

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • 135 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Hon. David Scott

Status: Member State/District: GA13

FILING INFORMATION

Filing Type: Annual Report

Filing Year: 2016

Filing Date: 05/5/2017

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Legislative Pension - State of Georgia		Undetermined	see schedule c	\$5,001 - \$15,000	П
NY Life Insurance - Whole		\$100,001 - \$250,000	None		
NY Life Insurance - Whole	SP	\$50,001 - \$100,000	None		
Southern Company (SO)		\$1,001 - \$15,000	Dividends	\$201 - \$1,000	
Washington, DC home		\$1,000,001 - \$5,000,000	Rent	\$15,001 - \$50,000	
LOCATION: Washington, DC, US					

SCHEDULE B: TRANSACTIONS

None disclosed.

SCHEDULE C: EARNED INCOME

Source	Туре	Amount
State of Georgia	Legislative Pension	\$11,724.00

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Туре	Amount of Liability
JT	Sun Trust	January 2003	Mortgage on rental property, Washington, DC	\$250,001 - \$500,000
JT	Caliber Home Loans	June, 2007	Mortgage on personal residence, Atlanta, GA	\$100,001 - \$250,000

SCHEDULE E: POSITIONS

Position	Name of Organization	
Board of Advisors - unpaid	Dean Rusk Center, University of Georgia School of Law	

SCHEDULE F: AGREEMENTS

Date	Parties To	Terms of Agreement
January 2012	Myself and the State of Georgia	continued participation in the legislative pension plan

SCHEDULE G: GIFTS

None disclosed.

SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS

None disclosed.

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

IPO: Did you purchase any shares that were allocated as a part of an Initial Public Offering?

C Yes No

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?

C Yes No

Exemption: 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?

C Yes No

CERTIFICATION AND SIGNATURE

I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

Digitally Signed: Hon. David Scott , 05/5/2017