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DAVID SCHWEIKERT

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SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$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. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

 		 		 	 	 		_			_		
						STATE OF ARIZONA RETIREMENT - EORP	SCOTTSDALE EYE SURGERY	Ontario County Board of Education		State of Maryland		Source	
						RETIREMENT	SPOUSE SALARY	Spouse Salary	Spouse Speech	Legislative Pension	Approved Teaching Fee	Туре	
						\$37,640	NA	NA	\$1,000	\$9,000	\$6,000	Amount	

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SCHEDULE II—PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

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 an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics. A green envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
-	Speech	Feb. 2, 2012	\$2,000
Examples: XYZ Magazine	Article	Aug. 13, 2012	\$500

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						7	DC, E	SP.	Exclusion incompany of the control o	For a that ness tion i	prop.	plant acco	not u	of in the repo		
	WILLE	LAM/	64TH	SHERIDAN	SHERIDAN FOUNTAIN		Examples:		Exclude: Your personal resincemes and vacation homes income during the reporting ping \$5,000 or less in a pers accounts; and any financial interform, a federal retirement pro Savings Plan. If you so choose, you may i income source is that of your schild (DC), or is jointly held wit optional column on the far left. For a detailed discussion of Splease refer to the instruction t	For an ownersh that is not publicates, the nature tion in Block A.	a complete erty," and a	by IHAS and sylventers) provide unt that exceeds the exceeds and the exceeds are sylvented are sylvented and the exceeds are sylvented are sylvented are sylvented are sylvented are sylve	Provide complete name: not use ticker symbols.)	tify (a) each come with a come with a end of the rtable asset than \$200	Asset	
	Ţ	ŔР	DR	ΙΕΩ	₩ E	L		ЧS	pers attior he re ess ess y fin retire retire retire iscus iscus he in	ਹੁੰਨੂਰ	city ad	the Seed	mbc	a fail a fail rep for s	ä	
	WILLETTA PROPERTY - PHOENIX AZ	LAMAR PROPERTY - GLENDALE AZ	64TH DR PROPERTY - PHOENIX AZ	SHERIDAN EQUITIES LLC - FOUNTAIN HILLS, AZ	SHERIDAN EQUITIES HOLDINGS LLC - FOUNTAIN HILLS, AZ			Mega Corp. Stock	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; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. 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. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	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.	vide a complete address or a description, e.g., "rental property," and a city and state.	For all IMAS and other retrement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds. For rental or other real property held for investment, pro-	Provide complete names of stocks and mutual funds (do not use ticker symbols.)	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.	Asset and/or Income Source	BLOCK A
									None	>		spc + T	and inc	Indica year. I fair m used.		
						L	ਤੂ		\$1 – \$1,000			his	If an as and is income,	d ar cat		
							Indefinite		\$1,001 - \$15,000	C		학원	sset s, th	you you		
							6		\$15,001 – \$50,000	0		de m	included the value	Indicate value of year. If you use a fair market value, used.		
ļļ.					<u> </u>			×	\$50,001 - \$100,000	п		* This column is for assets held solely by your spouse or dependent child.	If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."	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.	<u>ĕ</u>	
ļļ						×	_		\$100,001 - \$250,000	П	_	or as	only because it should be "None."	asset at close of reporting valuation method other than please specify the method	Value of Asset	BE
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$\vdash \vdash$.					<u> </u>	-		\$5,000,001 - \$25,000,000			sole	e, ≕ebo	± 0 ° €		
-						 -	-		\$25,000,001 - \$50,000,000	<u></u>		. y	orting year generated	e other		
						L			Over \$50,000,000	<u></u>	_	y yo	g ye erat			
						L			Spouse/DC Asset over \$1,000,000*	₹						
						<u> </u>	<u> </u>		NONE		_	income. Chec generated no reporting perior	IRAs), you may check the "Tax- Deferred" column. Dividends, Inter- est, and capital gains, even if rein-	Check all columns that apply. For retirement accounts that do not allow you to choose specific investments of that generate tax-deferred income (such as 401(k) plans or		
1						ļ		×	DIVIDENDS		_	erate	s), and	me w yo		
- ∤-				×			-		RENT		4	rested, must income. Check generated no reporting period	IRAs), you ma Deferred colum est, and capital	Check all coluratirement ac retirement ac allow you to challow from that grant from the come (such	돟	
<u> </u>						×			INTEREST		4	O 7		At gas of un	Type of Income	BE
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				8	<u></u>	┢	D		TAX-DEFERRED			"None" if the asset income during the	ay check the "Tax- nn. Dividends, inter- l gains, even if rein-	mns that apply. For counts that do not counts that do not cose specific investenerate tax-deferred as 401(k) plans or	∃e	
				BUSINESS	BUSINESS		Royalties		Other Type of Income			ing e as		lans		
				ESS	SS	L	8		(Specify: e.g., Partnership Income or Farm Inc	come)		Set as		\$		
						_			None		4.	der as	3 2 3 4	B F N N N N N N N N N N N N N N N N N N		
									\$1 – \$200	=	_	* This dassets	inco	erre		
<u> </u>						L			\$201 – \$1,000	=			pital clos	sets colu	_	
						ļ		×	\$1,001 – \$2,500	₹	_	* This column is assets held so dependent child.	ed ga		į	
						_		Ц	\$2,501 – \$5,000	<u> </u>	_	column is for held solely lent child.	ear ear	For assets for which Deferred" in Block C, "None" column. For all of the category of incontraction box helow.	PI PI	₽
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\vdash					<u> </u>	-	-	$\vdash \downarrow$	\$1,000,001 - \$5,000,000	×	_	enerated spouse	- 5 8	hing hed		
						\vdash		\dashv	Over \$5,000,000 Spouse/DC Income over \$1,000,000*	<u>×</u>	_	 This column is for income generated by assets held solely by your spouse or dependent child. 	and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.	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 helpw. Dividends, interest.		
								S (partial)	See below for exam-	XII portion of an asset is sold, please indicate as	If only a			asset had B purchases (P), sales (S), or exchanges	Transaction	BLOCK E

SCHEDULE III—ASSETS AND "UNEARNED" INCOME Continuation Sheet (if needed)

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SP											Sp						ЧS			SP	SP, DC, JT	
RENTAL-11011 N 92ND ST, SCOTTSDALE, AZ	LOOMIS SAYLES VALUE(LSGIX)	BARON GR FUND (BGRFX)	457 PLAN - AZ RETIREMENT	AZ STATE RETIREMENT - EORP - NO SET VALUE - PENSION PLAN		BlackRock US Govt Bond Inv (BGIDX)	BlackRock Adv Lrg Cap Val Inv 8 (MBLVX)	BlackRock international Inv A (MBILX)	BlackRock Global Allocation Inv A (MBLOX)	BlackRock Small Cap Growth II Inv A (MBSWX)	SESC - 401(K)		ADVANTUS IDX 500 C2	ADVANTUS MTG SEC	ADVANTUS BOND	NY VIP GROWTH	INSURANCE - VARIABLE LIFE	PUT VT GRWTH & INCM	PUT VT VOYAGER	PUTNAM IRA		BLOCK A Asset and/or Income Source
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				PENSION						ŀ											Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	
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			L_							<u> </u>							ļ				\$1 - \$200 =	_
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			I^-						L												Spouse/DC Income over \$1,000,000° ≚	
																			:		متر دي س	BLOCK E Transaction

SCHEDULE IV— TRANSACTIONS

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. SP DC JT 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. 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 This column is for assets solely held by your spouse or dependent child SP Example: Mega Corporation Common Stock (partial sale) of Transaction **PURCHASE** Type × SALE **EXCHANGE** Check Box if Capital Gain Exceeded \$200 Quarterly, Monthly, or Bi-weekly, if applicable (MO/DAY/YR) 10-12-12 Date \$1,001-Þ \$15,000 \$15,001-Œ \$50,000 \$50,001n \$100,000 Amount of Transactior \$100,001-\$250,000 \$250,001m \$500,000 \$500,001-T \$1,000,000 \$1,000,001-Ω \$5,000,000 \$5,000,001-工 \$25,000,000 \$25,000,001 \$50,000,000 Over ے \$50,000,000 Over \$1,000,000* ㅈ (Spouse/DC Asset)

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SCHEDULE V— LIABILITIES

Name DAVID SCHWEIKERT Page 7_ of 9

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 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. Wembers: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal close of the preceding calendar year exceeded \$10,000. *This column is for liabilities held solely by your spouse or dependent child.

							Amou	라	Amount of Liability			
SP,		Liability		A	В	CD				00 보 01-		ility
JT C	Creditor	Mo/Year	Type of Liability	\$10,001- \$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 \$25,000,00	\$50,000,000 Over \$50,000,000	Spouse/DC Liability Over \$1,000,000*
	Example: First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main St., Dover, DE			×						
	SALLIE MAE	B/2003	STUDENT LOAN		×							
ŞP	CHASE BANK	4/2005	MORTGAGE - 11011 N 92ND STREET, SCOTTSDALE, AZ			×						
	METRO PHOENIX BANK	8/2 010	NOTE - SHERIDAN EQUITIES LLC - Rental Properties used as collateral		×							
	ING (Capital One)	6/2007	MORTGAGE - Residence				×	×				
	Chase Bank - SH	12/31/10	REVOLVING CHARGE ACCOUNT	×								
							,		1			

SCHEDULE VI— GIFTS

Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of 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 \$140 or less need not be added towards the \$350 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 H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	\$375

Name	
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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 totalling 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 paid directly by the sponsor

or were paid by you and reimbursed by the sponsor. Exclude: Travel-related expenses provided by tederal, 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.

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	Examples:	Administra.			l						:		
Source	Chicago Chamber of Commerce	Roycroft Corporation											
Date(s)	Mar. 2	Aug. 6–11											
City of Departure—Destination— City of Return	DC—Chicago—DC	DC—Los Angeles—Cleveland					1						
Lodging? (Y/N)	z	Υ						l .	!)	;		
Food? (Y/N)	z	Υ	-		:								
Was a Family Member Included? (Y/N)	Z	Υ											
Number of days not at sponsor's expense		2 Days											

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organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

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

SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an 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

Date	Parties To	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.
2010	STATE OF AZ RETIREMENT SYSTEM - EORP AND ME	STATE PENSION PLAN

FILER NOTES (Optional)

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NOTE
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