


UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF TEXAS  
1100 COMMERCE STREET  
DALLAS, TEXAS 75242

SELF INITIATED  
AMENDMENT

ED KINKEADE  
District Judge

214/753-2720 Chambers  


August 9, 2007

Judge Ortrie D. Smith, Chair  
Committee on Financial Disclosure  
Administrative Office of the United States Courts  
Suite 2-301  
One Columbus Circle, N.E.  
Washington, D.C. 20544

RE: 2006 Financial Disclosure Report

Dear Judge Smith,

I am writing this letter to amend my 2006 Financial Disclosure Report.

In section IV Reimbursements, item numbers 2, 3 and 4 were inadvertently left off the listing of reimbursements prior to the report being sent. The corrected page is attached.

If you have any further questions, please contact me.

Sincerely,



Ed Kinkeade  
U. S. District Judge

DISCLOSURE OFFICE

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**FINANCIAL DISCLOSURE REPORT**

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Name of Person Reporting

Kinkeade, James E

Date of Report

08/03/2007

**III. NON-INVESTMENT INCOME.** *(Reporting individual and spouse; see pp. 17-24 of instructions.)***A. Filer's Non-Investment Income** NONE *(No reportable non-investment income.)*

<u>DATE</u>	<u>SOURCE AND TYPE</u>	<u>INCOME</u> (yours, not spouse's)
1. 2006	Texas Wesleyan University	\$ 20,000
2. 2006	West Services, Inc. - Royalty Income	\$ 8,733
3. 2006	National Institute for Trial Advocacy - Royalty Income	\$ 436
4. 2006	State of Texas Judicial Retirement System	\$ 64,351
5.		

**B. Spouse's Non-Investment Income -** *If you were married during any portion of the reporting year, complete this section.**(Dollar amount not required except for honoraria.)* NONE *(No reportable non-investment income.)*

<u>DATE</u>	<u>SOURCE AND TYPE</u>
1. 2006	Irving Independent School District
2.	
3.	
4.	
5.	

**IV. REIMBURSEMENTS** *- transportation, lodging, food, entertainment.**(Includes those to spouse and dependent children. See pp. 25-27 of instructions.)* NONE *(No reportable reimbursements.)*

	<u>SOURCE</u>	<u>DESCRIPTION</u>
1.	Baylor Healthcare System	February 16, 2006 - Strategy Retreat - Monterey County, CA (hotel, transportation, meals)
2.	Baylor Healthcare System	September 18, 2006 - Strategy Meeting - Houston, TX (transportation, meal)
3.	Dallas Bar Association	September 28, 2006 - Speech at Bench/Bar conference - Marble Falls, TX (hotel)
4.	Baylor Healthcare System	September 29, 2006 - Board of Directors Meeting - Austin, TX (hotel, transportation, meals)
5.	Baylor Healthcare System	November 9, 2006 - System-wide Retreat - Grapevine, TX (hotel, meals)

**FINANCIAL DISCLOSURE REPORT  
FOR CALENDAR YEAR 2006**

<b>1. Person Reporting (last name, first, middle initial)</b>  Kinkeade, James E	<b>2. Court or Organization</b>  Northern District of Texas	<b>3. Date of Report</b>  08/03/2007
<b>4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time)</b>  U. S. District Judge	<b>5a. Report Type (check appropriate type)</b> <input type="checkbox"/> Nomination,                      Date <input type="checkbox"/> Initial <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Final <b>5b.</b> <input type="checkbox"/> Amended Report	<b>6. Reporting Period</b>  01/01/2006 to 12/31/2006
<b>7. Chambers or Office Address</b>  U.S. District Court 1100 Commerce St., Room 1625 Dallas, TX 75224	<b>8. On the basis of the information contained in this Report and any modifications pertaining thereto, it is, in my opinion, in compliance with applicable laws and regulations.</b>  Reviewing Officer _____ Date _____	
<p align="center"><b>IMPORTANT NOTES:</b> The instructions accompanying this form must be followed. Complete all parts, checking the NONE box for each part where you have no reportable information. Sign on last page.</p>		

**I. POSITIONS.** (Reporting individual only; see pp. 9-13 of instructions.)

NONE (No reportable positions.)

	<u>POSITION</u>	<u>NAME OF ORGANIZATION/ENTITY</u>
1.	Adjunct Professor	Texas Wesleyan University School of Law
2.	Member	Rio Viga, LLC
3.	Trustee	Baylor Healthcare System
4.	Trustee (ex officio - not voting)	Baylor Medical Center - Irving
5.		

**II. AGREEMENTS.** (Reporting individual only; see pp. 14-16 of instructions.)

NONE (No reportable agreements.)

	<u>DATE</u>	<u>PARTIES AND TERMS</u>
1.	01/01/06	Teaching classes at Texas Wesleyan University School of Law - 2006
2.	09/01/01	State of Texas - Employee Retirement Benefits
3.	01/01/90	Dallas County - Employee Retirement Benefits

**FINANCIAL DISCLOSURE REPORT**  
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Name of Person Reporting Kinkeade, James E	Date of Report 08/03/2007
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**III. NON-INVESTMENT INCOME.** *(Reporting individual and spouse; see pp. 17-24 of instructions.)*

**A. Filer's Non-Investment Income**

NONE *(No reportable non-investment income.)*

<u>DATE</u>	<u>SOURCE AND TYPE</u>	<u>INCOME</u> <i>(yours, not spouse's)</i>
1. 2006	Texas Wesleyan University	\$ 20,000
2. 2006	West Services, Inc. - Royalty Income	\$ 8,733
3. 2006	National Institute for Trial Advocacy - Royalty Income	\$ 436
4. 2006	State of Texas Judicial Retirement System	\$ 64,351
5.		

**B. Spouse's Non-Investment Income** - *If you were married during any portion of the reporting year, complete this section.*

*(Dollar amount not required except for honoraria.)*

NONE *(No reportable non-investment income.)*

<u>DATE</u>	<u>SOURCE AND TYPE</u>
1. 2006	Irving Independent School District
2.	
3.	
4.	
5.	

**IV. REIMBURSEMENTS** - *transportation, lodging, food, entertainment.*

*(Includes those to spouse and dependent children. See pp. 25-27 of instructions.)*

NONE *(No reportable reimbursements.)*

<u>SOURCE</u>	<u>DESCRIPTION</u>
1. Baylor Healthcare System	February 16, 2006 - Strategy Retreat - Monterey County, CA (hotel, transportation, meals)
2. Baylor Healthcare System	November 9, 2006 - System-wide Retreat - Grapevine, TX (hotel, meals)
3.	
4.	
5.	

**FINANCIAL DISCLOSURE REPORT**  
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Name of Person Reporting  
Kinkeade, James E

Date of Report  
08/03/2007

**V. GIFTS.** (Includes those to spouse and dependent children. See pp. 28-31 of instructions.)

NONE (No reportable gifts.)

	<u>SOURCE</u>	<u>DESCRIPTION</u>	<u>VALUE</u>
1.			
2.			
3.			
4.			
5.			

**VI. LIABILITIES.** (Includes those of spouse and dependent children. See pp. 32-33 of instructions.)

NONE (No reportable liabilities.)

	<u>CREDITOR</u>	<u>DESCRIPTION</u>	<u>VALUE CODE</u>
1.	Bank of the West	Mortgage on Rental property #1	L
2.	Bank of the West	Mortgage on Rental property #3	K
3.	International Bank	Mortgage on Rental Property #5	K
4.	MBNA	Credit Card	K
5.			
6.			

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Name of Person Reporting <b>Kinkeade, James E</b>	Date of Report <b>08/03/2007</b>
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**VII. INVESTMENTS and TRUSTS** -- income, value, transactions (Includes those of the spouse and dependent children. See pp. 34-60 of filing instructions.)

NONE (No reportable income, assets, or transactions.)

A. Description of Assets (including trust assets)  Place "(X)" after each asset exempt from prior disclosure	B. Income during reporting period		C. Gross value at end of reporting period		D. Transactions during reporting period				
	(1) Amount Code 1 (A-H)	(2) Type (e.g. div., rent, or int.)	(1) Value Code 2 (J-P)	(2) Value Method Code 3 (Q-W)	(1) Type (e.g. buy, sell, redemption)	(2) Date Month - Day	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A-H)	(5) Identity of buyer/seller (if private transaction)

1. Rental Property #1, Dallas County, TX (1978 \$27,948)	E	Rent	K	R	None				
2. Rental Property #2, P-K, Dallas County, TX (1985 \$32,928)	D	Rent	K	R	None				
3. Rental Property #3, P-K, Dallas County, TX (1980 \$32,928)	E	Rent	K	R	None				
4. Rental Property #4, Dallas County, TX (1978 \$33,461)	D	Rent	K	R	None				
5. Rental Property #5, [REDACTED] (2000 \$40,000)	A	Rent	K	R	None				
6. Bank of America	A	Interest	J	T	None				
7. Bank of the West	A	Interest	K	T	None				
8.									
9.									
10.									
11.									
12.									
13.									
14.									
15.									
16.									
17.									

1. Income Gain Codes: (See Columns B1 and D4)	A = \$1,000 or less F = \$50,001 - \$100,000 J = \$15,000 or less N = \$250,001 - \$500,000 P3 = \$25,000,001 - \$50,000,000 Q = Appraisal U = Book Value	B = \$1,001 - \$2,500 G = \$100,001 - \$1,000,000 K = \$15,001 - \$50,000 O = \$500,001 - \$1,000,000 R = Cost (Real Estate Only) V = Other	C = \$2,501 - \$5,000 H1 = \$1,000,001 - \$5,000,000 L = \$50,001 - \$100,000 P1 = \$1,000,001 - \$5,000,000 P4 = More than \$50,000,000 S = Assessment W = Estimated	D = \$5,001 - \$15,000 H2 = More than \$5,000,000 M = \$100,001 - \$250,000 P2 = \$5,000,001 - \$25,000,000 T = Cash Market	E = \$15,001 - \$50,000
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**VIII. ADDITIONAL INFORMATION OR EXPLANATIONS.** *(Indicate part of Report.)*

**FINANCIAL DISCLOSURE REPORT**

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Name of Person Reporting

Kinkeade, James E

Date of Report

08/03/2007

**IX. CERTIFICATION.**

I certify that all information given above (including information pertaining to my spouse and minor or dependent children, if any) is accurate, true, and complete to the best of my knowledge and belief, and that any information not reported was withheld because it met applicable statutory provisions permitting non-disclosure.

I further certify that earned income from outside employment and honoraria and the acceptance of gifts which have been reported are in compliance with the provisions of 5 U.S.C. app. § 501 et. seq., 5 U.S.C. § 7353, and Judicial Conference regulations.

Signature



Date

8/06/2007

**NOTE: ANY INDIVIDUAL WHO KNOWINGLY AND WILFULLY FALSIFIES OR FAILS TO FILE THIS REPORT MAY BE SUBJECT TO CIVIL AND CRIMINAL SANCTIONS (5 U.S.C. app. § 104)**

**FILING INSTRUCTIONS**

Mail signed original and 3 additional copies to:

Committee on Financial Disclosure  
Administrative Office of the United States Courts  
Suite 2-301  
One Columbus Circle, N.E.  
Washington, D.C. 20544