<del>, _</del>	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT	FORM A Page 1 of 6 For use by Members, officers, and employees	TAND DELIVERED
			LEGISLATIVE RESOURCE CENTER
	David Albert Scott	202-225-2939	11/ 2912 MAY 15 PH 5: 42
	(Full Name)	(Daytime Telephone)	NOTIFIE WAS CONVIDENTED TO THE PROPERTY.
	Filer  Member of the U.S.  State: GA  House of Representative District: 13	Officer Or Employing Office:	A \$200 penalty shall be assessed against
	Report Type  Annual (May 15)  Amendment	Termination Date:	more than 30 days
اح	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	ESE QUESTIONS	
F	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	Did you, your spouse, or a dependent child receive any reportable gift in  VI. the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)?	gift in erwise Yes ☐ No ☑
	If yes, complete and attach Schedule I.	if yes, complete and attach Schedule VI.	
Ę	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?  Yes	No Will. reimbursements for travel in the reporting period (worth more than \$350 from one source)?	travelor n \$350 Yes ☐ No 🗸
_	If yes, complete and attach Schedule II.	If yes, complete and attach Schedule VII.	
.=	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? If yes, complete and attach Schedule III.	No Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?  If yes, complete and attach Schedule VIII.	g in the Yes 🕢 No 🗌
.⋜	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting Yes period?	No IX. entity?	tside Yes □ No ✓
	If yes, complete and attach Schedule IV.	If yes, complete and attach Schedule IX.	
<	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	No ☐ Each question in this part must be answered and the	and the
Γ	If yes, complete and attach Schedule V.	appropriate schedule attached for each "Yes" response.	response.
m	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS	ORMATION - ANSWER EACH OF THESE QUES	TIONS
	Trusts- Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certa disclosed. Have you excluded from this report details of such a trust benefiting you, your	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 because they meet all three tests for exemption? Do not answer "yes" unless you have fire	arned" income, transactions, or liabilities of a spouse or dependent child nswer "yes" unless you have first consulted with the Committee on Ethics.	ics. Yes No

SCHEDULE I - EARNED INCOME	Name David Albert Scott		Page 2 of 6
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.	her than the filer's current employment nount of any honoraria; list only the sc	yment by the U.S. Government) totaling \$200 or more the source for other spouse earned income exceeding	ing \$200 or more income exceeding
Source	Туре	Amount	
Dayn-Mark Advertising Spouse Salary	ary —	N/A	
State of Georgia Legislative Pension	ension	\$5,972.26	

Name David Albert Scott

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		TAGING CONG.			9
	BLOCK A	BLOCK B	вгоск с	BLOCK D	BLOCK E
ASSI Identify (a) each value exceeding reportable asse "unearned" inc	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 sources of income which generated more than \$200 in "unearned" income during the year.	Year-End Value of Asset At close of reporting year. If you use a valuation method other than fair	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	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	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in
Provide complete For all IRAs and i (i.e.,plans in white investments), pro- reporting threshoonly the name of reporting period.	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.	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."	(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.	"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	reporting year.
For rental or ot	For rental or other real property held for investment, provide a complete address.			or gains area.	
For an ownership in state the name of th location in Block A.	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 (unless there w \$5,000 or less in or income do Savings Plan.	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 indice spouse (SP) or dependent child optional column on the far left.	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.				
SP	Dayn-Mark Advertising	\$250,001 - \$500,000	Spouse Income/N/	N/A	
JT	Residential Rental Property Washington, DC	\$500,001 - \$1,000,000	Rent	\$15,001 - \$50,000	
<b>5</b> 7	Southern Company Stock	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
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## **SCHEDULE V - LIABILITIES**

Name David Albert Scott

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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 slbling 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 mortgates on 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 personal residences.

\$100,001 - \$250,000	Mortgage on personal residence Atlanta, GA	June 1997	Bank of America	71
\$500,001 - \$1,000,000	Mortgage on rental property Washington, DC	Jan 2003	Sun Trust Bank	JT
Amount of Liability	Type of Liability	Date Liability Incurred	Creditor	SP, DC,

## SCHEDULE VIII - POSITIONS

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honorary nature; and positions listed on Schedule I. 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

Position	Name of Organization
Board of Advisors (unpaid)	Dean Rusk Center, UGA School of Law

FOOTNOTES	ij	Name David Albert Scott	Page 6 of 6
Number	Section / Schedule	Footnote	This note refers to the following item
_	Schedule I	Pension started June	