N N	Yes 🔲	ependent child	ities of a spouse or dependent child committee on Ethics.	transactions, or liabilitist consulted with the Co	arned" income, ss you have firs	r assets, "une ver "yes" unles	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or obecause they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics	IPTION — Have you excl se they meet all three tea
N _O	Yes 🔲	ot be	epted trusts" need n	and certain other "excu spouse, or a dependent	nittee on Ethics ling you, your s	by the Comn a trust benefit	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 a dependent child?	TS —Details regarding "C sed. Have you excluded f
S	QUESTION	EACH OF THESE QUESTIONS	SWER EACH (– AN:	T INFORM	OR TRUS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	USION OF SPO
	esponse.	each "Yes" re	ule attached for each "Yes" response		and the ap	answered	Each question in this part must be answered and the appropriate sched	Each quest
No No	Yes	\$5,000 from	pensation of more than <u>νο</u> prior years? ttach Schedule VI.	VI. Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, complete and attach Schedule VI.	S	Yes 🗸	III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule III.	you, your spouse, or a depubility (more than \$10,000) dccomplete and attach Sche
× ×	Yes 🔲	rrangement	oortable agreement or ar	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	No No	Yes 🔽	II. 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 more than \$1,000 at the end of the period? If yes, complete and attach Schedule II.	II. Did you, your spouse, or a dependent of income of more than \$200 in the reporting reportable asset worth more than \$1,000 at 1995, complete and attach Schedule II.
Š	K K	before the date or <u>two</u> years?	artable positions on or landar year or in the privach Schedule IV.	IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years? If yes, complete and attach Schedule IV.	<u>8</u>	Yes 🗹	 Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? fyes, complete and attach Schedule I. 	 Did you or your spouse have "earned" i fees) of \$200 or more from any source in if yes, complete and attach Schedule I.
				ANSWER EACH OF THESE QUESTIONS	OF THESI	R EACH	1 6	In all sections, please type or print clearly in blu PRELIMINARY INFORMATION
		more than 30 days late)ffice:	er or Employing Office:	employee
assessed who files		A <i>\$200 penalty</i> shall be against any individual	Check if Amendment	6 400 8012	Date of Election:	1+5	Candidate for the State: Utche House of Representatives District: 13	
0	PH 1:30	2012 SEP 12 PM 1: 30 OFFICE OF THE CLUTK IS. HOUSE OF REPRESENTATIVES (Office Use Only)		Daytime Telephone:	Daytime		M. M'Aleer	Name: Donna M
Page 1 of	SEP 0 4 2012	SEP 0 4 2012	∄ B and new employees	FORM For use by candidates ar	7	Sevents	REPRES	UNITED STATES HOUSE OF FINANCIAL DISCLOSURE S Period covered: January 1, 2011

SCHEDULE I — EARNED INCOME (INCLUDING HONORARIA)

Name DANG M M'AleeR Page 9

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. 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

					West Birthy		Booz Allen Hamilton, Herndon, VA			State of Utah, Salt Lake City, UT	Harris County, Texas Public Schools	XYZ Trade Association, Chicago, IL (Rec'd December 2)	- 1	XYZ Corporation, Houston, TX	Course (include date of receipt for noncolaria)	Califoo (include data of receipt for homograpia)
				ر	Consulting Fee	Book Royalties	Consulting Fee	Consulting Fee	Salary	Spouse Salary	Spouse Salary	Honorarium	Director's Fee	Salary	1 700	
					A	\$839.93			\$4370	\$53,702	NA	0	\$400	\$6,300	Current Year to Filing	Amount
					\$ 3798, 73	\$2930.45	\$5593,87	\$11,038.95	\$ 5,020,37	\$ 108,845	N _A	\$1,000	\$3,200	\$28,450	Preceding Year	unt

	_						_				
Vanguard IRA Vanguard 403(b)7	Kickstart Seed Fund	Fidelity	T. Rowe Price	Janguard	JT 1st Bank of Paducah, KY accounts	Examples:	SP, SP 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 personal checking or savings 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 II 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.	account and its value at the end of the reporting period. 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 "unearned" 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
		<u> </u>	T	<u> </u>	×	Indefinite	×	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 - \$5,000,000 \$25,000,001 - \$50,000,000 Over \$50,000,000		A B C D E F G H I J K L	Value of Asset 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. If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."
< <	<u> </u>	<u> </u>	<	<	×	Royalties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income or F	Farm 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 "Tax-Deferred" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.
< < <				**************************************		×	×	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 None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$2,501 - \$5,000 \$2,501 - \$5,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$1,001 - \$1,000 \$1,001 - \$5,000 \$1,001 - \$1,000 \$1,001 - \$1,000 \$1,001 - \$5,000 \$50,001 - \$1,000,000 \$1,000,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000		Current Year Preceding Year	Amount of Income 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. Check "None" if no income was earned or generated.

SCHEDULE II — ASSETS AND "UNEARNED" INCOME

Donna M McAleeR Page 2 of 2

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linua																_	
BLOCK A	Asset and/or Income Source			Utah Redirement System													
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	್ ಹ		Other Type of Income														
╽▃		*	(Specify: e.g., Partnership Incom or Farm Income)														
			or raim income)				'										
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SCHEDULE III — LIABILITIES

Name DONNO M. McAlcer Page Lot-

ture, 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 sibowed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furni-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 ling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000.

					SP, DC, JT
			Chase Bank Columbus Of Jul 1999 Mortgage on 7628 Buckl	Example: First Bank of Wilmington, DE	Creditor
			1301 1999	May 1998	Date Liability Incurred mo/year
		ParkCity, UT	Mortgage on 7628 Buckboard	Mortgage on 123 Main Street, Dover, DE	Type of Liability
					\$10,001 \$15,000
					\$15,001— \$50,000
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			_		\$25,000,000 -
					\$50,000,000 Over
				L	\$50,000,000

SCHEDULE IV — POSITIONS

cer, director, trustee, partner, proprietor, representative, employee, or consultant of any corporation, company, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an offi-

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization);

Position Position Advisor Advisor
Adulson

SCHEDULE V — AGREEMENTS

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SCHEDULE VI — COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the *two* prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. Government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule I.

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
N/A	
•	

GPO: 2012 72-584 (mac)