

**HAND
DELIVERED**

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**UNITED STATES HOUSE OF REPRESENTATIVES
2014 FINANCIAL DISCLOSURE STATEMENT**

Form A
For Use by Members, Officers, and Employees

2015 SEP -4 PM 11:05

Name: **DAVID SCHWEIKERT** Daytime Telephone: **202-225-2190**

(Office Use Only)

MC

FILER STATUS	<input checked="" type="checkbox"/> Member of or Candidate for U.S. House of Representatives	State: AZ District: 6TH	<input type="checkbox"/> Officer or Employee	Employing Office: _____
REPORT TYPE	<input type="checkbox"/> 2014 Annual (Due: May 15, 2015)	<input checked="" type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Date of Termination: _____

PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

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? <u>or</u> b. Make more than \$200 in unearned income from any reportable asset during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	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 <input checked="" type="checkbox"/> No <input type="checkbox"/>
B. 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 <input checked="" type="checkbox"/> No <input type="checkbox"/>	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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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 <input checked="" type="checkbox"/> No <input type="checkbox"/>	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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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 <input checked="" type="checkbox"/> No <input type="checkbox"/>	I. 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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	

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 during the reporting period? If you answered "yes" to this question, please contact the Committee on Ethics for further guidance.	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 that benefits you, your spouse, or your dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
EXEMPTION - Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or your 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 A - ASSETS & "UNEARNED INCOME"

Name: DAVID SCHWEIKERT

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BLOCK A			BLOCK B													BLOCK C								BLOCK D												BLOCK E	
Assets and/or Income Sources			Value of Asset													Type of Income								Amount of Income												Transaction	
<p>Identify (a) each asset held for investment or production of income and with a fair market value exceeding \$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 during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use only 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 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.</p> <p>For rental and other real property held for investment, provide a complete address or 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); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.</p> <p>If you have a privately-traded fund that is an Excepted Investment Fund, please check the "EIF" box.</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 jointly held with anyone (JT), in the optional column on the far left.</p> <p>For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.</p>			<p>Indicate value of asset at close of the reporting period. 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 period and is included only because it generated income, the value should be "None."</p> <p>*Column M is for assets held by your spouse or dependent child in which you have no interest.</p>													<p>Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k), 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 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 for assets held in taxable accounts. Check "None" if no income was earned or generated.</p> <p>*Column XII is for assets held by your spouse or dependent child in which you have no interest.</p>												<p>Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in the reporting period.</p> <p>If only a portion of an asset was sold, please indicate as follows: (S (part)).</p> <p>Leave this column blank if there are no transactions that exceeded \$1,000.</p>	
SP, DC, JT	EIF		A	B	C	D	E	F	G	H	I	J	K	L	M	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	TAX-DEFERRED	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII		
			None	\$1-\$1,000	\$1,001-\$15,000	\$15,001-\$50,000	\$50,001-\$100,000	\$100,001-\$250,000	\$250,001-\$500,000	\$500,001-\$1,000,000	\$1,000,001-\$5,000,000	\$5,000,001-\$25,000,000	\$25,000,001-\$50,000,000	Over \$50,000,000	Spouse/DC Asset over \$1,000,000*									None	\$1-\$200	\$201-\$1,000	\$1,001-\$2,500	\$2,501-\$5,000	\$5,001-\$15,000	\$15,001-\$50,000	\$50,001-\$100,000	\$100,001-\$1,000,000	\$1,000,001-\$5,000,000	Over \$5,000,000	Spouse/DC Asset with income over \$1,000,000*	P, S, S(part), or E	
Examples:		SP Mega Corp. Stock					X										X						Royalties				X										S(part)
		JT Simon & Schuster								X												Partnership Income															
		ABC Hedge Fund	X																																		
		457 PLAN - AZ RETIREMENT																																			
		BARON GR INST (BGRX)								X												X															P
		LOOMIS VAL N (LSVNX)								X												X															P

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: DAVID SCHWEIKERT

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BLOCK A Assets and/or Income Sources		BLOCK B Value of Asset													BLOCK C Type of Income							BLOCK D Amount of Income												BLOCK E Transaction		
SP, DC, JT	ASSET NAME	A	B	C	D	E	F	G	H	I	J	K	L	M	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	TAX-DEFERRED	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	P, S, Spouse, or E	
		None	\$1-\$1,000	\$1,001-\$15,000	\$15,001-\$50,000	\$50,001-\$100,000	\$100,001-\$250,000	\$250,001-\$500,000	\$500,001-\$1,000,000	\$1,000,001-\$5,000,000	\$5,000,001-\$25,000,000	\$25,000,001-\$50,000,000	Over \$50,000,000	Spouse/DC Asset over \$1,000,000*									None	\$1-\$200	\$201-\$1,000	\$1,001-\$2,500	\$2,501-\$5,000	\$5,001-\$15,000	\$15,001-\$50,000	\$50,001-\$100,000	\$100,001-\$1,000,000	\$1,000,001-\$5,000,000	Over \$5,000,000	Spouse/DC Asset with income over \$1,000,000*		
SP	PUTNAM IRA			X																X																
	PUT VT VOYAGER			X																X																
	PUT VT GRWTH & INCM			X																X																
SP	INSURANCE - VARIABLE LIFE																																			
	SFT IVY GROWTH			X																															P	
	SFT CORE BOND C2			X																																
	SFT MTG SEC C2			X																																
	SFT IDX 500 C2			X																																
SP	SESC - 401(K)																																			
	BlackRock Small Cap Growth II Inv A (MDSLX)				X																															
	BlackRock Global Allocation Inv A (MDLOX)				X																															
	BlackRock International Inv A (MDLX)			X																																
	BlackRock Adv Ltg Cap Val Inv A (MDLVX)				X																															
	BlackRock US Govt Bond Inv A (CIGAX)		X																																	

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Use additional space if you require.

SCHEDULE B - TRANSACTIONS

Name: DAVID SCHWEIKERT

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Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the reporting period for any security or real property held by you, your spouse, or your 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, your 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.		Type of Transaction				Date (MO/DA/YR) or Quarterly, Monthly, or Bi- weekly, if applicable	Amount of Transaction										
SP, DC, JT	Asset	Purchase	Sale	Partial Sale	Exchange	Check Box if Capital Gain Exceeded \$200	A \$1,001-\$15,000	B \$15,001-\$50,000	C \$50,001-\$100,000	D \$100,001-\$250,000	E \$250,001-\$500,000	F \$500,001-\$1,000,000	G \$1,000,001-\$5,000,000	H \$5,000,001-\$25,000,000	I \$25,000,001-\$50,000,000	J Over \$50,000,000	K Over \$1,000,000* (Spouse/DC Asset)
SP	Example Mega Cap. Stock			X		X		X									
	457 PLAN - LOOMIS VAL N (LSVNX) - REALLOCATION	X						X									
	457 PLAN - BARON GR INST (BGRX) - REALLOCATION	X						X									
	457 PLAN - NATIXIS LOOMIS VAL Y (LSGX) - REALLOCATION		X					X									
	457 PLAN - BARON GR (BGRFX) - REALLOCATION		X					X									
	457 PLAN - LOOMIS VAL N (LSVNX) - REINVEST CAP GAINS	X						X									
	457 PLAN - BARON GR INST (BGRX) - REINVEST CAP GAINS & DIV	X						X									
SP	INSURANCE - SFT IVY GROWTH - REALLOCATION	X						X									
SP	INSURANCE - IVY VIP GROWTH - REALLOCATION		X					X									
	SHERIDAN EQUITIES - LAMAR PROPERTY - GLENDALE AZ		X							X							
	SHERIDAN EQUITIES - WILLETTA PROPERTY - PHOENIX AZ		X							X							
SP	BlackRock International Inv (MBILX)		X					X									
SP	BlackRock Small Cap Growth II Inv B (MBSWX)		X					X									
SP	BlackRock Adv Lrg Cap Val Inv B (MBLVX)		X					X									
SP	BlackRock US Government Bond Inv B1 (BIGEX)		X					X									
SP	BlackRock Global Allocation Inv B (MBLOX)		X					X									
SP	BlackRock Large Cap Value B (MDLVX)	X						X									
SP	BlackRock US Government Bond Pt A (CIGAX)	X						X									
SP	BlackRock International Inv (MDLX)	X						X									
SP	BlackRock Large Cap Value B (MDLVX)	X						X									

Use additional sheets if more space is required.

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Use additional sheets if more space is required.

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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.

Use additional sheets if more space is required.

SCHEDULE D - 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 your dependent child. Mark the highest amount owed during the reporting 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 owed 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.

SP, DC, JT	Creditor	Date Liability Incurred MO/YR	Type of Liability	Amount of Liability										
				A \$10,001- \$15,000	B \$15,001- \$50,000	C \$50,001- \$100,000	D \$100,001- \$250,000	E \$250,001- \$500,000	F \$500,001- \$1,000,000	G \$1,000,001- \$5,000,000	H \$5,000,001- \$25,000,000	I \$25,000,001- \$50,000,000	J Over \$50,000,000	K Over \$1,000,000* (Spouse/DC Liability)
Example	First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE				X							
	SALLIE MAENAVIENT	8/2003	STUDENT LOAN			X								
	METRO PHOENIX BANK	8/2010	NOTE - SHERIDAN EQUITIES LLC			X								
	INGCAPITAL ONE - PAID OFF IN 2014	6/2007	MORTGAGE - RESIDENCE					X						
	WELLS FARGO	3/2013	MORTGAGE - RESIDENCE					X						

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.

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

SCHEDULE D – 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 your dependent child. Mark the highest amount owed during the reporting 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 owed 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.

SP DC, JT	Creditor	Date Liability Incurred MO/YR	Type of Liability	Amount of Liability										
				A \$10,001- \$15,000	B \$15,001- \$50,000	C \$50,001- \$100,000	D \$100,001- \$250,000	E \$250,001- \$500,000	F \$500,001- \$1,000,000	G \$1,000,001- \$5,000,000	H \$5,000,001- \$25,000,000	I \$25,000,001- \$50,000,000	J Over \$50,000,000	K Over \$1,000,000* (Spouse/DC Liability)
Example	First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE				X							
	CANYON STATE BANK	12/31/2014	REVOLVING CHARGE ACCOUNT		X									
	CHASE BANK - SH	12/31/2014	REVOLVING CHARGE ACCOUNT		X									
	CHASE BANK - UAL	12/31/2014	REVOLVING CHARGE ACCOUNT		X									
SP	US AIRWAYS	12/31/2014	REVOLVING CHARGE ACCOUNT		X									

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.

Position	Name of Organization

SCHEDULE F -- AGREEMENTS

Name: DAVID SCHWEIKERT

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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 employer.

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.
5/1/2008	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, Arlington, VA	Silver Platter (determination of personal friendship received from the Ethics Committee)	\$400

Name: DAVID SCHWEIKERT

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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 \$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.

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FILER NOTES
(Optional)

Name: David Schweikert	Page ____ of ____
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NOTE NUMBER	NOTES
	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 manager
	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.
	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 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.

Use additional sheets if more space is required.