

UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

FORM A
For use by Members, officers, and employees

HAND DELIVERED
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OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
1000 AVENUE RESOURCE CENTER

2011 MAY 11 PM 1:50

Lynn M. Jenkins
(Full Name)

202-225-6601
(Daytime Telephone)

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

ME

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives State: <u>KS</u> District: <u>2</u>	<input type="checkbox"/> Officer Or Employee Employing Office: _____
Report Type	<input checked="" type="checkbox"/> Annual (May 15) <input type="checkbox"/> Amendment <input type="checkbox"/> Termination	Termination Date: _____
A \$200 penalty shall be assessed against anyone who files more than 30 days late.		

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? <i>If yes, complete and attach Schedule I.</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	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)? <i>If yes, complete and attach Schedule VI.</i>	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? <i>If yes, complete and attach Schedule II.</i>	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 \$335 from one source)? <i>If yes, complete and attach Schedule VII.</i>	Yes <input type="checkbox"/> No <input checked="" 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? <i>If yes, complete and attach Schedule III.</i>	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? <i>If yes, complete and attach Schedule VIII.</i>	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? <i>If yes, complete and attach Schedule IV.</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? <i>If yes, complete and attach Schedule IX.</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? <i>If yes, complete and attach Schedule V.</i>	Yes <input type="checkbox"/> No <input checked="" 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 III - ASSETS AND "UNEARNED" INCOME

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BLOCK A

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 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.

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

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 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.

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.

Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any derivative holding of an asset in a nominal holding or

BLOCK B

Year-End 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 and is included only because it is generated income, the value should be "None."

BLOCK C

Type of Income

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.

BLOCK D

Amount of Income

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.

BLOCK E

Transaction

Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.

DC1	529 ESA - Learning Quest 500 Index	\$15,001 - \$50,000	None	NONE	P
DC2	529 ESA - Learning Quest Total Growth Index	\$15,001 - \$50,000	None	NONE	P
	Allianz NFJ Divident Value Fund (part of Kansas Public Employees 457 plan)	\$15,001 - \$50,000	None	NONE	
	Fidelity Contrafund (part of Kansas Public Employees 457 plan)	\$15,001 - \$50,000	None	NONE	
	American Funds Growth Fund R5 (part of Kansas Public Employees 457 plan)	\$15,001 - \$50,000	None	NONE	

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Baron Growth Fund (part of Kansas Public Employees 457 plan)	\$15,001 - \$50,000	None	NONE	
American Funds Capital World Growth & Income Fund R5 (part of Kansas Public Employees 457 plan)	\$15,001 - \$50,000	None	NONE	
Kansas Public Employees Retirement System (1)	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	
Vanguard Prime Money Market Fund (VMMXX)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
Vanguard 500 Index Fund Admiral Shares (VFIAX) (formerly Vanguard 500 Index Fund Investor Shares (VFINX))	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	E
Vanguard PRIMECAP Fund Investor Shares (VPMCX)	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
Vanguard Total International Stock Index Fund (VGTSX)	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
Vanguard Windsor II Fund Investor Shares (VWNFX)	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
AIM Sector Funds Invesco Van Kampen Capital Growth Fund Class A (ACPA) (name change)	\$1,001 - \$15,000	None	NONE	
Berkshire Hathaway Class B (BRK/B)	\$1,001 - \$15,000	None	NONE	
British Petroleum PLC Sponsored ADR (BP)	None	DIVIDENDS	\$1 - \$200	S
Cresud SACIFYA (CRESY)	None	CAPITAL GAINS	\$1,001 - \$2,500	PS

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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Healthcare Services Group (HCSG)	\$1,001 - \$15,000	None	NONE	P
iShares Silver Trust (SLV)	None	CAPITAL GAINS	\$201 - \$1,000	S
iShares Trust S&P Global Utilities Index Fund (JXI)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
Johnson & Johnson (JNJ)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P
Kodiak Oil & Gas Corp (KOG)	\$1,001 - \$15,000	None	NONE	P
L & L Energy (LLEN)	\$1,001 - \$15,000	None	NONE	P
Loews Corp (L)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
Market Vectors ETF Trust Junior Gold Miners (GDXJ)	None	CAPITAL GAINS	\$201 - \$1,000	S
McDonald's Corp (MCD)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
Perma-Fix Environmental Services (PESI)	\$1,001 - \$15,000	None	NONE	
ProShares Trust ProShare UltraShort MSCI Emerging Market FD (EEV)	\$1,001 - \$15,000	None	NONE	
ProShares Trust ProShare UltraShort 500 Fund (SDS)	\$1,001 - \$15,000	None	NONE	
San Juan Basin Royalty Trust (SJT)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P
Target Corp (TGT)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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Teva Pharmaceutical Industries Limited ADR (TEVA)	None	DIVIDENDS/CAP ITAL GAINS	\$201 - \$1,000	S

SCHEDULE IV - TRANSACTIONS

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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, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
DC1	529 ESA - Learning Quest 500 Index	P	N/A	MONTHLY	\$1,001 - \$15,000
DC2	529 ESA - Learning Quest Total Growth Index	P	N/A	MONTHLY	\$1,001 - \$15,000
	Vanguard 500 Index Fund Admiral Shares (VFIAX) - formerly Vanguard 500 Index Fund Investor Shares (VFINX)	E	N/A	12-06-10	\$1,001 - \$15,000
	British Petroleum PLC Sponsored ADR (BP)	S	No	05-04-10	\$1,001 - \$15,000
	Cresud SACIFYA (CRESY)	P	N/A	09-02-10	\$1,001 - \$15,000
	Cresud SACIFYA (CRESY)	S	Yes	10-29-10	\$1,001 - \$15,000
	Healthcare Services Group (HCSG)	P	N/A	11-23-10	\$1,001 - \$15,000
	iShares Silver Trust (SLV)	S	Yes	10-29-10	\$1,001 - \$15,000
	Johnson & Johnson (JNJ)	P	N/A	09-02-10	\$1,001 - \$15,000
	Kodiak Oil & Gas Corp (KOG)	P	N/A	11-23-10	\$1,001 - \$15,000
	L & L Energy (LLEN)	P	N/A	11-23-10	\$1,001 - \$15,000

SCHEDULE IV - TRANSACTIONS

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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, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	Market Vectors ETF Trust Junior Gold Miners (GDXJ)	S	Yes	09-02-10	\$1,001 - \$15,000
	San Juan Basin Royalty Trust (SJT)	P	N/A	05-04-10	\$1,001 - \$15,000
	Teva Pharmaceutical Industries Limited ADR (TEVA)	S	No	09-02-10	\$1,001 - \$15,000

SCHEDULE IX - AGREEMENTS

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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.

Date	Parties To	Terms of Agreement
Indefinite	Kansas Public Employees Retirement System	I am a participant in the KPERS defined benefit retirement plan.

FOOTNOTES

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Number	Section / Schedule	Footnote	This note refers to the following item
1	Schedule III	This entry is for my KPERS account balance, which represents my total contributions to the KPERS defined benefit plan plus interest. It is not a "defined contribution" account and there are no available investment choices.	Kansas Public Employees Retirement System