

UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

Form A
For use by Members, officers, and employees

Page 1 of 10

Name: **DAVID SCHWEIKERT**

Daytime Telephone: **202-225-2190**

**HAND
DELIVERED**

LEGISLATIVE RESOURCE CENTER
2019 SEP -4 PM 12:05
U.S. HOUSE OF REPRESENTATIVES
(Office of the Clerk)

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

File Status <input checked="" type="checkbox"/> Member of the U.S. House of Representatives <input type="checkbox"/> Officer or Employee <input type="checkbox"/> Termination	State: <u>AZ</u> District: <u>6</u> Employment Office: _____ Termination Date: _____
Report Type <input type="checkbox"/> Annual (May 16, 2011) <input checked="" type="checkbox"/> Amendment	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II. 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? If yes, complete and attach Schedule II.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
III. 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 III.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
V. 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 V.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

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?	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 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"/>

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.

[illegible]

SCHEDULE III—ASSETS AND “UNEARNED” INCOME

Name DAVID SCHWEIKERT

Page 4 of 9

BLOCK A			BLOCK B													BLOCK C							BLOCK D												BLOCK E				
Asset and/or Income Source			Value of Asset													Type of Income							Amount of Income												Transaction				
<p>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 source of income which generated more than \$200 in "unearned" income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use 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 rental or other real property held for investment, provide a complete address or a 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); 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.</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 is jointly held with your spouse (JT), in the optional column on the far left.</p> <p>For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.</p>			<p>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.</p> <p>If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."</p> <p>* This column is for assets held solely by your spouse or dependent child.</p>													<p>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.</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. Check "None" if no income was earned or generated.</p> <p>* This column is for income generated by assets held solely by your spouse or dependent child.</p>												<p>Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>				
SP, DC, JT	SP	Examples:	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	S (partial)			
		Mega Corp. Stock						X									X																						
		Simon & Schuster																X					Royalties																
	JT	1st Bank of Paducah, KY Accounts																	X																				
		SHERIDAN EQUITIES HOLDINGS LLC - FOUNTAIN HILLS, AZ									X												BUSINESS																
		SHERIDAN EQUITIES LLC - FOUNTAIN HILLS, AZ																					BUSINESS																
		64TH DR PROPERTY - PHOENIX AZ																																					
		LAMAR PROPERTY - GLENDALE AZ																																					
		WILLETTA PROPERTY - PHOENIX AZ																																					

SCHEDULE III—ASSETS AND “UNEARNED” INCOME

Continuation Sheet (if needed)

Name DAVID SCHWEIKERT

Page 5 of 9

BLOCK A Asset and/or Income Source		BLOCK B Year-End Value of Asset													BLOCK C Type of Income								BLOCK D Amount of Income												BLOCK E Transaction	
SP, DC, JT		A None	B \$1 – \$1,000	C \$1,001 – \$15,000	D \$15,001 – \$50,000	E \$50,001 – \$100,000	F \$100,001 – \$250,000	G \$250,001 – \$500,000	H \$500,001 – \$1,000,000	I \$1,000,001 – \$5,000,000	J \$5,000,001 – \$25,000,000	K \$25,000,001 – \$50,000,000	L Over \$50,000,000	M Spouse/DC Asset over \$1,000,000*	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	TAX-DEFERRED	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	I None	II \$1 – \$200	III \$201 – \$1,000	IV \$1,001 – \$2,500	V \$2,501 – \$5,000	VI \$5,001 – \$15,000	VII \$15,001 – \$50,000	VIII \$50,001 – \$100,000	IX \$100,001 – \$1,000,000	X \$1,000,001 – \$5,000,000	XI Over \$5,000,000	XII Spouse/DC Income over \$1,000,000*	P, S, E	
SP	PUTNAM IRA																																			
	PUT VT VOYAGER			X																	X															
	PUT VT GRWTH & INCM			X																	X															
SP	INSURANCE - VARIABLE LIFE																																			
	INV VIP GROWTH			X											X																					
	ADVANTUS BOND			X											X																					
	ADVANTUS MTG SEC			X											X																					
	ADVANTUS IDX 500 C2			X											X																					
SP	SESC - 401(K)																																			
	BlackRock Small Cap Growth II Inv A (MBSWX)			X																	X															
	BlackRock Global Allocation Inv A (MBLOX)			X																	X															
	BlackRock International Inv A (MBILX)			X																	X															
	BlackRock Adv Lrg Cap Val Inv B (MBLVX)			X																	X															
	BlackRock US Govt Bond Inv (BGIDX)			X																	X															
	AZ STATE RETIREMENT - EORP - NO SET VALUE - PENSION PLAN																			X	PENSION															
	457 PLAN - AZ RETIREMENT																																			
	BARON GR FUND (BGRFX)			X																	X															
	LOOMIS SAYLES VALUE(LSGIX)			X																	X															
SP	RENTAL- 11011 N 92ND ST, SCOTTSDALE, AZ					X									X								X													

Page 6 of 9

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.

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.

This page may be copied if more space is required.

SCHEDULE V— LIABILITIES

Name DAVID SCHWEIKERT

Page 7 of 9

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. **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 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 close of the preceding calendar year exceeded \$10,000. *This column is for liabilities held solely by your spouse or dependent child.

SP, DC, JT	Creditor	Date Liability Incurred Mo/Year	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 Spouse/DC Liability Over \$1,000,000*
	<i>Example:</i> First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main St., Dover, DE				X							
	SALLIE MAE	8/2003	STUDENT LOAN			X								
SP	CHASE BANK	4/2005	MORTGAGE - 11011 N 92ND STREET, SCOTTSDALE, AZ				X							
	METRO PHOENIX BANK	8/2010	NOTE - SHERIDAN EQUITIES LLC - Rental Properties used as collateral			X								
	ING (Capital One)	6/2007	MORTGAGE - Residence					X						
	Chase Bank - SH	12/31/10	REVOLVING CHARGE ACCOUNT	X										

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
<i>Example:</i> Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	\$375

SCHEDULE VII—POSITIONS

Name DAVID SCHWEIKERT

Page 9 of 9

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 other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

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.

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

SCHEDULE IX—AGREEMENTS

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
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

Page _____ of _____

Use additional sheets if more space is required.