HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES 2016 FINANCIAL DISCLOSURE STATEMENT		Form A For Use by Members, Officers, and Employees	2019 SEP -4	Page 1 of 11 Page 1 of 11 Page 1 of 11
			MATERIAL OF THE PARTY OF THE PA	Of REPRESSION MC
Name: DAVID SCHWEIKERT	Daytime Telephone:	202-225-2190	A \$200 penalty shall be assessed against any individual who files more than 30 days late.	ssessed against any than 30 days late.
FILER X Member of the U.S. State:A STATUS House of Representatives District:C	AZ 06	Officer or Employing Office: Employee	Staff Filer	Type: (If Applicable) Principal Assistant
REPORT 2016 Annual (Due: May 15, 2017)	X Amendment	t Termination Date of Termination:	nination:	
PRELIMINARY INFORMATION - ANSWER EACH OF THE	THESE QUESTIONS	S		
A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Receive more than \$200 in unearned income from any reportable asset during the reporting period? 	Yes X No	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	Yes	No C
8. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period?	Yes X No	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$375 in value from a single source during the reporting period?	lue from a single Yes	8 ×
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?	Yes X No	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$375 in value from a single source during the reporting period?	id receive any totaling more than Yes eporting period?	× ×
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	Yes X No	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period?	nation to charity in Yes	No ×
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes X No	E COR	RESPONDING SCHEDULE IF YOU ANSWER "YES"	ANSWER "YES"
IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR	T, OR TRUST II	TRUST INFORMATION - ANSWER EACH O	EACH OF THESE QUESTIONS	SNO
IPO - Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? contact the Committee on Ethics for further guidance.	al Public Offering during	g the reporting period? If you answered "yes" to this question, please	uestion, please Yes	No X
TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics from this report details of such a trust that benefits you, your spouse, or dependent child?	, iii	and certain other "excepted trusts" need not be disclosed. Have you excluded	ave you excluded Yes	No ×
EXEMPTION – Have you excluded from this report any other assets, "uneamed" income, transactions, or liabilities all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	amed" income, transactions attentions and the commitment of the co	ions, or liabilities of a spouse or your dependent child because they meet ittee on Ethics.	because they meet Yes	No ×

Use additional sheets if more exace is required.

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name:

DAVID SCHWEIKERT

Page_

N

<u>o</u>

=

누지원 If you so choose, you may indicate that an esset income source is that of your spouse (SP) dependent child (DC), or jointly held with anyone (I in the optional column on the far left. If you have a privately-traced fund that is an Excepted investment Fund, please check the "EIF" box. For bank and other cash accounts, total the amount in all interest-bearing accounts, if the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts. For a detailed discussion of Schedule A requirements please refer to the instruction booklet. nomes and vacation homes (unless there was rental income during the reporting period); and any financial interest in, or income derived from, a federat retirement program, including the Thrift Savings Plan. 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 natura of its activities, and its geographic business in Elect. For rental and other real property held for investment provide a complete address or description, e.g., "renta 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds. Provide complete names of stocks and mutual funds (do not use only ticker symbols). production of Income and with a fair market value scaeeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income that generated more than \$200 in "unearned" income Exclude: Your personal residence, including secon property," and a city and state. For all IRAs and other retirement plans (such during the year dentify (a) each asset held for investment Assets and/or income Sources LOOMIS VAL N (LSVNX) BARON GR INST (BGRIX) 457 529 FIDELITY AZ PORTFOLIO 2033 PLAN - AZ RETIREMENT Simon & Schuster Mega Corp. Stock ABC Hedge Fund 366 III. × used. *Column M is for assets held by your spouse or dependent child in which you have no interest. If an asset was sold during the reporting period and is included only because it generated income, the value should be "None." Indicate value of asset at close of the reporting period. If you valuation method other than fair market value, please specify the r > \$1-\$1,000 ᄍ × \$1,001-\$15,000 a × × \$15,001-\$50,000 Ö \$50,001-\$100,000 m Value of Asset \$100.001-\$250.000 71 × \$250,001-\$500,000 6 \$500,001-\$1,000,000 I \$1,000,001-\$5,000,000 _ \$5,000,001-\$25,000,000 <u>د</u> \$25,000,001-\$50,000,000 ~ Over \$50,000,000 _ 8 Spouse/DC Asset over \$1,000,000* ĸ Check all columns that apply. For accounts that generate tax-deferred income (such as 401(4), IRA, or 529 accounts), you may check the "Tax-Deferred column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if the NONE asset generated no income during the reporting period **DIMIDENDS** × RENT INTEREST Type of Income CAPITAL GAINS EXCEPTED/BLIND TRUST × TAX-DEFERRED × × Royaltins Other Type of Incom (Specify: e.g., Partnership income or Farm income For easels for which you checked Tax-Deterred' in Block C, you may check the "None" column. For all other assets indicate he category of income by checking the appropriate box below. Dhiddends, Interest, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if no income was earned or generated. × None *Column XII is for assets held by your spouse or dependent child in which you have no interest. \$1-\$200 = \$201-\$1,000 = \$1,001-\$2,500 ₹ × Amount of Income \$2,501-\$5,000 × < \$5,001-\$15,000 ≤ BLOCKD \$15,001-\$50,000 ≦ \$50,001-\$100,000 ≦ \$100,001-\$1,000,000 文 \$1,000,001-\$5,000,000 × Over \$5,000,000 ≍ Spouse/DC Asset with Income over \$1,000,000 ≚ l Indicate if the asset had asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 If only a portion of an asset was sold, please indicate as blank if there are no transactions that exceeded \$1,000. in the reporting period. follows: (S (part)). eave this column , S, S(part), or E Transaction BLOCKE

C	1	1
7	-	i
3	1	
	I	
г	Ī	1
r		i
٠		
-		
Т		
r	Ī	١
٠,	ì	
-	•	
١	ı	
٦	b	
ć	í	۱
-	'	í
٠,	,	i
Γ	Ī	1
-	_	į
C	,	į
Ξ		
Ç	۲	Ē
•	•	1
1	٠.	
•		
•		
2		
(2 r	2	
	7	
֓֜֜֜֜֜֜֜֜֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	7	
	2	
2		
	212	
		1
	212	
	210221	

Name:

DAVID SCHWEIKERT

Page 3

_ of 11

					SP						SP				SP	누烷쪽		
BlackRock U	BlackRock Ad	BlackRock Inte	BlackRock Glo	BlackRock Sm.	SESC - 401(K)		SFT IDX 500 C2	SFT MTG SEC C2	SFT CORE BOND C2	SFT IVY GROWTH			PUT VT GF	PUT VT G	PUTNAM IRA			Assets and
BlackRock US Government Bond Pt A (CIGAX	BlackRock Adv Lrg Cap Vel Inv A (MDLVX	BlackRock International Inv A (MDILX)	BlackRock Global Allocation Inv A (MDLOX	BlackRock Small Cap Growth II Inv A (MDSWX	01(K)		00 C2	SEC C2	BOND C2	ROWTH	INSURANCE - VARIABLE LIFE		PUT VT GRWTH & INCM	PUT VT GRWTH OPP	IRA	ASSET NAME		BLOCK A Assets and/or Income Sources
and Pt A (CIG	nv A (MDLVX)	(XJIGM)	W A (MDLOX	II Inv A (MDSM							EUFE							Sources
ΑX		_		8					_	_					_	믞	None	
×	-		_		-	ļ	_							<u> </u>			Р	
			-	•					_									
							×	×	×	×			×	×			\$1,001-\$15,000	
	×	×	×	×			<u> </u>										\$15,001-\$50,000	
L					ļ	ļ	<u> </u>	_									\$50,001-\$100,000 m	Val.
L					_		_	<u> </u>	-					_			\$100,001-\$250,000	BLOCK B Value of Asset
ļ							<u> </u>	-						_			\$250,001-\$500,000	f As
									ļ				· · ·	_			\$500,001-\$1,000,000 <u> </u>	Set .
ļ					ļ			ļ	-								\$1,000,001-\$5,000,000	1
_	\vdash		-		-		-		-		_							
					-			-	 		-		<u> </u>	_			\$25,000,001-\$50,000,000	
\vdash	-		-	-			-		├	-	<u> </u>		\vdash	-			Spouse/DC Asset over \$1,000,000°	
H					<u> </u>		×	×	×	×.			_				NONE	
-		_	 - 		-	'	 	^	-	C.	-	:	-	-	<u> </u>		DMIDENDS	
			-				-	-	-				┝	-			RENT 1.7	i
	-	"a '	-		-	17.	 		┢		┢		\vdash				INTEREST	Į.
-	-						-	 		 			-				CAPITAL GAINS	2 BC
					<u> </u>				-			_					EXCEPTED/BLIND TRUST	BLOCK C
×	×	×	×	×		_				<u> </u>	-		×	×			TAX-DEFERRED .	BLOCK C
																	Other Type of Income (Specify: e.g., Partnership Income or Ferm Income)	. 19
Г			-				×	×	×	×		7					None	
																	\$1-\$200	
							Ŀ				Ŀ						\$201-\$1,800	
	<u> </u>			<u> </u>	L				L	L	L		L	<u> </u>		ļ	\$1,001-\$2,500	≱
Ŀ						<u> </u>						·		<u> </u>			\$2,501.\$5,000 <	BLOCK D Amount of Income
<u> </u>	<u> </u>	_			_	<u> </u>		lacksquare	<u> </u>	<u> </u>				<u> </u>			\$5,001-\$15,000 ≤	BLOCK D
_		_	L	<u> </u>	_	<u> </u>	-	·	_	lacksquare		ļ	_	ļ	_		\$15,001-\$50,000	쿲
<u> </u>	-	\vdash	_		-	-	_	ļ	<u> </u>	-		ļ		<u> </u>	-		\$50,001-\$100,000 ≦	ome
		L		_	-			-		1	-	<u> </u>		 	_		\$100,001-\$1,000,000	·-
<u> </u>	-	-	-	\vdash	-	1	\vdash	-	-	\vdash				-	-		\$1,000,001-\$5,000,000 × Over \$5,000,000 ×	
H	-	<u> </u>		-	-	1	\vdash	\vdash	-	-			-	-	\vdash		Spouse/DC Asset with Income over \$1,000,000*	
\vdash	-			_	-	-	_	┢╾	╁	\vdash		_	-	+	-	-		
S	P													ס			S, S(part), or E	BLOCK E Transaction
L				L		<u> </u>			Ĺ.,				_		_		m	9 ™

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name:

DAVID SCHWEIKERT

of 11

						T-101	Γ									ងខ្លួន		
									AZ STATE RETIREMENT - EORP -	-	NO ASSETS HELD	REAL ESTATE - FOUNTAIN HILLS , AZ	SHERIDAN EQUITIES LLC	REAL ESTATE - FOUNTAIN HILLS, AZ	SHERIDAN EQUITIES HOLDINGS LLC	ASSET NAME		BLOCK A Assets and/or income Sources
						-	_			_			_	_	-	쁚	None	
_						ļ	ļ						×	_	_		/	
					·							-	·				\$1-\$1,000	
																	\$1,001-\$15,000	
								-									\$15,001-\$50,000	
						T						-					\$50,001-\$100,000 m	≲
		:															\$100,001-\$250,000	BLOCK B
\neg							T		1								\$250,001-\$500,000 a	BLOCK B
														1,-			\$500,001-\$1,000,000 ±	SSe
							Г		Γ						×		\$1,000,001-\$5,000,000	
					, T	· · · · · ·			1	-					- 2		\$5,000,001-\$25,000,000	
															Γ		\$25,000,001-\$50,000,000	
	-												<u> </u>				Over \$50,000,000	
																	Spouse/DC Asset over \$1,000,000"	
·							· .	:	-			- 3	×				NONE	
									T'''								DMDENDS	1
							<u> </u>						:				RENT	
																	INTEREST	₹
·							Г			·				7.7		4.	CAPITAL GAINS	BEC
							1						<u> </u>		<u> </u>		EXCEPTED/BLIND TRUST	BLOCK C
					Г			-	×								TAX-DEFERRED	BLOCK C
									PENSION				BUSINESS		BUSINESS		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	
				-			1	: :			` ·	=	×				- None -	
																	\$1-\$200 =	
	-	·												·			\$201-\$1,000	
																	\$1,001-\$2,500	Þ
					<u> </u>	-	1	Γ		Г	77	-	Γ				\$2,501-\$5,009 <	
										Γ	Γ				Π		\$5,001-\$15,000 ≤	BLOCK D Amount of Income
					Γ	Π		Γ		Γ			Γ		Γ.		\$15,001-\$50,000 · <u>≤</u>	井
							T		1						×		\$50,001-\$100,000	Con
			<u> </u>		Ī.	1	T	-	Т	Γ			Γ.			- 1	\$100,001-\$1,000,000 😾	ne
		<u> </u>		<u> </u>						Г			Γ	Г			\$1,000,001-\$5,000,000 ×	
				Г		T	1	Ì	T	Ī.		_	Ī -		 		Over \$5,000,000	
									<u> </u>					F			Spouse/DC Asset with Income over \$1,000,000*	
																	r, s, s(part), or E	BLOCK E Transaction

SCHEDULE B - TRANSACTIONS

Name: DAVID SCHWEIKERT Page_5 of 11

	ı	1	7				S B	SP P		• • •			-		l				"		d 0 70 m 7 ^	- T
							Ü	יסר י			SP						DC	જ	SP, DC, JT	Capital Gains: If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box, unless it was an asset in a tax-deferred account, and disclose the capital gain income on Schedule A. *Column K is for assets solely held by your spouse or dependent child.	dependent child for investment or the production of income. Include transactions that resulted in a capital loss. Provide a brief description of an exchange transaction. Exclude transactions between you, you spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please choose "partial sale" as the type of transaction.	Report any
							BlackRo	BlackR		PUTNA	PUTN			457 PLA	-	457 PL/	529 - F	Example		ilms: ffa. capital ga a capital g	child for in a capital ansactions or sale of s tion of an	purchase
							BlackRock US Government Bond Pt A (CIGAX) - REALLOCATION	BlackRock Adv Lrg Cap Val Inv A (MDLVX) - REALLOCATION		PUTNAM IRA - PUT VT GRWTH OPP - REALLOCATION	PUTNAM IRA - PUT VT VOYAGER - REALLOCATION		CAPITAL GAINS	457 PLAN - BARON GR INST (BGRIX) - REINVESTED	DIVIDENDS AND CAPITAL GAINS	457 PLAN - LOOMIS VAL N (LSVNX) - REINVESTED	529 - FIDELITY - AZ PORTFOLIO 2033	ļ		sales trani ins" box, u ain income	ivestment loss. Pro between your perso asset is	ny securit
							overnmer:	rg Cap Va	·	ит үт сғ	ขาง เก		SAINS)N GR IN	S AND C	AIS VAL N	AZ PORT	Mega Corp. Stock		saction reuniless it was on Sche	or the provide a bri vide a bri you, you mal reside soid, ple	exchange
							t Bond Pt	i inv A (h		үмтн ор	OYAGER			ST (BGRI)	ъРПА1 G	(LSVNX	FOLIO 20	S.	Asset	sulted in a	duction of ef descrip if spouse ince, unle	transacti
							A (CIGA)	PLVX) -		P - REAL	- REALLO	,		K) - REIN	AINS	- REINV	33		#	a capital g et in a tao or depen	income. It iton of an it or depe iss it gene iss "partia	ons that e
)-REAL	REALLOC		OCATIO	CATION			ÆSTED		STED				jain in exc c-deferred dent child	nclude trainexchangumdent chi rated rent i sale" as	r your sp epeeax
							_осатю	ATION		2										account,	nsactions transact thren, or tal income the type	\$1,000 in ouse, or 1
	<u>.</u>						z	×						×		 		L		and .	of H	our th
						-				×						×	×	ļ		Purchase		Typ
											×						<u> </u>			Sale		Type of Transaction
							×			_	·			70	7. 7-	:::.		×		Partial Sale		ansacti
																				Exchange		on I
																		×		Check Box if C	apital Gain Exceeds	ed
							6/30	6/30	<u> </u>	11/18/16	11/18/16			11/2		12/2	12/28/16	3		- S &	ξ 2 3 6 1 6 1 6 1 6 1 6 1 6 1 6 1 6 1 6 1 6	0
							6/30/2016	6/30/2016		B/16	B/16			11/29/16		12/22/16	3/16	3,976		wookly, if applicable	(MO/DAYR) or Quarterly,	Date
-			-	-	-		×:	×		×	×			×		×	×			\$1,001- \$15,000	>	
			:												_			×		\$15,001- \$50,000	tu	
							_ ' 1										-	Ŀ		\$50,001- \$100,000	o.	
																				\$100,001- \$250,000	D	Am
			_											-		<u> </u>		ļ.		\$250,001- \$500,000	. ш	ount (
									ļ <u>.</u>	<u></u>										\$500,001- \$1,600,000	п	of Tran
-					_		-,													\$1,000,001- \$5,000,000	ດ	Amount of Transaction
																				\$5,000,001- \$25,000,000	Ξ	ă
							:	·	-		-									\$25,000,001- \$50,000,000	· -	
																				Over \$50,000,	,000 _	
			-					-	11.				-							Over \$1,000,0 (Spouse/DC A		

SCHEDULE C - EARNED INCOME

Name: DAVID SCHWEIKERT Page_6__ of 11

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 reporting period. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

INCOME LIMITS and PROHIBITED INCOME: The 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,765. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited. EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

Source (include date of receipt for honoraria)	lype	Amount
Keene State	Approved Teaching Fee	\$6,000 \$18,000
Examples: Civil War Roundtable (Oct. 2)	Spouse Speech	\$1,000
Ontario County Board of Education	Орине опшу	
SCOTTSDALE EYE SURGERY	SPOUSE SALARY	N/A
STATE OF AZ RETIREMENT - EORP	STATE PENSION	\$45,692

SCHEDULE D - LIABILITIES

Name: DAVID SCHWEIKERT Page 7 of 11

period. 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 you rent it out or 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 owned to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child. Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period by you,

ı								
	:					SP, DC, JT		
			WELLS	NAVIENT	Example			
			WELLS FARGO	NAVIENT (PREVIOUSLY SALLIE MAE)	First Bank of Wilmington, DE	Creditor		•
			3/2013	10/2003	5/98	Date Liability Incurred MO/YR		
			MORTGAGE - RESIDENCE	STUDENT LOAN	Mortgage on Rental Property, Dover, DE	Type of Liability		
						\$10,001- \$15,000	>	
				×		\$15,001- \$50,000	В	
-						\$50,001- \$100,000	° .	
					×	\$100,001- \$250,000	ם	A
		-	×			\$250,001- \$500,000	т	Amount of Liability
						\$500,001~ \$1,000,000	71	t of Li
						\$1,000,001- \$5,000,000	Ç.	ability
						\$5,000,001- \$25,000,000	æ	
						\$25,000,001- \$50,000,000	-	
						Over \$50,000,000	۲.	
-	- · :	-				Over \$1,000,000* (Spouse/DC Liability)	~	

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

		MANAGING MEMBER SHERIDAN EQUITIES HOLDINGS LLC	MANAGING MEMBER SHERIDAN EQUITIES LLC	Position
				Name of Organization

SCHEDULE F - AGREEMENTS

Name: Page 8 of 11

Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former

Date	Parties to Agreement	Terms of Agreement
11/2010	SHERIDAN EQUITIES HOLDINGS LLC AND SWARTZ AND BROUGH	Sheridan Equities Holdings LLC has an agreement with Swartz and Brough for a portion of resident equity on the
		Partnership formally managed/participated in by Sheridan Equities. Now controlled by Swartz & Brough upon
		the completion issue.
1/2004	STATE OF AZ RETIREMENT SYSTEM - EORP AND ME	STATE PENSION PLAN

SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$375 received by you, your spouse, or your dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality from an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$150 or less need not be added towards the \$375 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph Smith, Adington, VA	Silver Platter (determination of personal friendship received from the Ethics Committee)	\$400
,		

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

Page 9 of 11

Name:

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$375 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed 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 (FGDA, 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

the filer.

					l adalas	Enado	Family Member
		Source	Date(s)	City of Departure-Destination-City of Return	(YAN)	(Y/N)	includ
	· .	Government of China (MECEA)	Aug. 6-11	DC-Beğirg, China-DC	۲	Υ	
	Examples:	Habitet for Humanity (charity fundralise)	War. 3-4	DC-Boston-DC	4	Υ	
		,					
			-				
-							
· · · · ·							
_							
ı			i				

SCHEDULE 3 - PAYMENTS MADE TO CHARTTY IN	Name:		Page 10 of 11
List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of paying an honorarium to you. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics.	of an event to a charitable organization	in lieu of paying an	honorarium to you. A separat
Source	Activity	Date	Amount
Association of American Associations, Washington, DC	Speech	Feb, 2, 2016	\$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2016	-

FILER NOTES (Optional)

Name: David Schweikert Page of

						,		NOTE NUMBER
			For all 401(k) transactions, we have been unable to confirm the dates for any reinvestment transactions due to poor reports from the managing brokerage firm. We selected 6/30 of the year to be the set date to report these transactions.	For the AZ Retirement System , there is no valuation due to the fact that this is a pension plan rather than a 401(k) or equivalent.	For the MN Insurance asset valuation, statements providing the value of the policy as of August 31st of the report year were used as a reasonable fair market assessment for the 12/31 reporting requirement.	manager	Please note that the added brokerage transactions are due to reinvested dividends or capital gains or reallocations determined and executed by financial advisors. These were NOT a result of any action taken on the part of the Member rather just a typical re-balancing of the accounts by asset	NOTES