Š	Yes 🔲 No 🗸	ttee on Ethics and certain other "excepted trusts" need not be ust benefiting you, your spouse, or dependent child?	ed by the Committails of such a tru	Trusts- Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certa disclosed. Have you excluded from this report details of such a trust benefiting you, your	
	STIONS	ATION ANSWER EACH OF THESE QUESTIONS	ST INFORM/	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWI	ا <u>س</u> ا
		schedule attached for each "Yes" response.		If yes, complete and attach Schedule V.	
iate	I and the appropri	Each question in this part must be answered and the appropriate	Yes V	Did you, your spouse, or a dependent child have any reportable liability V. (more than \$10,000) during the reporting period?	<u>.</u>
		If yes, complete and attach Schedule IX.		If yes, complete and attach Schedule IV.	
No	outside Yes ✔ No ☐	Did you have any reportable agreement or arrangement with an outside IX. entity?	Yes 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	<u>.</u> ₹
į		If yes, complete and attach Schedule VIII.		If yes, complete and attach Schedule III.	
S	Yes	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Yes 🗸 No 🗌	Did you, your spouse, or a dependent child receive "unearned" income of III. 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 VII.		If yes, complete and attach Schedule II.	
<u> </u>	or Yes ✓	Did you, your spouse, or a dependent child receive any reportable travel or VII. relmbursements for travel in the reporting period (worth more than \$335 from one source)?	Yes No V	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?	F
		If yes, complete and attach Schedule VI.		If yes, complete and attach Schedule I.	
8	Yes	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)?	Yes No 🗸	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 l. or more from any source in the reporting period?	<u>,-</u>
		QUESTIONS	OF THESE C	PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	<u>اح</u>
	late.	ation	☐ Termination	Type (☑)Annual (May 15) ☐ Amendment	
ys -	more than 30 days	Termination Date:		Report	
shall ainst	A \$200 penalty shall be assessed against	Officer Or Employing Office: Employee		Filer Member of the U.S. State: CA Status House of Representatives District: 06	
mly.)	(Office, Use Only)	(Daytime Telephone)	ı	(Full Name)	
Me 2011 MAY 16 PM 12: 13	MC 2011	(202) 225-5161		Lynn C. Woolsey	
		For use by Members, officers, and employees	ENT	CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT	ြဂ
	i di	FORM A Page 1 of 9	ATIVES	UNITED STATES HOUSE OF REPRESENTATIVES	_
					1

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.

¥es □

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	BLOCKA	вгоск в	вгоск с	ВГОСК D	BLOCK E
ASS Identify (a) ea	Asset and/or Income Source ldentify (a) each asset held for investment or production of income with	Year-End	Type of Income Check all columns that	Amount of Income For retirement accounts that	Transaction Indicate if asset
a fair market and (b) any o generated mo	a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of Income which generated more than \$200 in "unearned" income during the year.	at close of reporting year. If you use a valuation method	apply. For retirement accounts that do not allow you to choose specific investments or	do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or	had purchases (P), sales (S), or exchanges (E) exceeding
Provide com symbols.)	Provide complete names of stocks and mutual funds (do not use ticker symbols.)	other than fair market value, please specify the method used. If an	that generate tax-deferred income (such as 401(k) plans or IRAs), you may	IRAs), you may check the "None" column. For all other assets, indicate the category	\$1,000 in reporting year.
For all IRAs a self-directed exercised, to	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 was sold and is included only because it is generated income,	check the "None" column. Dividends, interest, and capital gains,	of income by checking the appropriate box below. Dividends, interest, and	
asset neig in the retirement account of the institution reporting period.	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.	"None."	be disclosed as income. Check "None" if the asset generated no income during the reporting	reinvested, must be disclosed as income. Check "None" if no income was earned or generated.	
For rental or address.	For rental or other real property held for investment, provide a complete address.		period.	1	
For an owner publically tra	For an ownership interest in a privately-held business that is not publically traded, state the name of the business, the nature of its activities, and its geographic location in Block A.				
Exclude: You vacation hom	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting				
	Apple Inc.	\$15,001 - \$50,000	None	NONE	
	Apple Inc. (IRA 1)	\$50,001 - \$100,000	None	NONE	
	Calvert Equity Fund (IRA 2)	\$50,001 - \$100,000	None	NONE	יד
	Calvert Moderate Allocation Fund (IRA 2)	\$15,001 - \$50,000	None	NONE	
	Calvert World Values Fund (IRA 2)	\$15,001 - \$50,000	None	NONE	
	Cisco Systems Inc. (IRA 2)	\$1,001 - \$15,000	None	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME Washington Mutual Investors Fund (529) Oppenheimer International Bond Fund (IRA 2) Templeton Global Bond Fund (IRA 2) Nordstrom Inc. (IRA 1) Growth Fund of America (529) \$50,001 -\$100,000 \$50,001 -\$100,000 \$15,001 -\$50,000 \$15,001 -\$50,000 \$50,000 \$15,001 -Name Lynn C. Woolsey None S(part) S(part) U Q Page 3 of 9

SCHEDULE IV - TRANSACTIONS

Name Lynn C. Woolsey

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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,		Type of	Capital Gain in		
JT	Asset	Transaction	of \$200?	Date	Amount of Transaction
	Calvert Bond Portfolio (IRA 2)	S(part)	No	02/10/10	\$1,001 - \$15,000
	Calvert Bond Portfolio (IRA 2)	S	N _o	02/22/10	\$50,001 - \$100,000
	Calvert Equity Fund (IRA 2)	P	N/A	02/22/10	\$50,001 - \$100,000
	Capital Income Builder (IRA 1)	S	N _o	10/04/10	\$1,001 - \$15,000
	Growth Fund of America (529)	ס	N/A	02/10/10	\$1,001 - \$15,000
	Nordstrom Inc. (IRA 1)	S(part)	No	10/04/10	\$1,001 - \$15,000
	Oppenheimer International Bond Fund (IRA 2)	S(part)	No	10/04/10	\$1,001 - \$15,000
	Washington Mutual Investment Fund (529)	P	N/A	02/10/10	\$1,001 - \$15,000

SCHEDULE V - LIABILITIES

Name Lynn C. Woolsey

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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. 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

JT CSP,	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
	Wright Patman Congressional Federal Credit Union	December 2010	Credit Card	\$10,001 - \$15,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Lynn C. Woolsey

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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 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

Source	Date(s)	Point of Departure DestinationPoint of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family g? Food? Member Included?) (Y/N) (Y/N)	Days not at sponsor's expense
Aspen Institute Congressional Program	April 5-11	San Francisco - Lisbon, Portugal - San Francisco	Υ	Υ	Y	None
Aspen Institute Congressional Program	August 16- 21	San Francisco - Vancouver, British Columbia (return trip paid for personally)	~	~	Z	None
Americans for Democratic Action	November 19-20	DC - Boston - DC	Y	~	Z	None

SCHEDULE VIII - POSITIONS

Name Lynn C. Woolsey

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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 honorary nature; and positions listed on Schedule I. educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an

Trustee Gallaudet University (unpaid) President Americans for Democratic Action (unpaid)	Position	Name of Organization
Americans for Democratic Action (unpa	Trustee	Gallaudet University (unpaid)
	President	Americans for Democratic Action (unpaid)

SCHEDULE IX - AGREEMENTS

Name Lynn C. Woolsey

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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.

April 1999 City of Petaluma	Date	
uma	Parties To	
Dental and Vision benefits from former employer	Terms of Agreement	

FOOTNOTES N 4 ယ Number Schedule IV Schedule III Schedule III Schedule IV Section / Schedule EJ Cust FBO David Woolsey c/o Lynn Woolsey (Inherited EJ Cust FBO Lynn Woolsey Sep IRA Decedent IRA) EJ Cust FBO Lynn Woolsey Sep IRA Decedent IRA) EJ Cust FBO David Woolsey c/o Lynn Woolsey (Inherited Name Lynn C. Woolsey Footnote RA 1 IRA 2 IRA 2 RA 1 the following item This note refers to Page 9 of 9