

HAND
DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT

FORM A
For use by Members, officers, and employees

Page 1 of 10

2012 MAY 15 AM 10: 53

Sam Farr

(Full Name)

(202) 225-2861

(Daytime Telephone)

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(Office Use Only)

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: CA District: 17	<input type="checkbox"/> Officer Or Employee	Employing Office:	A \$200 penalty shall be assessed against anyone who files late more than 30 days late.
Report Type	<input checked="" type="checkbox"/> Annual (May 15)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Termination Date:	

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 \$350 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 \$350 from one source)? If yes, complete and attach Schedule VII.	Yes <input checked="" type="checkbox"/> No <input 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 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 checked="" type="checkbox"/> No <input 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"/>
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 Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

SCHEDULE I - EARNED INCOME

Name Sam Farr

Page 2 of 10

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
Partners for Transition LLC	Spouse Salary	N/A
California Public Employees Retirement System/Legislative Retirement	Pension Income	\$19,280

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Sam Fair

Page 3 of 10

BLOCK A Asset and/or Income Source		BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
<p>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.</p> <p>Provide complete names of stocks and mutual funds (do not use ticker symbols.)</p> <p>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 threshold. 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.</p> <p>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.</p> <p>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.</p> <p>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.</p>		<p>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."</p>	<p>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 "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.</p>	<p>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 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.</p>	<p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
	Abbott Labs Stock	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	P
	AFLAC Stock	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	P
	Boeing Company Stock	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	S(part)
	Charles Schwab Money Market Account	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
	Charles Schwab Money Market and Mutual Funds (held in IRA)	\$15,001 - \$50,000	DIVIDENDS/Capital Gains (Reinvested)/INTEREST	\$201 - \$1,000	
	Chevron Stock	None	CAPITAL GAINS	\$201 - \$1,000	PS

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Sam Farr

Page 4 of 10

Chevy Chase Land Company	\$15,001 - \$50,000	DIVIDENDS	\$15,001 - \$50,000	
Colgate Palmolive Stock	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	
Congressional Federal Credit Union (IRA account)	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
Congressional Federal Credit Union (Savings and Checking Accounts)	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	

Devil's Flat Association	\$15,001 - \$50,000	None	NONE	
Du Pont Stock	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	P
General Electric Stock	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	S(part)
Genuine Parts Stock	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	P
Hewlett-Packard Stock	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	S(part)
IBM Corp. Stock	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	
Intel Corp. Stock	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
Interest - CA State Retirement System (includes CA Legislative Retirement)	\$15,001 - \$50,000	INTEREST	\$2,501 - \$5,000	
Lots 7, 9, 10 (SE corner of Santa Lucia & Carmine Real), Carmel, CA	\$500,001 - \$1,000,000	None	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Sam Farr

Page 5 of 10

Motorola Inc. Stock	None	None	NONE	S
MS Global Strategist Fund (held in Schwab IRA)	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
Pfizer Inc. Stock	None	None	NONE	S
Point 16, Big Sur, CA LLC Membership Interest	\$500,001 - \$1,000,000	RENT	\$50,001 - \$100,000	
Sharlands Investment Company	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
Sorensen's Resort Partnership Interest	\$15,001 - \$50,000	Other: Partnership distribution	\$5,001 - \$15,000	

Tahoe Cabin	\$15,001 - \$50,000	RENT	\$1,001 - \$2,500	
Union Pacific Stock	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	P
Vanguard Index 500 Fund (held in Schwab IRA)	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	P
Vanguard Intermediate Term Invest Grade Fund (held in Schwab IRA)	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	P
Vanguard Total Stk Mkt Fund (held in Schwab IRA)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P
Vista Lobos Apartments (Interest held through the Farr Children's Trust and the Delores Farr Trust. Filer is 50% beneficiary.)	\$250,001 - \$500,000	RENT	\$50,001 - \$100,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

SCHEDULE III - ASSETS AND "UNEARNED" INCOME					Name Sam Farr		Page 6 of 10
	Wal-Mart Stores Stock	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000		P	
	Walgreens Stock	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000		P	
	Wells Fargo Bank Stock	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200		P	

SCHEDULE IV - TRANSACTIONS

Name Sam Fair

Page 7 of 10

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 transaction. 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 example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	Abbott Labs Stock	P	N/A	1-27-11	\$1,001 - \$15,000
	AFLAC Stock	P	N/A	1-27-11	\$1,001 - \$15,000
	Boeing Stock	S(part)	Yes	2-10-11	\$15,001 - \$50,000
	Chevron Stock	S	No	2-26-11	\$1,001 - \$15,000
	Chevron Stock	P	Yes	2-10-11	\$1,001 - \$15,000
	Dupont Stock	P	N/A	10-26-11	\$1,001 - \$15,000
	General Electric Stock	S(part)	Yes	6-14-11	\$1,001 - \$15,000
	Genuine Parts Stock	P	N/A	6-14-11	\$1,001 - \$15,000
	Hewlett-Packard Stock	S(part)	Yes	6-14-11 and 10-26-11	\$1,001 - \$15,000
	Motorola Stock	S	Yes	1-27-11	\$1,001 - \$15,000
	Pfizer Stock	S	Yes	1-24-11	\$15,001 - \$50,000

SCHEDULE IV - TRANSACTIONS

Name Sam Farr

Page 8 of 10

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 transaction. 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 example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	Union Pacific Stock	P	N/A	2-10-11	\$1,001 - \$15,000
	Vanguard Index 500 Fund (held in Schwab IRA)	P	N/A	1-25-11 and quarterly	\$15,001 - \$50,000
	Vanguard Intermediate Term Invest Grade Fund (held in Schwab IRA)	P	N/A	1-27-11 and monthly	\$1,001 - \$15,000
	Vanguard Total Stk Mkt Fund (held in Schwab IRA)	P	N/A	1-25-11 and quarterly	\$1,001 - \$15,000
	Wal-Mart Stores Stock	P	N/A	10-26-11	\$1,001 - \$15,000
	Walgreens Stock	P	N/A	6-14-11	\$1,001 - \$15,000
	Wells Fargo Bank Stock	P	N/A	2-10-11	\$1,001 - \$15,000

SCHEDULE V - LIABILITIES

Name Sam Far

Page 9 of 10

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. NOTE: Pending legislation may require Members to report mortgages on personal residences.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
JT	Wells Fargo Bank	Jan. 2011	Mortgage on 26101 Camino Real, Carmel, CA (home)	\$250,001 - \$500,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Sam Farr

Page 10 of 10

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$350 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 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 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 spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
J Street Education Fund - Educational meetings on Israel-Palestinian conflict and regional issues	Jun. 3-11	DC-Cairo, Egypt-Jerusalem, Israel-DC	Y	Y	N	None
Center for Democracy in the Americas-Educational tour of Cuba	Aug. 7-12	DC-Havana, Cuba-Monterey, CA	Y	Y	N	None