Yes No X	sactions, or liabilities of a spouse or dependent child be with the Committee on Standards of Official Conduct.	EXEMPTION—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 Standards of Official Conduct.
need not Yes No	sof Official Conduct and certain other "excepted trusts" spouse, or dependent child?	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct 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?
HESE QUESTIONS	MATION — ANSWER EACH OF THESE QUESTIONS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
be answered and the reach "Yes" response.	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?  **No **If yes, complete and attach Schedule V.**
ement Yes No No	<ul><li>IX. Did you have any reportable agreement or arrangement with an outside entity?</li><li>If yes, complete and attach Schedule IX.</li></ul>	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.	III. Did you, your spouse, or a dependent child receive "uneamed" 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.
ve any sporting Yes No 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 \$335 from one source)? If yes, complete and attach Schedule VII.	II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the Yes No Yes Yes Yes Yes Yes No
g 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 \$335 and not otherwise exempt)?  If yes, complete and attach Schedule VI.	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?  Yes No No.
	E QUESTIONS	PRELIMINARY INFORMATION - ANSWER EACH OF THESE
than 30 days late.	Termination Date:	Report Adnual (May 17, 2010)  Amendment
A \$200 penalty shall be assessed	Employing Office:	Status Member of the U.S. State: A Officer or Employee
(Office Use Only)		
2018 100 × 5 100 100 50 11	Daytime Telephone: 201-125-5065	Name: FORTHEY PETE STAKK Daytime
DELIVERED	Form A For use by Members, officers, and employees	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT

# 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.	nefits received under the Social Sec	urity Act.
Source	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
Examples: State of Maryland	Legislative Pension	\$9,000
	Spouse Speech	\$1,000
PEW Charitalle Foundation	demone southy	RN
Kello & Toundation	Spoure consulur	ИA
- Mary - Mary -		

BLOCK E

#### **BLOCK A**

Asset and/or Income Source

Block A. For additional information, see of its activities, and its geographic location reporting threshold. For retirement plans that are not self-directed, name the institution holding the od, and (b) any other asset or sources of income exceeding \$1,000 at the end of the reporting peritraded, state the name of the business, the nature period. For an active business that is not publicly provide the value and income information names of stocks and mutual funds (do not use income during the year. For rental property or duction of income with a fair market value instruction booklet. account and its value at the end of the reporting each asset in the account that exceeds the *not exercised,* to select the specific investments), (i.e., plans in which you have the power, even if plans (such as 401(k) plans) that are self directed ticker symbols). For all IRAs and other retirement land, provide a complete address. Provide full which generated more than \$200 in "uneamed" identify (a) each asset held for investment or pro-9

your spouse, or by you or your spouse's child, Exclude: Your personal residence(s) (unless Government retirement programs. cial interest in or income derived from U.S. there is rental income); any debt owed to you by parent, or sibling; any deposits totalling \$5,000 or ess in personal savings accounts; and any finan-

optional column on the far left. dependent child (DC) or is jointly held (JT), in the or income source is that of your spouse (SP) or If you so choose, you may indicate that an asset

None

\$1,001 - \$15,000

\$50,001 - \$100,000

DC, Examples

Mega Corp. Stock Simon & Schuster

×

D & PASC

YODEX

SODO:

deleath

John Com One

thems accts

1st Bank of Paducah, KY Accounts

11.30

ge & Grand Fund

#### Value of Asset **BLOCK B**

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

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

m

Check all columns that apply. For retirement plans or accounts that do Check "None" if asset did not generate any income during calendar year. vested, should be listed as income. all other assets *including all IRAs*, investments, you may write "NA." For not allow you to choose specific ing the appropriate box below. indicate the type of income by check-Dividends and interest, even if rein-

Type of Income **PLOCK C** 

or generated. Check "None" if no income was earned vested, should be listed as income. Dividends and interest, even if reinchecking the appropriate box below indicate the category of income by For all other assets, including all IRAs, ments, you may write "NA" for income. not allow you to choose specific invest-

Amount of Income BLOCK D

For retirement plans or accounts that do purchases (P) \$1,000 in exceeding exchanges (E) sales (S), or asset had Indicate if the **Transaction** 

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Ĺ				<u> </u>					\$1,000,001 - \$5,000,000	1
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							Royalties		Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	ate any incomine outling calendar year.
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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Namo FORTNEY PETE STARK

Page 4 of 8

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2	Notice Comp Naw Com. Such	Samua Bonda Mt Stan Salat Utility Find Ngan Mart Mark Fund	DUSRREET-RAICHENTUM	Stand REST!		Showth County Trust	Stillenmant Verhan		BLOCK A Asset and/or income Source	on minuation sneet (ii needed)
18.37							2 6	None		
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# SCHEDULE IV- TRANSACTIONS

Name FORTNEY PETE STARK Page 5 of 8

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															SP	SP, DC, JT	Capital G of \$200, cl	action. Ex dren, or ti ates renta cate (i.e.,	Report an or depend enty held
												Vanguard REIT Indus June	Maple Scot Duc Lynna	Potestox onthe san I ma	Example: Mega Coporation Common Stock (partial sale)	Γ.	Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.	action. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is soid, please so indicate (i.e., "pertial sale"). See example below.	Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted in a cartiel loss Broude a basis dependent of the control of
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### SCHEDULE V- LIABILITIES

Name FORTNEY PETE STARK Page 6 of &

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 business in which you own an interest; 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.

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	Cheo Schwal, One	Rollandon tigo busurance co	Americaia Servicing Co.	First Bank of Wilmington, Delaware	Creditor	cares) only if the balance at the close of the preceding calendar year exceeded \$10,000.
	markin fram	Franco So. Son Francisco	and Star mark De	Mortgage on 123 Main St., Dover, Del.	Type of Liability	exceeded #10,000.
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	X				\$50,000	
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#### SCHEDULE VI - GIFTS

Report the source, a brief description, and the value of all gifts totalling more than \$335 received by you, your spouse, or a dependent child from any source during the year. relationship to you. Gifts with a value of \$134 or less need not be added towards the \$335 disclosure threshold. 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

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 Standards)	\$345

•

# SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed by the sponsor. the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor 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 Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$335 received by

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)	City of Departure - Destination - City of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Number of days <u>not</u> at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	DC-Chicago-DC	z	z	Z	None
Roycroft Corporation	Aug. 6–11	DC-Los Angeles-Cleveland	Υ	Y	<b>~</b>	2 Days
gagon breatists anguesons	doug. []-21	aug. 17-21 SFO-Bany, General - 500	Y	Y	Y	None
8	0	•			•	
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## SCHEDULE VIII-POSITIONS

Name FORTNEY PETE STARK

Page 8 of 8

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 non profit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

zations); 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 organi-

Position	Name	of Organization
Audiolent & Quiectar	Look brosstrant Co, One.	Fremond, CA
President's Airector	Res Leant Foundation	Frement, CA

## SCHEDULE IX—AGREEMENTS

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; continuing participation in an employee welfare or benefit plan maintained by a former employer; or publication of a book.