIVERSITY CA REVS GEN	\$38,538	\$1,728
	BVRLY HLLS CA PUB FN AT	\$59,350	\$2,902
	PERALTA CALIF CMNTY	\$66 ,845	\$2,488
	CENTRAL COAST WTR AUTH	\$76,143	\$3,455
(NEW)	CALIFORNIA ST DEPT WTR	\$29,827	\$1,108
(NEW)	LOS ANGELES CALIF UNI	\$46,203	\$2,073
	METROPOLITAN WTR DT SO	\$32,312	\$1,189
	SAN DIEGO CA UNI SCH	\$79,229	\$3,455
	LOMPOC CA UNI SCH DIST	\$22,805	\$933
(NEW)	FAIRFIELD-SUISUN CA SWR	\$48,397	\$1,797
	CALIFORNIA ST PUB WKS	\$38,827	\$1,728
(NEW)	NEWPORT BEACH CALIF CTFS	\$74,857	\$2,764
(NEW)	DAVIS CALIF JT UNI SCH	\$41,014	\$1,493
	MESA CALIF CONS WTR DIST	\$60,609	\$2,729
	SAN DIEGO CO CA WTR AT	\$94,750	\$4,146
(NEW)	CASTAIC LAKE WTR AGY	\$44 ,172	\$1,658
(NEW)	WESTSIDE CA UN SCH DIST	\$43,978	\$1,658
(NEW)	PASADENA CALIF ELEC RV	\$87,798	\$3,317
(NEW)	SOUTHERN CALIF PUB PWR	\$52,749	\$2,073
(NEW)	LOS RIOS CALIF CMNTY	\$34,856	\$1,382
• •		,54,-2-	• · • • •
		\$1,663,038	\$68,242

DEAN HELLER

\$19,321

\$503,851

SCHEDULE IV ATTACHMENT BROMBACH FAMILY LP (13.82%) 12/31/2010

PROCEEDS					
			Date of Trans	Amt of Trans	Gains
	MONTERY PENINSULA CA		2/5/2010	\$44,998	\$1,102.00
	SAN FRANCISCO CA CMNTY		4/9/2010	\$84,187	\$2,701.00
	CALIFORNIA ST ECONOMIC	•	5/24/2010	\$4 8,419	\$3,735.00
	SAN FRAN CA CY-CO PUB		7/19 /2 010	\$8 7,874	\$2,477.00
	CALIFORNIA ST DPT WTR		7/19/2010	\$37,804	\$1,908.00
	SACRAMENTO CA MUN UTIL		9/28/2010	\$41,117	\$3,990.00
	TOTAL			\$344,399	\$15,913.00
REDEEMED			Date of Trans	Amt of Trans	
	CALIFORNIA ST ECONOMIC		7/1/2010	\$48,370.00	\$0
	BONITA CALIF UNI SCH		8/2/2010	\$48,370.00	\$0
	BAKERSFIELD CALIF		9/15/2010	\$41,480.00	\$0
	LOS ANGELES CO CA CTFS		11/1/2010	\$62,190.00	\$0
	TOTAL			\$200,390.00	<u>\$0</u>
PURCHASES		DATE PUCHASED	ASSET VALUE	ESTIMATED INCOME	
	FAIRFIELD-SUISUN CA SWR	4/6/2010	\$4 8,397	\$1,797	
	DAVIS CALIF JT UNI SCH	5/6/2010	\$41,014	\$1,493	
	LOS ANGELES CALIF UNI	5/8/2010	\$46,203	\$2,073	
	CASTAIC LAKE WTR AGY	6/29/2010	\$44 ,172	\$1,658	
	PASADENA CALIF ELEC RV	8/3/2010	\$87,798	\$ 3,317	
	WESTSIDE CA UN SCH DIST	8/12/2010	\$4 3,978	\$1,658	
	CALIFORNIA ST DEPT WTR	8/1/1910	\$29,827	\$1,106	
	SOUTHERN CALIF PUB PWR	8/24/2010	\$ 52,749	\$2,073	
•	LOS RIOS CALIF CMNTY	10/19/2010	VV ., UV	\$1,382	
	NEWPORT BEACH CALIF CTFS	11/30/2010	\$74,857	\$2,764	

TOTAL