UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2009 FINANCIAL DISCLOSURE STATE	EMENT	Form A For use by Members, officers, and employees	Page 1 of LEGISLATIVE RESOURCE CENTER 2010 MAY 17 PM 2: 44
Name: Artur G. Davis	Daytime	Telephone: 202-225-2665	HAND DELIVERED
Filer Status X Member of the U.S. State: AI. House of Representatives District: Report Type X Annual (May 17, 2010) Amendment	Officer Employ		A \$200 penalty shall be assessed against anyone who files more than 30 days late.
RELIMINARY INFORMATION — ANSWER EACH	OF THE	SE 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? Yes X	No 🗌	VI. Did you, your spouse, or a dependent child reportable gift in the reporting period (i.e., agg than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI.	
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.	No X	VII. Did you, your spouse, or a dependent child reportable travel or reimbursements for travel period (worth more than \$335 from one source if yes, complete and attach Schedule VII.	in the reporting
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.	No 🔲	VIII. Did you hold any reportable positions on of filing in the current calendar year? If yes, complete and attach Schedule VIII.	or before the date Yes No No
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.	No X	IX. Did you have any reportable agreement or with an outside entity? If yes, complete and attach Schedule IX.	arrangement Yes No 🔀
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes If yes, complete and attach Schedule V.	No 🔲	Each question in this part appropriate schedule attache	
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUS	ST INFO	RMATION - ANSWER EACH C	OF THESE QUESTIONS
TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committe be disclosed. Have you excluded from this report details of such a trust benefit			d trusts" need not Yes No 🖂
EXEMPTION —Have you excluded from this report any other assets, "unearned they meet all three tests for exemption? Do not answer "yes" unless you have			

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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. Source **Amount** Type Approved Teaching Fee \$6,000 Keene State Legislative Pension \$9,000 State of Maryland Examples: Spouse Speech \$1,000 Civil War Roundtable (Oct. 2nd) Spouse Salary Ontario County Board of Education NA Spouse's salary NΑ Alabama Forestry Commission

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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 Standards of Official Conduct. A green envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
	Association of American Associations, Washington, DC	Speech	Feb. 2, 2009 Aug. 13, 2009	\$2,000
Examples:	XYZ Magazine	Article	Aug. 13, 2009	\$500
	None this reporting period		_1	
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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name Artur G. Davis

BLOCK A	T					LOC											3LO								OCK						BLOCK E Transaction
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 asset or sources of income which generated more than \$200 in "unearned" income during the year. For rental property or land, provide a complete address. Provide full 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),	re m pl lf ye ge	portetho ease an a	ate ting od o e sp asse and rateo	valu yea othe ecif et wa	ar. I er th fy th as so incl	of a f you nan ne m old d lude	asso fair fair etho duri	et a use ma od a od a only	at of a variation at the control of	valu et v d. repo	uatio value ortin use	e, l eg l ng l it	ret no inv all inc inc inc Di ve	t a test oth dica tica ste	<all allow="" d,="" ends="" ment="" ner="" sh<="" td="" te="" th="" the=""><td>col plai yo its, y asse e ty app app s and houl</td><td>dumr ns courts in pe corop dint d be if a</td><td>ns to race of color of the colo</td><td>that apply. For accounts that do shoose specific write "NA." For uding all IRAs, come by checke box below. est, even if reinsted as income. It did not genergicalendar year.</td><td>no me Fo inc ch Di Ve</td><td>ents, ents, or all dicat lecki ivide</td><td>tirent ow you othe te ting ends d, si</td><td>you u mathe the the an hou one"</td><td>planto co ay v sset cate app d in</td><td>ns o write s, <i>ir</i> egor prop ntere</td><td>or ac ose s ose s nclu ry c oriate est, iste</td><td>spec A" for Iding of in e be eve d as</td><td>me ints the cific in income on its income on</td><td>investicom I IRA me li belo if rei Icom</td><td>st- ne. 1s, by w. in- ne.</td><td>Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</td></all>	col plai yo its, y asse e ty app app s and houl	dumr ns courts in pe corop dint d be if a	ns to race of color of the colo	that apply. For accounts that do shoose specific write "NA." For uding all IRAs, come by checke box below. est, even if reinsted as income. It did not genergicalendar year.	no me Fo inc ch Di Ve	ents, ents, or all dicat lecki ivide	tirent ow you othe te ting ends d, si	you u mathe the the an hou one"	planto co ay v sset cate app d in	ns o write s, <i>ir</i> egor prop ntere	or ac ose s ose s nclu ry c oriate est, iste	spec A" for Iding of in e be eve d as	me ints the cific in income on its income on	investicom I IRA me li belo if rei Icom	st- ne. 1s, by w. in- ne.	Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
provide the value and income information on each asset in the account that exceeds the reporting threshold. For retirement plans that are not self-directed, name the institution holding the account and its value at the end of the reporting period. For an active business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. For additional information, see the instruction booklet. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by you or your spouse's child, parent, or sibling; any deposits totalling \$5,000 or less in personal savings accounts; and any financial interest in or income derived from U.S. Government retirement programs. 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 (JT), in the optional column on the far left.	Α	\$1 - \$1,000	ΙŌΙ	\$15,001 - \$50,000	100	- \$250,000	-\$500,000	\$500,001 - \$1,000,000	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	Other Type of Income (Specify: For Example, Partnership income or Farm Income)	None	\$1 - \$200	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	-\$50,000	1 1	-\$1,000,000	1 \$5,000,000	0,000	
SP, SP Mega Corp. Stock DC. Examples: Simon & Schuster	1	inc	defin	ite	X	X								X	X		X		Royalties				X		X			X			S (partial)
Ist Bank of Paducah, KY Accounts Retirement System of Alabama IRA Capital Income Builder	 	X			-	<u>^</u>								x					NA												NA
(Mutal Fund) Ivy FDS Inc.(Mutal SP Fund)	 	X												X	1 -																

SCHEDULE V— LIABILITIES	S	CHED	ULE	V	LIABIL	ITIES
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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. **Exclude**: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest; 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.

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on.		}	В	С	D	E	F	G	Н	l	J	K
SP, DC, JT	Creditor	Type of Liability	\$10,001- \$15,000	\$15,001- \$50,000	\$50,001-	\$100,001-	\$250,001- \$500,000	\$500,001- \$1,000,000	\$1,000,001- \$5,000,000	\$5,000,001- \$25,000,000	\$25,000,001 \$50,000,000	Over \$50,000,000
J	Example: First Bank of Wilminoton, Delaware	Mortgage on 123 Main St., Dover, Det.				х						
	Alabama Commission on Higher Education	Student Loan		х								}
	Servis First Bank	Co-signor on parent's loan	х									
SP	Sallie Mae	Student Loan		Х								
SP	Servis First Bank	Personal Loan	x		<u> </u>							

SCHEDULE VI - GIFTS

Report the source, a brief description, and the value of all gifts totalling more than \$335 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 \$134 or less need not be added towards the \$335 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 Standards)	\$345
NA		
		

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SCHEDULE IV— TRANSACTIONS

or depend	ient child duri	ale, or exchange transactions by you, your spouse, ng the reporting period of any security or real prop- t that exceeded \$1,000. Include transactions that		Type ansa			Date			Am	oun	t of	Tran	sact	ion		
resulted in action. Ex dren, or the ates renta cate (i.e., Capital Gof \$200, cl	n a capital loss clude transache purchase of income. If o "partial sale ains — if a sheck the "capi	Provide a brief description of any exchange trans- tions between you, your spouse or dependent chil- ir sale of your personal residence, unless it gener- nly a portion of an asset is sold, please so indi- "). See example below. ales transaction resulted in a capital gain in excess tal gains" box and disclose this income on Schedule	PICHASE	SALE	EXCHANGE	Check Box if Capital Gain Exceeded \$200	(MO/DAY/YR) or Quarterly, Monthly, or Bì-weekly, if applicable	\$1,001- \$15,000 u	\$15,001- \$50,000	\$50,001- \$100,000	\$100,001- \$250,000 m	\$250,001- \$500,000	\$500,001- \$1,000,000	\$1,000,001- \$5,000,000	\$5,000,001- \$25,000,000	\$25,000,001- \$50,000,000	Over \$50,000,000
SP, DC, JT		Asset	<u> </u>					L									
SP	Example:	Mega Coporation Common Stock (partial sale)		<u> </u>			10–12–09		X		<u> </u>		}	<u> </u>			
		NA															
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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 \$335 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 federal, 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.

	Source	Date(s)	City of Departure—Destination— City of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Number of days <u>not</u> at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	DCChicagoDC	2	N	N	None
Examples.	Roycroft Corporation	Aug. 6-11	DC-Los Angeles-Cleveland	Y	Υ	Y	2 Days
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HEDULE VIII—	PINCITIONS

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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 other business enterprise, any non profit 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
Board of Advisors	Alabama Center for Law and Civic Education
Board of Directors	Alabama Department Archives and History

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; continuing participation in an employee welfare or benefit plan maintained by a former employer; or publication of a book.

Parties To	Terms of Agreement
NA	