8	s. Yes	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.	บ excluded from this report any other assets, "unearned" ir в they meet all three tests for exemption? Do not answer "y	Exemptions— Have y
S S	Yes 🗌 N	tee on Ethics and certain other "excepted trusts" need not be st benefiting you, your spouse, or dependent child?	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" ne disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Trusts Details
	SHOIT	ATION - ANSWER EACH OF THESE QUESTIONS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWE	EXCLUSION OF SPO
	1		Schedule V.	If yes, complete and attach Schedule V
riate	and the appropr	Each question in this part must be answered and the appropriate	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	V. than \$10,000) during the reporting period?
		If yes, complete and attach Schedule IX.	Schedule IV.	if yes, complete and attach Schedule IV.
S	Y 98	Did you have any reportable agreement or arrangement with an outside IX. entity?	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting Yes V No Deriod?	Did you, your spouse, or deput. IV. reportable asset in a transact period?
		If yes, complete and attach Schedule VIII.	Schedule III.	If yes, complete and attach Schedule III.
8	₹	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	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 Yes No No	Did you, your spouse, or a dependent child III. more than \$200 in the reporting period or the more than \$1,000 at the end of the period?
		If yes, complete and attach Schedule VII.	Schedule II.	If yes, complete and attach Schedule II.
No	थ ऑड ड	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)?	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 No	Did any individual or organization you for a speech, appearance
		If yes, complete and attach Schedule VI.	Schedule I.	If yes, complete and attach Schedule I.
8	ft in the Yes	Did you, your spouse, or a dependent child receive any reportable gift in the VI. reporting period (i.e., aggregating more than \$350 and not otherwise exempt)?	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 Yes 🕢 No 🗌	Did you or your spouse have "earned" income (e. I. or more from any source in the reporting period?
		DUESTIONS	RMATION ANSWER EACH OF THESE QUESTIONS	PRELIMINARY INFORMATION
lays	more than 30 days late.	Termination Date:	Annual (May 15) Amendment Termination	Report Annua
gainst es	be assessed against anyone who files	Employee	House of Representatives District: 26	8
	A \$200 benalty shall will have	Officer Or Employing Office:	Member of the U.S. State: TX □	Memb
(Office Use Only) 4: 16 M	Office Use ((Daytime Telephone)	(Full Name)	
LEGISLATIVE RESOURCE CENTED	LEGISLATIVE RE	202-225-7772	Burgess, Michael C	
ND ERED	HAND DELIVERED	FORM A For use by Members, officers, and employees	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT	UNITED STATES
•	-			

SCHEDULE I - EARNED INCOME

Name Burgess, Michael C

Page 2 of 8

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	Туре	Amount
NORTHWESTERN MUT LIFE ANNUITY IRA (Self Directed IRA)	IRA	\$30,249.47
Self/World Net Daily	Publishing Contract	\$4,328.84

Please see attached pages 2A and 2B.	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.	Exclude: Your personal residence, including second homes and vacation homes (unless there was reintal 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.	For an ownership interest in a privately-held business that is not publically traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental or other real property held for investment, provide a complete address.	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 "unearmed" income during the year. Provide complete names of stocks and mutual funds (do not use ticker symbols.) For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e.,plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.	BLOCK A
					Year-End Value of Asset At close of reporting year. If you use a valuation method other than fair market value, please specify the method used, if an asset was sold and is included only because it is generated income, the value should be "None."	вгоск в
					Type of Income 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 galins, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	вгоск с
					Amount of Income 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. 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 conserved.	BLOCK D
					Transaction indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.	BLOCK E

CHEDULE II	SCHEDULE III - ASSETS AND "UNEARNED" INCOME				Fage 4A
8 7	ASSET and/or INCOME SOURCE	YEAR END VALUE OF ASSET	TYPE OF INCOME	AMOUNT OF INCOME	TRANSACTION
0,00,00		\$1 - 1,000	PARTNERSHIP INCOME	\$1 - 200	
		\$100,001 - 250,000	PARTNERSHIP INCOME	\$1,001 - 2,500	
		NONE			
	TITAN OPERATING GAS LEASE	NONE	ROYALTIES	\$15,001 - 50,000	יסד
7	74.845 ACRES LAMAR COUNTY, TX	NONE	NONE		S
	CEIVABLE	\$1,001 - 15,000	INTEREST/CAPITAL GAINS		
		NONE	CAPITAL GAINS	2,500	S
		\$50,001 - 100,000		NONE	i
	S	\$15,001 - 50,000		NONE	
	אָל	\$1,001 - 15,000	NONE	NONE	
		\$1,001 - 15,000	INTEREST	\$1 - 200	
	SON CONGRESSIONAL CREDIT UNION	\$1,001 - 15,000		NONE	
		\$15,001 - 50,000	INTEREST	\$1 - 200	
	0	\$1 - 1,000		NONE	
SP		\$1,001 - 15,000	DIVIDENDS	\$1 - 200	
	POSIT SWEEP COMBINED	\$1,001 - 15,000	INTEREST	\$1 - 200	
		\$1 - 1,000		NONE	
		\$1 - 1,000	DIVIDENDS	\$1 - 200	
		\$1 - 1,000	DIVIDENDS	\$1 - 200	
	ISHARE DJ US TLCM SCT IDX	\$1,001 - 15,000	DIVIDENDS	\$1 - 200	
	LIMITED BRANDS	\$1 - 1,000	DIVIDENDS	\$1 - 200	
	MICROSOFT	\$1,001 - 15,000	DIVIDENDS	\$1 - 200	
		\$1 - 1,000	DIVIDENDS	\$1 - 200	
	UNITED PARCEL SERVICE	\$1,001 - 15,000	DIVIDENDS	\$1 - 200	
	GENWORTH VARIABLE ANNUITY PLUS	\$15,001 - 50,000	DIVIDENDS	\$201 - 1,000	
Ş	A)	\$1 - 1,000	TAX DEFERRED	NONE	
Ş	RA)	\$15,001 - 50,000	TAX DEFERRED	NONE	
SP	BERKSHIRE HATHAWAY CL B (Self Directed IRA)	\$1,001 - 15,000	TAX DEFERRED	NONE	
ซึ่		\$1,001 - 15,000	TAX DEFERRED	NONE	
SP	IRA)	\$15,001 - 50,000	TAX DEFERRED	NONE	
Sp	ted IRA)	\$1,001 - 15,000	TAX DEFERRED	NONE	
SP	FUND (Self Directed IRA)	\$1,001 - 15,000	TAX DEFERRED	NONE	
SP	MFS SERIES TRUST II - GROWTH FD (Self Directed IRA)	\$1,001 - 15,000	TAX DEFERRED	NONE	
		\$1,001 - 15,000	TAX DEFERRED	NONE	
	cted IRA)	\$1,001 - 15,000	TAX DEFERRED	NONE	
	Directed IRA)	\$15,001 - 50,000	TAX DEFERRED	NONE	
	BERKSHIRE HATHAWAY CL B (Self Directed IRA)	\$1,001 - 15,000	TAX DEFERRED	NONE	
	CIGNA CORP. (Self Directed IRA)	\$1,001 - 15,000	TAX DEFERRED	NONE	
	IRA)	\$1,001 - 15,000	TAX DEFERRED	NONE	
		\$1 - 1,000	TAX DEFERRED	NONE	
	GENERAL ELECTRIC (Self Directed IRA)	\$1 - 1,000	TAX DEFERRED	NONE	
		\$1 - 1,000	TAX DEFERRED	NONE	
		\$1,001 ~ 15,000	TAX DEFERRED	NONE	
	IBM CORP. (Self Directed IRA)	\$1,001 - 15,000	TAX DEFERRED	NONE	
	ISHARES TREAS INFLATION PROT SECS (Self Directed IRA)	\$1,001 - 15,000	TAX DEFERRED	NONE	
	TOTAL TITLE TOTAL	\$1,001 - 15,000	TAX DEFERRED	NONE	
	MEDCO HEALTH VOLUTIONS (Veil Directed 174)		1 > 1	NONTI	

	410,001 00,000		#E44,00	
	\$15,001 - 50,000		\$250.001 - 200,000	
	\$5,001 - 15,000		\$100 001 - 100,000	
	\$3 501 - 5 000		\$50 001 - 100 000	
	\$1.001 - 2.500		\$15.001 - 50.000	
-	\$201 - 1,000		\$1,001 - 15,000	
	\$1 - 200		\$1 - 1,000	
	KEY YES			
	NONE	NONE	\$100,000 - 250,000	NORTHWEST MUTUAL LIFE INSURANCE-65 LIFE-1987-whole
	NONE	NONE	\$50,001 - 100,000	NORTHWEST MUTUAL LIFE INSURANCE-65 LIFE-1988-whole
-	NONE	NONE	\$50,001 - 100,000	NORTHWEST MUTUAL LIFE INSURANCE-65 LIFE-1989-whole
	NONE	NONE	\$100,000 - 250,000	NORTHWEST MUTUAL LIFE INSURANCE-65 LIFE-19915-whole
	NONE		\$100,000 - 250,000	NORTHWEST MUTUAL LIFE INSURANCE-65 LIFE-1991-whole
-	NONE		\$50,001 - 100,000	NORTHWEST MUTUAL LIFE INSURANCE-90 LIFE 1997-whole
	\$1 - 200	NDS	\$1 - 1,000	SPDR GOLD TR GOLD SHS ETF
m	NONE		\$1 - 1,000	SOUTHWEST AIRLINES
S	\$1 - 200	CAPITAL GAINS	NONE	SAN JUAN BASIN ROYALTIES UNIT
S	\$1 - 200	DIVIDENDS/CAPITAL GAINS	NONE	POWERSHARES QQQ INDEX
	NONE		\$1 - 1,000	POWERSHARES BIOTECHNOLOGY & GENOME PORT
	\$1 - 200	DIVIDENDS	\$1 - 1,000	POWERSHARES ZACKS MICRO CAP INDEX
ľπ	\$201 - 1,000	DIVIDENDS	\$1,001 - 15,000	PENN WEST PETE LTD NEW
ı	\$1 - 200	DIVIDENDS	NONE	PENN WEST ENERGY TRUST
1	NONE		\$1 - 1,000	OPKO HEALTH INC
S (PARTIAL)	\$1,001 - 2,500	DIVIDENDS/CAPITAL GAINS	\$1 - 1,000	LIMITED BRANDS
S (PARTIAL)	\$1 - 200	DIVIDENDS/CAPITAL GAINS	\$1 - 1,000	ISHARES MSCI SINGAPORE
S (PARTIAL)	\$1 - 200		\$1 - 1,000	ISHARES MSCI AUSTRIA
	NONE		\$1 - 1,000	GLOBAL E-POINT INC
	\$1 - 200	DIVIDENDS	\$1 - 1,000	EATON VANCE OHIO MUNI
П	\$1 - 200	CAPITAL GAINS	NONE	AIRTRAN HOLDINGS INC
-	NONE		\$1 - 1,000	AMR
	\$1 - 200	DIVIDENDS	\$1 - 1,000	TOYOTA MOTORS CORP.
	\$201 - 1,000	DIVIDENDS	\$15,001 - 50,000	HARTFORD ANNUITY
1	\$1 - 200		\$1,001 - 15,000	FIDELITY VALUE
S (PARTIAL)	\$1,001 - 2,500	DIVIDENDS/CAPITAL GAINS	\$15,001 - 50,000	FIDELITY EXPORT AND MULTINATIONAL
S	NONE		NONE	FIDELITY FOLITY INCOME II FUND
S (PARTIAL)	\$5,001 - 15,000	DIVIDENDS/CAPITAL GAINS	\$15,001 - 50,000	FIDELITY CONTRAFILIND
	\$1 - 200	DIVIDENDS CALLY CANAS	\$15,001 - 50,000	TIDELITY IN TERNAL CONFIDENCE OF THE PROPERTY
C /DADTI	91 - 200		41 - 1,000	FIDELITY CASH RESERVES (Money Market)
	2 CALL	DAX DEFERRED	\$1,001 - 15,000	MFS SERIES TRUST II - GROWTH FU (Set Directed IKA)
	NONE	TAX DEFERRED		FIDELITY ADV. SERIES - EQUITY GROWTH FUND (Self Directed IKA)
	NONE	TAX DEFERRED		TIME WARNER (Self Directed IRA)
	NONE	TAX DEFERRED	\$1 - 1,000	TEXAS INSTRUMENTS (Self Directed IRA)
	NONE	TAX DEFERRED	\$1,001 - 15,000	TELEFONOS DE MEXICO (Self Directed IRA)
-	NONE	TAX DEFERRED	\$15,001 - 50,000	STRYKER CORP. (Self Directed IRA)
	NONE	TAX DEFERRED	\$1,001 - 15,000	SOUTHWEST AIRLINES (Self Directed IRA)
т	NONE	TAX DEFERRED	\$1,001 - 15,000	PENN WEST PETE LTD NEW (Self Directed IRA)
П	NONE	TAX DEFERRED	NONE	PENN WEST ENERGY TRUST (Self Directed IRA)
	NONE	TAX DEFERRED	\$1,001 - 15,000	NOKIA (Self Directed IRA)
	NCNI	בא כני בארכ	97,000 - 10,000	MICKOSOFT CORT. (Self Directed IRX)
		TAY DEFERRED		THOROGOT CODE (S-K Disability)

SCHEDULE IV - TRANSACTIONS

Name Burgess, Michael C

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out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below. Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented

	SP, DC, JT
Please see attached 3A	Asset
	Type of Transaction
	Capital Gain in Excess of \$200?
	Date
	Amount of Transaction

					27	*** PEN	** IRA (* OIL &	SAN JL	POWE	PENN 1	PENN	LIMITE	ISHARI	ISHARI	SOUTH				JT FIDELI	JT FIDELI	PENNI	PENN	1 ACRI	74.845		SP, DC, JT	SCHEDULE IV - TRANSACTIONS	
					AIR IRAN HOLDINGS STARES ACQUIRED BY SOCITIVES AND MINLINES HINOGEL EXCID	*** PENN WEST ENERGY TRUST SHARES ACQUIRED BY PENN WEST PETE LID NEW THRO	** IRA CASHED OUT/LIQUIDATED IN 2011	* OIL & GAS LEASE RENT PAYMENT - WELL NOT PRODUCING YET	SAN JUAN BASIN ROYALTIES UNIT	POWERSHARES QQQ INDEX	PENN WEST PETE LTD NEW ***	PENN WEST ENERGY TRUST ***	LIMITED BRANDS	ISHARES MSCI SINGAPORE	ISHARES MSCI AUSTRIA	SOUTHWEST AIRLINES ****	AIRTRAN HOLDINGS INC ****	FIDELITY EXPORT AND MULTINATIONAL	FIDELITY EQUITY INCOME II FUND	FIDELITY CONTRAFUND	FIDELITY INTERNATIONAL DISCOVERY	PENN WEST PETE LTD NEW (Self Directed IRA) ***	PENN WEST ENERGY TRUST (Self Directed IRA) ***	1 ACRE 1831 CROW ST., DENTON, TEXAS	74.845 ACRES LAMAR COUNTY, TX	TITAN OPERATING GAS LEASE *	ASSET	ONS	
P = PURCHASE S = SALE E = EXCHANGE	풒	P = PURCHASE		KEY	NEINES HINOUGH EXCHANGE OF STOCK	JEST PETE LID NEW THROUGH RE			S	S	m	m	S (Partial)	S (Partial)	S (Partial)	m		S (Partial)	S	S (Partial)	S (Partial)	Е	m	S	S	P	TYPE OF TRANSACTION		
\$15,001 - 50,000		\$1,001 - 15,000	\$1 - 1,000	KEY	O I CCS	DUGH REORGANIZATION			4/25/2011 \$1 - 1,000	4/25/2011 \$1 - 1,000	1/1/2011 \$1,001 - 15,000	1/1/2011 \$1,001 - 15,000	5/3/11, 7/6/11 \$1,001 - 15,000	3/4/2011 \$1 - 1,000	3/4/2011 \$1 - 1,000	5/2/2011 \$1 - 1,000	5/2/2011 \$1 - 1,000	5/11/2011 \$1,001 - 15,000	3/8/2011 \$15,001 - 50,000	5/11/2011 \$50,001 - 100,000	5/11/2011 \$15,001 - 50,000	1/1/2011 \$1,001 - 15,000	1/1/2011 \$1,001 - 15,000	10/28/2011 \$50,001 - 100,000	11/3/2011 \$100,001 - 250,000	1/10/2011 \$15,001 - 50,000	DATE AMOUNT OF TRANSACTION	34	

SCHEDULE V - LIABILITIES

Name Burgess, Michael C

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amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; 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. NOTE: Pending legislation may require Members to report mortgates on 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 personal residences.

JT	JT	SP, DC, JT
Wells Fargo Bank	Bank of America	Creditor
May 2006	FEB 2000	Date Liability Incurred
Mortgage on personal residence, Lewisville, Texas (Paid off in 2011)	Mortgage on 4637 Ivanhoe, Ft Worth, Texas	Type of Liability
\$50,001 - \$100,000	\$15,001 - \$50,000	Amount of Liability

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

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, Name Burgess, Michael C Page 6 of 8

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 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 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	Lodgin	Food? (Y/N)	Was a Family g? Food? Member Included? (Y/N) (Y/N)	Days not at sponsor's expense
Alliance for Health Reform funded by a grant	Jan 15-17	Jan 15-17 DC-Ft Lauderdale-Dallas/Ft Worth	Υ	Y	Z	0 days
by the Commonwealth	_		_		_	

Fund

SCHEDULE VIII - POSITIONS

Name Burgess, Michael C

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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
Board of Trustee (Retired Member)	Medical Center of Lewisville, Texas

SCHEDULE IX - AGREEMENTS

Name Burgess, Michael C

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Identify the date, parties to, and general terms of any agreement or arrangement 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	Terms of Agreement
October 2010-	Self/World Net Daily	Publishing Contract