

AND DELIVERED

Bradley James Sherman
(Full Name)

(202)225-5911
(Daytime Telephone)

2011 MAY 13 PM 5:54
(Office Use Only)

LEGISLATIVE RESOURCE CENTER

NE

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: CA District: 27	<input type="checkbox"/> Officer Or Employee	Employing Office:	U.S. HOUSE OF REPRESENTATIVES
	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? If yes, complete and attach Schedule I.	Yes <input checked="" type="checkbox"/> No <input 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)? If yes, complete and attach Schedule VI.	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? If yes, complete and attach Schedule II.	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)? If yes, complete and attach Schedule VII.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$1,000 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.	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? If yes, complete and attach Schedule VIII.	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? If yes, complete and attach Schedule IV.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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.	Yes <input checked="" type="checkbox"/> No <input 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 I - EARNED INCOME

Name Bradley James Sherman

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$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.

Source	Type	Amount
Federal Government	Spouse Salary	N/A

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 position; E.O. 13690 or laws in a national abortion 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.
JT Bank of America Washington, DC BeeBee Draw/Hambert Combined Properties (valuation is rough estimate; royalties net of expenses.)	\$1,001 - \$15,000 \$15,001 - \$50,000	INTEREST ROYALTIES	\$1 - \$200 \$1,001 - \$2,500	
CA State legislators retirement Pension from service on the CA Board of Equalization, valued at 6/30/10 (end of fiscal year) Sacramento, CA	\$100,001 - \$250,000		NA	
Dreyfus CA Tax Exempt Bond - Dreyfus Fund, Box 9387 Providence, RI 29401	\$1,001 - \$15,000	DIVIDEND	\$201 - \$1,000	P (part)

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Bradley James Sherman

Home with rental in Washington DC (address confidential; rent is gross before expenses)

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

RENT

\$5,001 - \$15,000

Joint Powers Authority Muni Bond
Richmond, CA

None

INTEREST

\$1,001 - \$2,500

S

Pacoima Credit Union
Lakeview Terrace, CA

\$1 - \$1,000

INTEREST

\$1 - \$200

Union Bank of California
Los Angeles, CA

\$15,001 - \$50,000

INTEREST

\$1 - \$200

US Savings Bond (interest earned; not received)

\$100,001 - \$250,000

INTEREST

\$5,001 - \$15,000

Value of CPA Practice
Equipment, including Furniture

\$1 - \$1,000

None

NONE

Vanguard Intermediate CA Tax Exempt Bond Fund
PO Box 105433
Atlanta, GA 30348

\$15,001 - \$50,000

DIVIDENDS

\$5,001 - \$15,000

S(part)
P(part)

Vanguard TIPS Fund (IRA)
PO Box 105433
Atlanta, GA 30348

\$100,001 - \$250,000

DIVIDENDS

NA

Vanguard TIPS Fund (personal account; not IRA)
PO Box 105433
Atlanta, GA 30348

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

DIVIDENDS

\$15,001 - \$50,000

S(part)
P(part)

Water District Municipal Bond
Baldy Mesa, CA

\$50,001 - \$100,000

INTEREST

\$1,001 - \$2,500

Wescam Credit Union (Second Account)
5000 Van Nuys Blvd.
Sherman Oaks, CA 91403

\$1,001 - \$15,000

None

NONE

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Bradley James Sherman

Page 5 of 7

	Wescorn Credit Union (First Account) 5000 Van Nuys Blvd. Sherman Oaks, CA 91403	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	Wescorn Credit Union (Third Account) 5000 Van Nuys Blvd. Sherman Oaks, CA 91403	\$1 - \$1,000	INTEREST	NONE	
	Escrow Account with First Title and Escrow at 12/31/10	\$100,001 - \$250,000	None	NONE	
	Reich & Tong CA Daily Money Market fund held through MLSTERN Beverly Hills, CA	\$50,001 - \$100,000	INTEREST	\$1 - \$200	P
SP	Bank of America Savings Account (Second Account)	\$50,001 - \$100,000	INTEREST	\$1 - \$200	

SCHEDULE IV - TRANSACTIONS

Name Bradley James Sherman

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
	Dreyfus CA Tax Exempt Bond - Dreyfus Fund, Box 9387, Providence, RI 29401	P	No	3 transactions at various times throughout the year	\$201-\$1000
	Vanguard Intermediate CA Tax Exempt Bond Fund PO Box 105433 Atlanta, GA 30348	S(part)	Yes *	See schedule attached.	See schedule attached.
	Vanguard TIPS Fund (Personal account; not IRA) PO Box 105433 Atlanta, GA 30348	S(part)	Yes *	See schedule attached.	See schedule attached.
	Joint Powers Authority Muni Bond Richmond, CA	S (redemption)	No	9/2/10	\$50,001 - \$100,000
	*See Form 1040, Schedule D, Lines 1 through 10 attached. Total of all gains \$3,640.				

SCHEDULE V - LIABILITIES

Name Bradley James Sherman

Page 7 of 7

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 all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; 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.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
	Wells Fargo Bank		First Mortgage on home with rental property in Washington DC	\$500,001 - \$1,000,000
	Sandy Spring Bank, Maryland		Second Mortgage on home with rental property in Washington DC	\$50,001 - \$100,000

**SCHEDULE D
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Capital Gains and Losses

▶ Attach to Form 1040 or Form 1040NR. ▶ See instructions for Schedule D (Form 1040).
▶ Use Schedule D-1 to list additional transactions for lines 1 and 8.

OMB No. 1545-0074

2010
Attachment
Sequence No. 12

Name(s) shown on return

Your social security number

BRAD J & LISA N K SHERMAN

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) Subtract (e) from (d)	
1						
2 Enter your short-term totals, if any, from Schedule D-1, line 2			2			
3 Total short-term sales price amounts. Add lines 1 and 2 in column (d)			3			
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824				4		
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				5		
6 Short-term capital loss carryover. Enter the amount, if any, from line 10 of your Capital Loss Carryover Worksheet in the instructions				6	()	
7 Net short-term capital gain or (loss). Combine lines 1 through 6 in column (f)					7	-

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) Subtract (e) from (d)
8 1927.8 CA IT TAX EX INV	VARIOUS	03/30/10	20,936.	20,629.	307.
784.234 CA IT TAX EX INV	VARIOUS	08/23/10	8,838.	8,396.	442.
53.94 CA IT TAX EX INV	VARIOUS	12/15/10	575.	578.	-3.
12126.866 CA IT TAX EX INV	VARIOUS	12/27/10	130,000.	129,909.	91.
970.497 INFLATION PROTECTED SEC ADM	VARIOUS	12/23/10	25,000.	21,360.	3,640.
9 Enter your long-term totals, if any, from Schedule D-1, line 9			9		
10 Total long-term sales price amounts. Add lines 8 and 9 in column (d)			10	185,349.	

Date	Amount
3/30/2010	-18,035.16
3/30/2010	-2,509.00
3/30/2010	-95.75
3/30/2010	-296.00
3/31/2010	1,693.16
6/30/2010	1,527.79
8/23/2010	-8,838.32
9/30/2010	1,487.17
12/15/2010	-575.00
12/23/2010	25,000.00
12/27/2010	-130,000.00
12/31/2010	1,414.47
1/1/2010 - 12/31/2010	-129,226.64

TOTAL INFLOWS	31,122.59
TOTAL OUTFLOWS	-160,349.23
NET TOTAL	-129,226.64

V ANW GCHAR 12/31/10 (Net Int)

Register Report - Last Year
1/1/2010 through 12/31/2010

Date	Amount
3/31/2010	3,714.45
6/30/2010	2,877.29
9/30/2010	1,972.33
12/23/2010	-25,000.00
12/31/2010	9,194.47
1/1/2010 - 12/31/10	-7,241.46

TOTAL INFLOWS 17,758.54

TOTAL OUTFLOWS -25,000.00

NET TOTAL -7,241.46