

UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT

FORM A

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For use by Members, officers, and employees

HAND DELIVERED

MELVIN L. WATT

(Full Name)

(Daytime Telephone)

2013 JUL -9 PM 2:42

(Office Use Only)

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: NC	<input type="checkbox"/> Officer Or Employee	Employing Office:	A \$200 penalty shall be assessed against anyone who files more than 30 days late.
Report Type	<input type="checkbox"/> Annual (May 15)	<input checked="" type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Termination Date:	

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?	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)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II. If yes, complete and attach Schedule I. 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 <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. If yes, complete and attach Schedule VI. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 from one source)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
III. If yes, complete and attach Schedule II. 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?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. If yes, complete and attach Schedule VII. Did you hold any reportable positions on or before the date of filing in the current calendar year?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
IV. If yes, complete and attach Schedule III. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. If yes, complete and attach Schedule VIII. Did you have any reportable agreement or arrangement with an outside entity?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
V. If yes, complete and attach Schedule IV. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	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.	

IPO and EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

IPO-- Did you purchase any shares that were allocated as a part of an Initial Public Offering?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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 <input type="checkbox"/> No <input checked="" type="checkbox"/>
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 <input type="checkbox"/> No <input checked="" type="checkbox"/>

SCHEDULE I - EARNED INCOME

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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
UNC CHARLOTTE	SPOUSE SALARY	N/A

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BLOCK A		BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset and/or Income Source		Year-End Value of Asset	Type of Income	Amount of Income	Transaction
<p>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.</p> <p>Provide complete names of stocks and mutual funds (do not use ticker symbols.)</p> <p>For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.</p> <p>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.</p> <p>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 Block A.</p> <p>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; any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.</p> <p>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.</p> <p>For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.</p>		<p>Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used.</p> <p>If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."</p> <p>* This column is for assets held solely by your spouse or dependent child.</p>	<p>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.</p>	<p>For assets for which you checked "Tax-Deferred" in Block C, 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.</p> <p>* This column is for income generated by assets held solely by your spouse or dependent child.</p>	<p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
SP	AGIC INTL & PERM STRATEGY FD	None	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	S
	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	
SP	ARTIO INTERNATIONAL EQUITY FUND - IRA	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	BANK OF AMERICA CORP	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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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	
CONVERSE 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	\$1,001 - \$15,000	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	S
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	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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LORD ABBETT MUN INCOME TR INTERMEDIATE TAX- FREE FD CL F	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	P
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	P
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 "X"	None	CAPITAL GAINS	\$201 - \$1,000	S
NORDSTROM, INC "N"	None	CAPITAL GAINS	\$1 - \$200	S
NOVARTIS AG SPON ADR "N"	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
NUCOR CORP "N"	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
NUVEEN EQUITY PREMIUM INCOME FD	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
OMNIVISION TECHNOLOGIES, INC "O"	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
PARK PLAZA OFFICE LP "P"	\$50,001 - \$100,000	DIVIDENDS	\$2,501 - \$5,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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SP	RYDEX SECTOR ROTATION FUND - IRA ¹	\$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	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	TARGACEPT ¹	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	TOCQUEVILLE TR GOLD FD - IRA ¹	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	TORONTO DOMINION BANK	None	CAPITAL GAINS	\$201 - \$1,000	PS
	TRANSAMERICA - IRA (NOT SELF DIRECTED)	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
	UNITED PARCEL SERVICE- B ¹	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	P
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
SP	WELLS FARGO ADVANTAGE FUNDS-IRA	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	WELLS FARGO ADVANTAGE FUNDS-IRA	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
SP	WELLS FARGO ADVANTAGE FUNDS-IRA	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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SP	WELLS FARGO***	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200
	WELLS FARGO/JP MORGAN	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200
	MMK - IRA***	\$50,000		
	WESTSIDE 2000, LTD.	\$1,001 - \$15,000	None	NONE
	CHARLOTTE, NC., 25% STOCK INTEREST.			

SCHEDULE IV - TRANSACTIONS

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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 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 is sold, please so indicate (i.e., "partial sale"). See example below.

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	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	INTERNATIONAL PAPER CO ""	P	N/A	01-09-12	\$1,001 - \$15,000
	UNITED PARCEL SERVICE-B""	P	N/A	01-09-12	\$1,001 - \$15,000
	LORD ABBETT MUN INCOME TR INTERMEDIATE TAX-FREE FD CL F	P	N/A	10-22-12	\$1,001 - \$15,000
	MAINSTAY FUNDS TRUST HIGH YIELD MUNICIPAL BOND FD CL I	P	N/A	10-22-12	\$1,001 - \$15,000
	COMVERSE TECHNOLOGY, INC	S	No	10-24-12	\$25
	HERSHEY COMPANY	S	Yes	05-18-12	\$1,001 - \$15,000
SP	WELLS FARGO ADVANTAGE FUNDS-IRA	P	N/A	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

SCHEDULE IV - TRANSACTIONS

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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 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 is sold, please so indicate (i.e., "partial sale"). See example below.

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	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	NORDSTROM, INC**	S	Yes	01/2012/2012	\$15,001 - \$50,000
	TORONTO DOMINION BANK	S	Yes	03/30/2012	\$1,001 - \$15,000
	AGIC INTL & PERM STRAT	S	No	10/22/2012	\$1,001 - \$15,000

SCHEDULE V - LIABILITIES

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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; 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 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. *This column is for liabilities held solely by your spouse or dependent child.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
JT	WELLS FARGO BANK, N.A.	OCT 2010	MORTGAGE PERSONAL RESIDENCE, WASHINGTON, DC	\$250,001 - \$500,000
JT	WELLS FARGO BANK, N.A.	OCT 2010	MORTGAGE ON PERSONAL RESIDENCE, CHARLOTTE, NC	\$250,001 - \$500,000
JT	MECHANICS& FARMERS BANK	AUG 2007	EQUITY LOAN ON PERSONAL RESIDENCE, CHARLOTTE, NC	\$15,001 - \$50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

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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, 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 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 sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under 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 spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
CONGRESSIONAL BLACK CAUCUS BOARD RETREAT	MAR. 22- 23	DC-CAMBRIDGE, MD-DC	Y	Y	N	NONE
NATIONAL MUSIC PUBLISHERS' ASSOCIATION	JUNE 11- 14	CHARLOTTE, NC-NEW YORK, NY-DC	Y	N	Y	2 DAYS
CONGRESSIONAL BLACK CAUCUS FOUNDATION-MERVYN AND STEPHANIE TUBBS JONES MEMORIAL SCHOLARSHIP CLASSIC	JUNE 24- 25	DC-LANSDOWNE, VA-DC	Y	Y	Y	NONE

SCHEDULE VIII - POSITIONS

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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
DIRECTOR	WESTSIDE 2000, LTD., CHARLOTTE, NC
DIRECTOR	CONGRESSIONAL BLACK CAUCUS POLITICAL EDUCATION AND LEADERSHIP INSTITUTE
DIRECTOR	CONGRESSIONAL BLACK CAUCUS FOUNDATION