

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT

FORM A
 For use by Members, officers, and employees

HAND DELIVERED

Chellie Pingree
 (Full Name)

207-774-5019
 (Daytime Telephone)

(Office Use Only)

MA 2012 AUG 13 PM 4:43

Filer Status
 Member of the U.S. House of Representative
 State: ME District: 01
 Officer Or Employee
 Employing Office:

Report Type
 Annual (May 15)
 Amendment
 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 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 \$350 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 \$50 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 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? <i>If yes, complete and attach Schedule V.</i>	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 No

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 No

SCHEDULE I - EARNED INCOME

Name Chelle Pingree

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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
Trust Asset Management LLP	Spouse Earned Income	NA

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name **Chellie Pingree**

BLOCK A Asset and/or Income Source <small>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 publically 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 deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left.</small>	BLOCK B Year-End Value of Asset <small>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."</small>	BLOCK C Type of Income <small>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.</small>	BLOCK D Amount of Income <small>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.</small>	BLOCK E Transaction <small>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</small>
JP Morgan Chase Bank	\$1,000,001 - \$5,000,000	INTEREST	\$201 - \$1,000	
Nebo Lodge, Inc. an inn and restaurant, 11 Mullins Lane, North Haven, ME	\$500,001 - \$1,000,000	None	NONE	
See Attached				

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Asset &/or Income Source	Asset Value*										Type of Income							Amount of Income*										Trans-Action						
	1-1,000	1,001-15,000	15,001-50,000	50,001-100,000	100,001-250,000	250,001-500,000	501,001-1mm	1mm-5mm	5mm-10mm	10mm-50mm	50mm-100mm	None	Div	Rent	Int	Cap Gain	Ex Blind	Trust	Other	None	1-200	201-1,000	1,001-15,000	15,001-50,000	50,001-100,000	100,001-250,000	250,001-500,000		501,001-1mm	1mm-5mm	5mm-10mm	10mm-50mm		
Asset &/or Income Source	none	1,000	15,000	50,000	100,000	250,000	500,000	1mm	5mm	10mm	50mm	100mm																						
SP Morgan Stanley Smith Barney				X								X																						
SP Merrill Lynch - cash													X																					
JT JP Morgan Chase Bank				X																														
JT Camden National Bank				X																														
SP Camden National Bank						X																												
SP CIBC Wood Gundy																																		
SP First Bank of Puerto Rico																																		
SP Key Bank																																		

*A top category of \$1 million or above applies only if the asset is/was held independently by the spouse or dependent child.

SCHEDULE IV - TRANSACTIONS

Name Chellie Pingree

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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
	See attached				

SCHEDULE IV - TRANSACTIONS

Asset	Type of Transaction			Cap gain-loss	Date	Amount of Transaction								
	Purch.	Sale	Exch.			1,000- 15,000	15,001- 50,000	50,001- 100,000	100,001- 250,000	250,001- 500,000	501,001- 1mm	1,00,001 & Over		
SP WDE Partners, LP	X				11/29/11									X
SP Dune Real Estate Fund II LP	X				3/4/11									X
SP Dune Real Estate Fund III LP	X				6/2/11									X
SP Dune Real Estate Fund III LP	X				10/11/11									X
SP Maine's Own Organic Milk Co LLC3	X				2/4/11			X						
SP Ulysses Real Estate Partners, LP	X				7/25/11		X							
SP Energy Pioneer Solutions, Inc.	X				8/17/11						X			
SP Rebeco, LLC	X				2/23/11						X			
SP Kite Pharma Inc.	X				2/15/11								X	
SP Acadia Partners LLC exchange for Investment in Futures Fund LLC			X		3/30/11									X
SP High Rise Partners II, LP			X		3/23/11									X
SP Paloma Partners Management Co.	X				9/30/11		X							
SP Evogene Ltd		X			12/15/11									X
SP National Field LLC	X				4/26/11									
SP Neoprobe Corp		X			1/13/11						X			
SP Neoprobe Corp		X			1/21/11						X			
SP Neoprobe Corp		X			1/24/11		X							
SP Neoprobe Corp		X			1/27/11					X				
SP Neoprobe Corp		X			2/9/11						X			
SP Neoprobe Corp		X			2/11/11						X			
SP Neoprobe Corp		X			4/14/11						X			
SP Neoprobe Corp		X			4/15/11					X				
SP Neoprobe Corp		X			4/18/11			X						
SP Neoprobe Corp		X			4/21/11				X					
SP Vinda International Holdings		X			6/30/11									X
SP Delphi Energy Corp		X			10/31/11								X	
SP Calinsure Inc (partial sale)		X			2/16/11		X							
SP Centron Telecom International Holdings Ltd (partial sale)		X			6/30/11			X						
SP Chilton China Opportunities, LP		X			1/13/11									X

* A top category of \$1 million or above applies only if the transaction is/was held independently by the spouse or dependent child.

SCHEDULE V - LIABILITIES

Name Chellie Pingree

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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 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. NOTE: Pending legislation may require Members to report mortgages on personal residences.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
	See attached			

SCHEDULE V - LIABILITIES

Creditor	Date Liability Incurred	Type of Liability	Amount of Liability*						
			10,000-15,000	15,001-50,000	50,001-100,000	100,001-250,000	250,001-500,000	500,001-1mm	1,000,001 & Over
SP JP Morgan Chase Bank	April 2008	Line of Credit							X
SP JP Morgan Chase Bank	April 2008	Secured Loan							X
SP American Express	December 2011	Credit Card		X					

*A top category of \$1 million or above applies only if the liability is/was held independently by the spouse or dependent child.

SCHEDULE VIII - POSITIONS

Name Chellie Pingree

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Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Officer	Nebo Lodge, Inc.