res No L	Insactions, or liabilities of a spouse or dependent child because with the Committee on Ethics.	d" income, trar irst consulted	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spot they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.
1. Have you Yes No No	nd certain other "excepted trusts" need not be disclosed. Have you hild?	e on Ethics an dependent ch	TRUSTS —Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepexcluded from this report details of such a trust benefiting you, your spouse, or dependent child?
HESE QUESTIONS	RMATION — ANSWER EACH OF THESE QUESTIONS	TINFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
stion in this part must be answered and the schedule attached for each "Yes" response.	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response	S S	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.
ement with Yes No	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	S S	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.
re the date Yes No	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.	No.	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.
reporting Yes No	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.	§ S	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.
ng more Yes No	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.	S N	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
	SE QUESTIONS	OF THESE	PRELIMINARY INFORMATION — ANSWER EACH
A \$200 penalty shall be assessed against anyone who files more than 30 days late.	Employing Office: Termination Date:	Officer or Employee	Filer Member of the U.S. State: M4 Status House of Representatives District: Report Mannual (May 15, 2012) Amendment
HAND DELIVERED (Office Use Only)	ربا Daytime Telephone: 202-225-5341	Daytime	Name: Chris Van Hellen
2012 MAY 15 PM 2: 10	Form A For use by Members, officers, and employees	MENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT

Name
Van
Hellan
Page 2_c

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.

Source	Type	Amount
-	Approved Teaching Fee	\$6,000
State of Maryland	Legislative Pension	\$9,000
Civil War Roundtable (Oct. 2nd) Ontario County Board of Education	Spouse Speech Spouse Salary	\$1,000 NA
Amideact, Washington, D.C.	spouse Salary	
1	, ,	
	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	

BLOCK A BLOCK B

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 more than \$200 in "unearned" income during the year. reportable asset or sources of income which generated the end of the reporting period, and (b) any other

not use ticker symbols.) Provide complete names of stocks and mutual funds (do

value at the end of the reporting period. the name of the institution holding the account and its account that exceeds the reporting thresholds. For retireinvestments), provide the value for each asset held in the plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific For **all IRAs** and other retirement plans (such as 401(k) ment accounts which are not self-directed, provide only

For rental or other real property held for investment, pro-vide a complete address.

tion in Block A. that is not publicly traded, state the name of the busi-For an ownership interest in a privately-held business ness, the nature of its activities, and its geographic loca-

Savings Plan. accounts; and any financial interest in, or income derived ing \$5,000 or less in a personal checking or saving income during the reporting period); any deposits totalhomes and vacation homes (unless there was rental Exclude: Your personal residence, including second rom, a federal retirement program, including the Thrift

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.

<u>8</u> SP

Examples:

Simon & Schuster

1st Bank of Paducah, KY Accounts

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Mega Corp. Stock

Hessico, Inc.

Stock

suggestional Fed, Cent Union

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3

15 and the stack

Md tension Player

men beak beat to floor

Value of Asset

please specify the method used. method other than fair market value, reporting year. If you use a valuation Indicate value of asset at close of

generated income, the value should be year and is included only because it "None." If an asset was sold during the reporting

> Type of Income BLOCK C

that generate tax-deferred income you to choose specific investments or Check all columns that apply. For retirement accounts that do not allow may check the "Tax-Deferred" column. (such as 401(k) plans or iRAs), you

if the asset generated no income dur disclosed as income. Check "None" Dividends, interest, and capital ing the reporting period. gains, even if reinvested, must be

> Amount of Inco BLOCK D

BLOCKE

the appropriate box below. cate the category of income earned or generated. reinvested, must be dis interest, and capital gair For assets for which you ch Deferred" in Block C, you ma income. Check "None" if no "None" column. For all other

income was	closed as	ns, even if	Dividends,	by checking	assets, indi-	ay check ule	lecked lax-	adad Tay	me	
уваг.	reporting	\$1,000 in	(E) exceeding	or exchanges	(P), sales (S),	purchases	asset had	Indicate if the	Transaction	בייייייייייייייייייייייייייייייייייייי

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×			× `	×	1			\$1,001 - \$15,000	C
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								\$250,001 - \$500,000	۵
								\$500,001 - \$1,000,000	I
								\$1,000,001 - \$5,000,000	_
								\$5,000,001 - \$25,000,000	د
								\$25,000,001 - \$50,000,000	7
								Over \$50,000,000	<u></u>
								NONE	
	X	X	\times				×	DIVIDENDS	
					×			RENT	
				×				INTEREST	
	1						×	CAPITAL GAINS	
	·	<u> </u>						EXCEPTED/BLIND TRUST	
		\Box						TAX-DEFERRED	
N/A						Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	
								None	_
(\times	X		×				\$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	×
							S (partial)	sold, please indicate as follows: (S) (partial) See below for example. P, S, E	If only a portion of an asset is

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HEDULE V— LIABILITI
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	Page Sof 6

business in which you own an interest (unless you 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 close of the preceding calendar year exceeded \$10,000. **NOTE**: Pending legislation may require Members to report 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 it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a mortgages on personal residences.

				DC, JT	}	
J.P. Moyan Chase	Aworn Martgage	TNG DIRCT	Example: First Bank of Wilmington, DE	Creditor		
Nov. 2011	Mov. 2011	Sept-2008	May 1998	Incurred Mo/Year	Liability	Date
11	1000	Sept. 2008 Martgage, Kenson ton, Md.	Mortgage on 123 Main St., Dover, DE	Type of Liability		
 	ļ .			\$10,001- \$15,000	>	
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				\$1,000,000 \$1,000,001-	G	Amount of Liability
		_		\$5,000,000 \$5,000,001	 H	
 	-	 		\$25,000,000	_	
				\$25,000,001 \$50,000,000	-	•

SCHEDULE VI— GIFTS

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 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.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

relationship to you. Gifts with a value of \$140 or less need not be added towards the \$350 disclosure threshold.

Parties To Terms of Agreement		Date
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 c government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in a employee welfare or benefit plan maintained by a former employer.	Identify the date, parties to, and general terms of any agreement o government service; continuation or deferral of payments by a fornemployee welfare or benefit plan maintained by a former employer.	Identify the d government : employee we
S	SCHEDULE IX—AGREEMENTS	SCHEDUL
	i i	
Boys & Gurls Club of Greater lebeshington	Drectors	Bd. of
Name of Organization	Position	
Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organiza tions); and positions solely of an honorary nature.	Exclude: Positions listed on Schedule I; positions tions); and positions solely of an honorary nature.	Exclude: Potions); and p
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 other business enterprise, any nonprofit organization, any labo organization, or any educational or other institution other than the United States.	positions, compensated or representative, employee, contains, or any educational or other.	Report all proprietor, rorganization

SCHEDULE VIII—POSITIONS

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