EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE ( 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?  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.	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.  IV. Did you have any reportable agreement or arrangement with an outside entity?  If yes, complete and attach Schedule IV.  IV. Did you have any reportable agreement or arrangement with an outside entity?  If yes, complete and attach Schedule IV.  IV. Did you have any reportable agreement or arrangement with an outside entity?  If yes, complete and attach Schedule IV.  If yes, complete and attach Schedule IV.  IV. Did you have any reportable agreement or arrangement with an outside entity?  If yes, complete and attach Schedule IX.  IV. Did you have any reportable agreement or arrangement with an outside entity?  If yes, complete and attach Schedule IX.  IV. Did you have any reportable agreement or arrangement	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.  III. Did you, your spouse, or a dependent child receive "unearned" reportable asset worth more than \$1,000 at the end of the period?  If yes, complete and attach Schedule III.  IVIII. Did you, your spouse, or a dependent child receive and attach schedule VIII.  IVIII. Did you, your spouse, or a dependent child receive and attach schedule VIII.  IVIII. Did you, your spouse, or a dependent child receive and attach schedule VIII.  If yes, complete and attach schedule VIII.  IVIII. 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 VIII.  If yes, complete and attach Schedule VIII.	PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS  1. 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 han \$335 and not otherwise exempt)?  If yes, complete and attach Schedule 1.	Status	Name: Buian Baird Daytime Telephone: 425-361-1507	UNITED STATES HOUSE OF REPRESENTATIVES  Form A  CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATEMENT  For use by Members, officers, and employees
EACH OF THESE QUESTIONS  her "excepted trusts" need not Yes Nor dependent child because Yes Nor Official Conduct.	table agreement or arrangement  No No No Note that the like the li	ild receive any I in the reporting se)? or before the date	id receive any gregating more	A \$200 penalty s against anyone than 30 days late	2011F	FEB
Yes	Yes and 'Yes' respo		Yes	A \$200 penalty shall be assessed against anyone who files more than 30 days late.	2011 FEB 11 AM 11: 25  OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES	FEB - 4 201 Page 1 of C
S S S	the onse.	§ §	\$	ssessed s more	II: 25	FEMALE CONTINUES

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Page 2 of B

## 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 benefit	ts received under the Social Security Act.	curity Act.
Source	Туре	Amount
Keens State	Approved Teaching Fee	\$6,000
State of Maryland	Legislative Pension	\$9,000
Examples: Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	NA
Pearson Education	Royalties	21,000
Contractor 6 Wood Deception mont	Smouse Salary	NA
Modation Reference Bureau	5 mon se long long	74
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# SCHEDULE III — ASSETS AND "UNEARNED" INCOME

each asset in the account that exceeds the od, and (b) any other asset or sources of income exceeding \$1,000 at the end of the reporting periduction of income with a fair market value of its activities, and its geographic location account and its value at the end of the reporting period. For an active business that is not publicly reporting threshold. For retirement plans that are not self-directed, name the institution holding the provide the value and income information on plans (such as 401(k) plans) that are self directed land, provide a complete address. Provide full Identify (a) each asset held for investment or proinstruction booklet. Block A. For additional information, not exercised, to select the specific investments), ticker symbols). For all IRAs and other retirement ncome during the year. For rental property or raded, state the name of the business, the nature (i.e., plans in which you have the power, even if names of stocks and mutual funds (do not use which generated more than \$200 in "uneamed" 968 Þ "None."

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If only a

asset is sold, portion of an

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

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

None

\$1 - \$1,000

\$1,001 -- \$15,000

\$15,001 - \$50,000

\$50,001 - \$100,000

\$100,001 - \$250,000

\$250,001 - \$500,000

Over \$50,000,000

NONE

DIVIDENDS RENT

INTEREST

None

\$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

\$1,000,001

Over \$5,000,000

\$100,001 - \$1,000,000

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-\$5,000,000

example.

See below for

(S) (partial)

as follows: please indicate

**CAPITAL GAINS** 

\$500,001 - \$1,000,000

\$1,000,001 - \$5,000,000

\$5,000,001 - \$25,000,000

\$25,000,001 - \$50,000,000

EXCEPTED/BLIND TRUST

(Specify: For Example, Partnership income or Farm Income)

Other Type of Income

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Mega Corp. Stock Simon & Schuster

1st Bank of Paducah, KY Accounts

indefinite

Royalties

×

×

S (partial)

×

Examples:

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Frd Cird.+

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Fod Cord. + Money MK+

MKHRETIN

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Kot America

Checking

#### Value of Asset BLOCK B

Asset and/or income Source

**BLOCK A** 

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 If an asset was sold during the reporting year and is included only because it

investments, you may write "NA." For Check all columns that apply. For retirement plans or accounts that do ate any income during calendar year. Check "None" if asset did not genervested, should be listed as income. ing the appropriate box below.

Dividends and interest, even if reinindicate the type of income by checkall other assets including all IRAs, not allow you to choose specific

#### Type of Income

BLOCK C

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

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

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME Continuation Sheet (if needed) 8 ŞP Ħ Asset and/or income Source BLOCK A 529 None В \$1 - \$1,000 C \$1,001 - \$15,000 ט \$15,001 - \$50,000 Value of Asset ш BLOCK B
Year-End \$50,001 -- \$100,000 \$100,001 - \$250,000 Ø \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 ᄌ Over \$50,000,000 NONE DIVIDENDS RENT BLOCK C
Type
of Income INTEREST **CAPITAL GAINS** EXCEPTED/BLIND TRUST Other Type of Income (Specify) \$1 - \$200 Amount of Income = \$201 - \$1,000 < \$1,001 - \$2,500. BLOCK D < \$2,501 - \$5,000 ≤ \$5,001 - \$15,000 VII VIII \$15,001 - \$50,000 \$50,001 - \$100,000  $\overline{\mathsf{x}}$ \$100,001 - \$1,000,000 × \$1,000,001 - \$5,000,000 × Over \$5,000,000 Transaction BLOCK E ரைவு

# SCHEDULE IV- TRANSACTIONS

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Page 5 of 1

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 capital loss. Provide a brief description of any exchange trans- action. Exclude transactions between you, your spouse or dependent chil- dren, or the purchase or sale of your personal residence, unless it gener-	ates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	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.	SP, DC, J∏ Asset	Example:   Mega Copor	JT Restal Nomes OC	JT 03 Row - Frid +442010															
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	<b>x</b>		Over \$50,000				.,			1												

### SCHEDULE V- LIABILITIES

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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 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

JT, CSP,	Creditor	Type of Liability	\$10,001- \$15,000 ED	\$15,001- \$50,000 C \$50,001- \$100,000 D	\$100,001	\$250,000 m \$250,001- \$500,000 T \$500,001- \$1,000,000 ©	\$500,001- \$1,000,000 ຄ	\$5,000,000	\$5,000,001- \$25,000,000- \$50,000,000- Over
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.		12.00	×			10 p.	
75	GMAC Mortgon on M. Hours	nistyayor DC Home			303		X		
$J^{+}$	CACA 1 16 180	undo Adageou De Home		*	igipheri.				
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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 \$134 or less need not be added towards the \$335 disclosure threshold. 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.

**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