

STATEMENT OF ECONOMIC INTERESTS

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COVER PAGE

CalHFA - LEGAL

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A Public Document

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER	
Spears	L.	Steven	(916) 324-4640	
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE	ZIP CODE
P.O. Box 4034		Sacramento	CA	95812-4034
				OPTIONAL: E-MAIL ADDRESS
				sspears@calhfa.ca.gov

1. Office, Agency, or Court

Name of Office, Agency, or Court:
California Housing Finance Agency (CalHFA)

Division, Board, District, if applicable:
CalHFA Board of Directors

Your Position:
Executive Director/Board Member

▶ If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: see attached

Position: Committee Member

2. Jurisdiction of Office (Check at least one box)

- State
- County of _____
- City of _____
- Multi-County _____
- Other _____

3. Type of Statement (Check at least one box)

- Assuming Office/Initial Date: 04 / 21 / 10
- Annual: The period covered is January 1, 2009, through December 31, 2009.
- or-
- The period covered is ____/____/____, through December 31, 2009.
- Leaving Office Date Left: ____/____/____ (Check one)
- The period covered is January 1, 2009, through the date of leaving office.
- or-
- The period covered is ____/____/____, through the date of leaving office.
- Candidate Election Year: _____

4. Schedule Summary

- ▶ Total number of pages including this cover page: 2
- ▶ Check applicable schedules or "No reportable interests."
I have disclosed interests on one or more of the attached schedules:
- Schedule A-1 Yes - schedule attached
Investments (Less than 10% Ownership)
- Schedule A-2 Yes - schedule attached
Investments (10% or Greater Ownership)
- Schedule B Yes - schedule attached
Real Property
- Schedule C Yes - schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)
- Schedule D Yes - schedule attached
Income - Gifts
- Schedule E Yes - schedule attached
Income - Gifts - Travel Payments
- or-
- No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 4/30/10
(month, day, year)

Signature [Signature]
(File the originally signed statement with your filing official.)

ATTACHMENT

Agency: STATE TREASURER'S OFFICE

Position: COMMITTEE MEMBER

- 1) California Tax Credit Allocation Committee ("TCAC")
- 2) California Debt Limit Allocation Committee ("CDLAC")
- 3) Housing Finance Committee for the Housing and Homeless Bond Act of 1988
- 4) Housing Finance Committee for the Housing and Homeless Bond Act of 1990
- 5) Housing Finance Committee for the Housing and Emergency Shelter Trust Fund Act of 2002
- 6) Housing Finance Committee for the Housing and Emergency Shelter Trust Fund Act of 2006