

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT

FORM A
 For use by Members, officers, and employees

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 MAY 15 PM 1:41

OFFICE OF THE CLERK
 U.S. HOUSE OF REPRESENTATIVES

Roscoe Gardner Bartlett
 (Full Name)

202-225-2721
 (Daytime Telephone)

HAND DELIVERED
 (Office Use Only)

MG

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: MD District: 06	<input type="checkbox"/> Officer Or Employee	Employing Office:
Report Type	<input checked="" type="checkbox"/> Annual (May 15)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Termination Date:

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

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 \$350 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 \$350 from one source)? If yes, complete and attach Schedule VII.	Yes <input type="checkbox"/> No <input checked="" 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 type="checkbox"/> No <input checked="" 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 type="checkbox"/> No <input checked="" type="checkbox"/>
IV. Did you, your spouse, or 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 type="checkbox"/> No <input checked="" type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input type="checkbox"/> No <input checked="" 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 type="checkbox"/> No <input checked="" 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"/>
Exemptions-- 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"/>

SCHEDULE I - EARNED INCOME

Name Roscoe Gardner Bartlett

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

Source	Type	Amount
Johns Hopkins University Applied Physics Lab retirement	Pension	\$855
MD State Retirement System	Pension	\$19,126

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Roscoe Gardner Bartlett

BLOCK A 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 account and its value at the end of the reporting period. For rental or other real property held for investment, provide a complete address. 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. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); new homes (unless the seller is a personal shareholder as	BLOCK B Year-End 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 and is included only because it is generated income, the value should be "None."	BLOCK C Type of 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 "None" 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.	BLOCK D Amount of Income 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 "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.	BLOCK E Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
1115 Providence Court Frederick, MD	\$50,001 - \$100,000	None	NONE	
112 Spruce Knob Lake Forrest Service Rd Pocahontas County, WV	\$100,001 - \$250,000	None	NONE	
122 Silopanna Annapolis, MD	\$250,001 - \$500,000	None	NONE	
2 lots located near 228 Knoxville RD, Knoxville, MD Street address not yet assigned	\$50,001 - \$100,000	None	NONE	
256 Knoxville Rd Knoxville, MD	\$100,001 - \$250,000	RENT	\$5,001 - \$15,000	
3517 Mountain RD S Knoxville, MD	\$100,001 - \$250,000	RENT	\$15,001 - \$50,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

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3518 Mountain RD S Knoxville, MD	\$100,001 - \$250,000	RENT	\$15,001 - \$50,000	
4219 Lime Kiln RD Frederick, MD	\$100,001 - \$250,000	RENT	\$15,001 - \$50,000	
4317 Buckeystown Pike Frederick, MD	\$1,000,001 - \$5,000,000	RENT	\$50,001 - \$100,000	
HVY 438 SW 3207 Pleasantville, TN	\$100,001 - \$250,000	RENT	\$1,001 - \$2,500	
lot located at 256 Knoxville Rd Knoxville, MD	\$15,001 - \$50,000	None	NONE	
lot located near 10401 A Liberty RD Mt Pleasant, MD Street address not yet known	\$15,001 - \$50,000	None	NONE	
Precious Metals	\$250,001 - \$500,000	None	NONE	
Putnam Bonds	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
Stock-Medical Dynamics, Inc.	\$1,001 - \$15,000	None	NONE	
Wilmer Mt Rd Franklin, WV	\$50,001 - \$100,000	None	NONE	

SCHEDULE IX - AGREEMENTS

Name Roscoe Gardner Bartlett

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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
June 1975	Myself and Johns Hopkins University Applied Physics Lab Retirement	continued participation in pension plan
May 1987	Myself and MD State Retirement System	continued participation in pension plan