For use by Members, officers, and employees	FORM A	
and employees	Page 1 of 12	
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CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT

UNITED STATES HOUSE OF REPRESENTATIVES

cs. Yes No V	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.	sets, "unearned" in ? Do not answer "y	Exemptions— Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities because they meet all three tests for exemption? Do not answer "yes" unless you have first consults	
Yes No V	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?	wed by the Commit details of such a tru	Trusts Details regarding "Qualified Blind Trusts" appropriate disclosed. Have you excluded from this report	
Yes ☐ No ☑	al Public Offering?	das a part of an init	IPO Did you purchase any shares that were allocated as a part of an initial Public Offering?	
E QUESTIONS	NFORMATION ANSWER EACH OF THESE QUESTIONS	OR TRUST I	PO and EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSW	Z
	schedule attached for each "Yes" response.		If yes, complete and attach Schedule V.	
and the appropriate	Each question in this part must be answered and the appropriate	Yes No 🗆	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 IX.		if yes, complete and attach Schedule IV.	
tside Yes □ No 🔀	Did you have any reportable agreement or arrangement with an outside IX. entity?	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 period?	₹
	If yes, complete and attach Schedule VIII.		if yes, complete and attach Schedule III.	İ
gin the Yes 🗸 No 🗍	Did you hald any reportable positions on or before the date of filing in the VIII. current calendar year?	Yes No	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 VII.		If yes, complete and attach Schedule II.	
travel or n \$360 Yes 🕢 No 🗌	Did you, your spouse, or a dependent child receive any reportable travel or VII. relimbursements for travel in the reporting period (worth more than \$350 from one source)?	Yes □ No	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 VI.		If yes, complete and attach Schedule I.	
gift in Yes No 🔀	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 exempts?	Yes V No	Did you or your spouse have "samed" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	-
	UESTIONS	OF THESE Q	PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	꿇
late.		☐ Termination	Type ( 🗹) Annual (May 15) 🔲 Amendment	
more than 30 days	Termination Date:			-
be assessed against	ь		Status House of Representatives District: 12	4-
A \$200 penalty shall	Employing Office:		Filer Member of the U.S. State: NC	
(Office Use Only)	(Daytime Telephone) U.S. 1.3 (35)		(Full Name)	
			MELVIN L. WATT	
2013 CAY 15 KII 9: 27 M	223 203			

# SCHEDULE I - EARNED INCOME

Name MELVIN L. WATT

Page 2 of 12

during the preceding calendar year. For a spouse, l \$1,000.	during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the s \$1,000.	source for other spouse earned income exceeding
Source	Туре	Amount
UNC CHARLOTTE	SPOUSE SALARY	N/A

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אַרחבטטר	SCHEDULE III - ASSE IS AND UNEARNED INCOME	Name MELVIN L. WATT	WATT		Page 3 of 12
	BLOCK A	BLOCK B	BLOCK C	BLOCKD	BLOCK E
ASSE Identify (a) each value exceeding reportable asse "unearmed" inco	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 Indicate value of asset at close of reporting year. If	Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that	Amount of Income For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets, indicate the	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E)
Provide comple For all IRAs ark each asset held	Provide complete names of stocks and mutual tunds (do not use ticker symbols.) For all IRAs and other retirement plans (such as 401(t) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	nethod other than fair market value, please specify the method used.	(such as 40/H); plans or IRAs), you may check the "None" column. Dividends, inbrest, and capital gains, even if reinvested must be disclosed	the appropriate box helow.  The appropriate box helow.  Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was samed.	reporting year.
For rental or ot	For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and a city and state.	the reporting year and is included only because it	as income. Check "None" if the asset generated no income during the providing partial	or generated.	
For an ownership in state the name of the location in Block A.	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 Black A.	yeller should be "None."  * This column is for assets	wing an reporting period.	generated by assets held solely by your spouse or dependent child.	
Exclude: Your j (unless there w \$5,000 or tess it in, or income du Savings Plan.	Exclude: Your personal residence, including second homes and vacation homes (unless there was restal 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.	neid soles by your spouse or dependent child.			
If you so choose appears (SP) or optional column	If you so choose, you may indicate that an asset or income source is that of your spause (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left.				
For a detailed discu instruction booklet.	for a detailed discussion of Schedule III requirements, please refer to the Instruction booklet.				
	AGIC INTL & PERM STRATEGY FD	\$1,001 - \$15,000	DIVIDENDS	\$1,001 - \$2,500	
	APPLE COMPUTER "*"	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500	
SP	ARIEL APPRECIATION FUND - IRA(NOT SELF DIRECTED)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	ARIEL APPRECIATION FUND - IRA(NOT SELF DIRECTED)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
dS dS	ARTIO INTERNATIONAL EQUITY FUND - IRA	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	BANK OF AMERICA CORP	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	

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SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name MELVIN L. WATT	L. WATT		Page 4 of 12
	BB&T CORP	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	BLACKROCK MUNI HOLDINGS INSURED FD	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	
	CATERPILLER, INC	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
	CATERPILLER, INC"*"	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	COMVERSE TECHNOLOGY, INC	None	CAPITAL GAINS	\$1 - \$200	S
SP	DAVIS NEW YORK VENTURE FUND - IRA"*"	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	DEUTSCHE BANK 6.625% PFD	<b>\$1,001</b> - <b>\$15,000</b>	DIVIDENDS	\$201 - \$1,000	
	DUKE ENERGY	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	EATON VANCE TAX  MANAGED	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
	EATON WORLDWIDE HEALTHSCIENCES "*"	None	CAPITAL GAINS	NONE	8
	HERSHEY COMPANY	None	CAPITAL GAINS	\$201 - \$1,000	S
	HIGH POINT NC 3.5%	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	
	ING GROUP 7.375% PFD	None	CAPITAL GAINS	\$1 - \$200	S
	INTERNATIONAL PAPER CO	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	ס

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name MELVIN L. WATT	L WATT		Page 5 of 12
LORD ABBETT MUN INCOME TR INTERMEDIATE TAX- FREE FD CL F	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	ס
LOT - 1.63 ACRES BURKE COUNTY, NORTH CAROLINA	\$50,001 - \$100,000	None	NONE	
LOT 515/517 N. POPLAR ST., CHARLOTTE, NC (1/2 INTEREST)	\$50,001 - \$100,000	None	NONE	
MAINSTAY FUNDS TRUST HIGH YIELD MUNICIPAL BOND FD CL I	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	ס
MECHANICS & FARMERS BANK	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
N.C. STATE EMPLOYEES RETIREMENT SYSTEM (NOT SELF DIRECTED)	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	
NEXTERA ENERGY, INC "*"	None	CAPITAL GAINS	\$201 - \$1,000	S
NORDSTROM, INC"*"	None	CAPITAL GAINS	\$1 - \$200	S
NOVARTIS AG SPON ADR"*"	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
NUCOR CORP"*"	<b>\$15,001</b> - \$50,000	DIVIDENDS	\$201 - \$1,000	
NUVEEN EQUITY PREMIUM INCOME FD	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
OMNIVISION TECHNOLOGIES, INC "*"	\$1,001 - <b>\$15,000</b>	DIVIDENDS	\$1 - \$200	
PARK PLAZA OFFICE LP"*"	\$50,001 - \$100,000	DIVIDENDS	\$2,501 - \$5;000	

SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name MELVIN L WATT	WATT		Page 6 of 12
SP	RYDEX SECTOR ROTATION FUND - IRA"*"	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	SPECTRA ENERGY CORP	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
SP	SR HOUSING PROP TRUST REIT"*"	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	TARGACEPT"*"	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP SP	TOCQUEVILLE TR GOLD FD - IRA"*"	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	TORONTO DOMINION BANK	None	CAPITAL GAINS	\$201 - \$1,000	PS
	TRANSAMERICA - IRA (NOT SELF DIRECTED)	<b>\$</b> 1, <b>00</b> 1 - \$15,000	INTEREST	\$201 - \$1,000	
	UNITED PARCEL SERVICE- B"*"	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	ס
SP	WELLS FARGO	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
	WELLS FARGO - MONEYMARKET ACCOUNT	\$100,001 - \$250,000	DIVIDENDS	\$1 - \$200	
,	WELLS FARGO 8% PFD	None	CAPITAL GAINS	\$5,001 - \$15,000	S
	WELLS FARGO ADVANTAGE FUNDS-IRA	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	WELLS FARGO ADVANTAGE FUNDS-IRA	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
Şp	WELLS FARGO ADVANTAGE FUNDS-IRA	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	ס

SCHEDULE III - ASSETS AND "UNEARNED" INCOME Name MELVIN L. WATT	1	Page 7 of 12
WELLS FARGO"*" \$15,001 - DI \$50,000	DIVIDENDS \$1 - \$200	
SP WELLS FARGO/JP MORGAN \$15,001 - DI MMK - IRA"*"	DIVIDENDS \$1 - \$200	
WESTSIDE 2000, LTD. \$1,001 - No. CHARLOTTE, NC., 25% \$15,000 STOCK INTEREST.	None	

## **SCHEDULE IV - TRANSACTIONS**

Name MELVIN L. WATT

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Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions is sold, please so indicate (i.e., "partial sale"). See example below. between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset

Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III. This column is for assets solely held by your spouse or dependent child.

SP, DC,	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	INTERNATIONAL PAPER CO "*"	ס	N/A	01-09-12	\$1,001 - \$15,000
	UNITED PARCEL SERVICE-B"*"	ס	N/A	01-09-12	\$1,001 - \$15,000
	LORD ABBETT MUN INCOME TR INTERMEDIATE TAX-FREE FD CL F	ס	N/A	10-22-12	\$1,001 - \$15,000
	MAINSTAY FUNDS TRUST HIGH YIELD MUNICIPAL BOND FD CL I	ָּס	N/A	10-22-12	\$1,001 - \$15,000
	COMVERSE TECHNOLOGY, INC	S	8	10-24-12	\$25
	HERSHEY COMPANY	S	Yes	05-18-12	\$1,001 - \$15,000
Sp	WELLS FARGO ADVANTAGE FUNDS-IRA	"ט	NVA	01-01-12	\$1,001 - \$15,000
	ING GROUP 7.375% PFD	S	Yes	10-22-12	\$15,001 - \$50,000
	WELLS FARGO 8% PFD	S	Yes	10/22/12	\$15,001 - \$50,000
	EATON WORLDWIDE HEALTHSCIENCES	S	No	01/09/2012	\$1,001 - \$15,000
	NEXTERA ENERGY, INC "*"	S	Yes	01/09/2012	\$1,001 - \$15,000

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## **SCHEDULE IV - TRANSACTIONS**

Name MELVIN L. WATT

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is sold, please so indicate (i.e., "partial sale"). See example below. Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset

Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III. This column is for assets solely held by your spouse or dependent child.

		SP, DC, JT
TORONTO DOMINION BANK	NORDSTROM, INC"*"	Asset
S	S	Type of Transaction
Yes	Yes	Capital Gain in Excess of \$200?
03/30/2012	01/201/2012	Date
\$1,001 - \$15,000	\$15,001 - \$50,000	Amount of Transaction

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#### **SCHEDULE V - LIABILITIES**

Name MELVIN L. WATT

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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. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless it is rented out or you are a Member); loans secured by automobiles, household furniture, or appliances; for liabilities held solely by your spouse or dependent child. your spouse. Report revelving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. "This column is liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or

SP,		Date Liability		
JT	Creditor	Incurred	Type of Liability	
Л	WELLS FARGO BANK, N.A.	OCT 2010	MORTGAGE PERSONAL RESIDENCE, WASHINGTON, DC	
ង	WELLS FARGO BANK, N.A.	OCT 2010	MORTGAGE ON PERSONAL RESIDENCE, CHARLOTTE, NC	
JT	MECHANICS& FARMERS BANK	AUG 2007	EQUITY LOAN ON PERSONAL RESIDENCE, CHARLOTTE, NC	

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# SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name MELVIN L. WATT Page 11 of 12

spouse or dependent child that is totally independent of his or her relationship to you. the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$350 received by you, amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the

Source	Date(s)	Point of Departure DestinationPoint of Return	Lodging? F	Food? (Y/N)	Was a Family ood? Member Included? (Y/N) (Y/N)	Days not at sponsor's expense
CONGRESSIONAL BLACK CAUCUS BOARD RETREAT	MAR. 22- 23	DC-CAMBRIDGE, MD-DC	Υ	Υ	Z	NONE
NATIONAL MUSIC PUBLISHERS' ASSOCIATION	JUNE 11-	CHARLOTTE, NC-NEW YORK, NY-DC	Υ	Z	Υ	2 DAYS
CONGRESSIONAL BLACK CAUCUS FOUNDATION-MERVYN AND STEPHANIE TUBBS JONES MEMORIAL SCHOLARSHIP CLASSIC	JUNE 24- 25	DC-LANSDOWNE, VADC	~	~	~	NONE

### SCHEDULE VIII - POSITIONS

Name MELVIN L. WATT

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honorary nature; and positions listed on Schedule I. 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 Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor,

Position	Name of Organization
DIRECTOR WESTSIDE 200	WESTSIDE 2000, LTD., CHARLOTTE, NC
DIRECTOR CONGRESSION INSTITUTE	CONGRESSIONAL BLACK CAUCUS POLITICAL EDUCATION AND LEADERSHIP INSTITUTE
DIRECTOR	CONGRESSIONAL BLACK CAUCUS FOUNDATION

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