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 WISCONSIN GOVERNMENT ACCOUNTABILITY BOARD

Mail or fax or email to: WI Government Accountability Board, P.O. Box 7884, Madison, WI 53707-7884, Fax: (608) 264-9319; Email: gaberthics@wi.gov
Statement of Economic Interests
 Filed in 2016 for calendar year 2015

Name: Heaton, David L.
(last name, first name & initial)

State position: Wisconsin Legislature, Assembly District 85
(held or sought) (include agency, division, branch or district, if applicable)

FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS SEE THE INSTRUCTIONS OR VISIT OUR WEBSITE AT <http://wis.gov/ei>
 Still have questions? For priority service send an e-mail to: GAB@wisconsin.gov; otherwise call (608) 261-2026.
****Attach additional pages as needed/Please See Instructions.****

Part A **As of December 31, 2015**

1. INVESTMENTS.

a) **Funds Available in Wisconsin Deferred Compensation Program.** These funds are available to participants in the Wisconsin Deferred Compensation program and many of them are also available for direct purchase, independent of that program. If you held an investment of \$5,000 or more in any of these funds - either directly or through the program - please check the appropriate box.

Profile Series	\$5,000 to \$25,000		\$25,000 to \$50,000		\$50,000 to \$100,000		More than \$100,000	
	Stock	Bond	Stock	Bond	Stock	Bond	Stock	Bond
Vanguard Retirement 2055 Fund			Small Cap BlackRock Russell 2000 Index - Y				Bond BlackRock US Debt Index Fund	
Vanguard Retirement 2045 Fund								
Vanguard Retirement 2035 Fund			OFA US Micro Cap				Federated US Government Securities 2-5 Yr.	
Vanguard Retirement 2025 Fund			Mid Cap BlackRock Mid Cap Equity Index - F				Vanguard Long-Term Investment Grade Adm	
Vanguard Retirement 2015 Fund			T. Rowe Price Mid Cap Growth				Money Market Vanguard Admiral Treasury Money Market	
Vanguard Target Retirement Income Fund			Large Cap Calvert Social Investment Equity I				Fixed Stable Value Fund	
International American Funds EuroPacific			Fidelity Contrafund				FDIC Bank Option	
BlackRock EAFE Equity Index - Y			Vanguard Institutional Index Fund Plus				Brokerage Schwab S&P 500 Money Market	
			Vanguard Wellington Fund - Admiral				Schwab S&P 500 Securities	

b) **Other Investments.** List stocks, bonds, limited partnerships, Wisconsin governmental securities, and mutual and money market funds in which you and your family's interest was valued at \$5,000 or more.

Name of security	Type of security - <input type="checkbox"/> one					Amount - <input type="checkbox"/> one	
	Stock/option/futures	Bond	Limited partnership	Wisconsin governmental security	Mutual or money market fund	\$5,000 to \$99,999	More than \$100,000

-A

2. BUSINESS ACTIVITIES. List businesses, farms, rental, commercial, and income-producing real estate; and business activities in which you or your family had at least a 10% or greater interest.

a) Enterprise(s) operating under a business or trade name, list here.

Name of business	Municipality or Town	County	State	Describe nature of business

b) Enterprise(s) NOT operating under a business or trade name, list here.

Street address or fire number	Municipality or Town	County	State	Describe nature of business

3. COMMERCIAL CUSTOMERS, CLIENTS, AND TENANTS. For each unincorporated business, subchapter S corporation, service corporation (SC), limited liability company (LLC), partnership, or income-producing real estate reported in Item 2 from which the filer or a member of the filer's immediate family received \$10,000 or more in 2015, list businesses, organizations, and lobbyists that paid the enterprise \$10,000 or more in calendar year 2015.

Check if the organization authorized you to represent it in its dealings with others as an attorney-at-law, agent, spokesperson, or representative.

Businesses, organizations, lobbyists that were customers, clients, or tenants	City	State	

4. BUSINESS PARTNERS. For each enterprise reported under Item 2, list its co-owners, partners, officers, and directors (other than yourself), unless the information is already registered with the Wisconsin Department of Financial Institutions.

Business	Partners, or officers and directors	City	State

5. NON-COMMERCIAL REAL ESTATE. List the specific location of WISCONSIN REAL ESTATE in which you or your family had an interest (except your principal residence and real estate whose location you already listed in Item 2).

Street address or fire number	LOCATION OF PROPERTY		NATURE OF INTEREST (own, lease, option, easement, land contract)
	Municipality or Town	County	

6. OFFICERS AND DIRECTORS. List organizations of which you or a family member was an officer or director (unless already listed in Item #2.)

Business or organization	City	State	Position

7. **AGENT, REPRESENTATIVE OR SPOKESPERSON.** List each organization that authorized you or a family member to represent it in its dealings with others as an attorney-at-law, agent, spokesperson, or representative (unless already listed in item 2, 3, or 6.)

Business or organization	City	State
Nationwide Mutual Ins. Co.	Wausau	WI

8. **CREDITORS.** List creditors to which you or your family owed \$5,000 or more.

Creditor	City	State	Amount	
			\$50,000 or less	More than \$50,000
Advantage Community Bank	Wausau	WI		✓
American Education Services	Harrisberg	PA		✓
CHASE	Wilmington	DE	✓	
Bank of America	Simi Valley	CA	✓	

Part B For calendar year 2015

9. **EMPLOYERS.** List your and your family's EMPLOYERS (\$1,000 or more of income) in 2015.

Name of employer (If State of Wisconsin, identify agency or institution)	City	State	Nature of employer's business
Wisconsin Legislature	Madison	WI	State Government

10. **ADDITIONAL SOURCES OF INCOME.** List other sources from which you or your family received income of \$1,000 or more in 2015.

Source of income	City	State
Independent Consulting Services to Nationwide Insurance	Wausau	WI


11. **ENTERTAINMENT AND GIFTS.** List individuals and organizations that provided you with entertainment or gifts (more than \$50) in 2015.

Name of provider	City	State
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12. **HONORARIA AND EXPENSES.** List, for 2015, sources of honoraria and payment of expenses related to your state government duties (more than \$50) not previously reported to the Government Accountability Board.

Payer	Approximate value of expenses	Amount of honorarium	Circumstances of receipt
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I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete, and correct to the best of my knowledge, information, and belief.
If any part has been left blank, I have done so intentionally because there is nothing to report.

Signature of person filing:  Date: 4/29/16
 Daytime phone number: (715) 432-8586
 Email Address: dave.heaton@legis.wisconsin.gov
 heatonforassembly@gmail.com

The information sought in this form is required by §§19.43 and 19.44, Wisconsin Statutes. Failure to file a completed form by the statutory deadline may result in a forfeiture of up to \$500. Statements of Economic Interests are open for public inspection. The Government Accountability Board will notify you of the identity of any person who examines your Statement. In accordance with §19.04(1)(m), Wisconsin Statutes, the Government Accountability Board states that no personally identifiable information is likely to be used for purposes other than those for which it is collected.

