	₹ ×	É	child because	sactions, or liabilities of a spouse or dependent child because with the Committee on Ethics.	d" income, tran	ver assets, "unearner rs" unless you have f	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	
	₹ ×		closed. Have you	d certain other "excepted trusts" need not be discille?	e on Ethics an dependent ch	ved by the Committe you, your spouse, or	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?	
!	S	UESTION	EACH OF THESE QUESTIONS	- ANSWER	TINFOR	NT, OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	
	the onse.	wered and Yes" response	this part must be answered and the ule attached for each "Yes" response	Each question in this part n appropriate schedule attache	8	Yes X	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.	
	No X	Yes	agreement or arrangement with shedule IX.	IX. Did you have any reportable agreement or a an outside entity? If yee, complete and attach Schedule IX.	No X	Ng Yes	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 yee, complete and attach Schedule IV.	
	No	Yes X	e positions on or before the date year? chedule VIII.	VIII. Did you hold any reportable positions on or of filing in the current calendar year? If yee, complete and attach Schedule VIII.	No 🔲	weriod? Yes X	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.	
	₹	¥°8 ×	n the reporting	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.	No X	Yes	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	receive any regating more	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.	N _o	ries or riod? Yes X	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.	
	: '			E QUESTIONS	OF THESE	ANSWER EACH	PRELIMINARY INFORMATION — ANS	-
	more than	A WITO HINES	30 days late.	Termination Date:		Amendment	Report X Annual (May 15, 2012)	
	essessed	ty shall be	A \$200 penalty shall be assessed	or Employing Office:	Officer or Employee	California 36	Filer X Member of the U.S. State: C. Status	
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MINES	REPRESENT	MU.S. HOUSE OF REPRESENTATIVES		Daytime Telephone: (213) 452-6565	Daytime '		Name: Janice Kay Hahn	-
55	IS PA S	COLCULATION TO SE US	-					
CEMII:	RESOURCE	LEGISI ATIVE RESOURCE CLATT:	<u></u>	Form A For use by Members, officers, and employees	MENT	NTATIVES OSURE STATE	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT	
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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	Туре	Amount
The state of the s	Approved Teaching Fee	\$6,000
	Legislative Pension	\$9,000
	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	N
City of Los Angeles	Salary	\$96,844.04

ment accounts which are not self-directed, provide only the name of the inatitution holding the account and its value at the end of the reporting period. For rental or other real property held for investment, pro- vide a complete addiress. For an ownership interest in a privately-held business that is not publicly traded, state the name of the busi-	BLOCK A Asset and/or Income Source Asset and/or Income Source Identity (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 sources of income which generated more than \$200 in "unearmed" income during the year. Provide complete names of stocks and mutual funds (do not use ticker symbots.) 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, swan if not exercised, to select the specific investments), provide the value for each asset held in the ecocurit that exceeds the reporting thresholds. For retire-	SCHEDULE III—ASSETS AND "UNEARNED" INCOME
A 8 C D E T G H	BLOCK B Value of Asset Indicate 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 during the reporting year and is included only because it generated income, the value should be "None."	"UNEARNED" INCOME
n fricome)	BLOCK C Type of income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments at that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "Tax-Deferred" column. Dividende, interest, and capital gains, even if reinvested, must be diaclosed as income. Check "None" if the asset generated no income during the reporting period.	Name Janice Kay Hahn
- III	Amount of Income For assets for which you checked "Tax- Deferred" in Block C, you may check the "None" column. For all other assets, indi- cate 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 earmed or generated.	
If only a portion of XI an asset is sold, please indicate as follows:	BLOCK E Transaction Indicate if the asset had purchases if (P), sales (S), ig or exchanges is, (E) exceeding if \$1,000 in reporting as year.	Page 3 of 6

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SCHEDULE V— LIABILITIES

Name Janice Kay Hahn

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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 (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 mortgages on personal residences.

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

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	\$375

Name Janice Kay Hahn	
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SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling 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

spouse or dependent child that is totally independent of his or her relationship to you. 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 or were paid by you and reimbursed 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

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Source	Date(s)	City of Departure—Destination— City of Return	Lodging? (Y/N)	Food?	Was a Family Member included? (Y/N)	Number of days <u>not</u> at sponsor's expense
Chicago Chamber of Commerce	Mar. 2	DC—Chicago—DC		z	Z	None
Roycroft Corporation	Aug. 6–11	DC—Los Angeles—Cleveland	Υ	Υ	Y	2 Days
American Israel Education Foundation	8/7/11-8/15/11	New York - Israel - New York	Υ	~	Z	None
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SCHEDULE VIII—POSITIONS

Name Janice Kay Hahn Page 6 of 6

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

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

Position	Name of Organization
Regional Council Member	Southern California Association of Governments
Board Member	South Bay Cities Council of Governments
Board Member	Alameda Corridor Transportation Authority

SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. 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

			Date
			Parties To
			Terms of Agreement