

		T POICE ATME DECOMPAGE SENTERS A
UNITED STATES HOUSE OF REPRESENTATIVES For New Membe	FORM B For New Members, Candidates, and New Employees	2015 APR 13 PM 12: 39
Name: Boyce E. Adams Daytime Telephone:	hone: (662) 570-4360	U.S. HOUSE OF REPRESENTATIVES
New Member of or Candidate for State: Mississippi U.S. House of Representatives District: 01 Candidates - Date of Election:	Check if Amendment	(Office Use Only)
New Officer or Employee Employing Office:	Period Covered: January 1, 2014 to March 31, 2015	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	STIONS	
A. Did you, your spouse, or your dependent child: a. Own arry reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Make more than \$200 in unearmed income from any reportable asset during the reporting period?	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	ng the reporting period Yes X No
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes X No reporting period?	F. Do you have any reportable agreements of an outside entity?	rents or arrangements with Yes No X
D. Did you, your spouse, or your dependent child have any reportable Yes X No liability (more than \$10,000) at any point during the reporting period?	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	nn \$5,000 from a single Yes No X
ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	CHEDULE IF YOU ANSWER "YES"	S" COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF T		HESE QUESTIONS
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclose this report details of such a trust that benefits you, your spouse, or dependent child?	ther "excepted trusts" need not be disclosed. H	sed. Have you excluded from Yes No X
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.		because they meet all three Yes No X

SCHEDULE A

	\ - ASSETS & "UNEARNED INCOME"
Name: Boyce E. Adams	
Page 2 of 6	•

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Boyce E. Adams

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Boyce E. Adams

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SCHEDULE C - EARNED INCOME

Boyce E. Adams Page 5 of	Name:	
Page 5 of	Boyce E. Adams	
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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 reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse canned 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.

INCOME LIMITS and PROHIBITED INCOME: The 2013 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. It is unchanged in 2014. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.	mbers and employees compensa fessional services involving a fidu	ted at or above the "senior staff" raciary relationship) are totally prohibit	ite was \$26,955. It is unchanged in led for Members and senior staff.
Division final Laboratory for the Comment of the Co	g i	Am	Amount
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	Honorarium	\$0 80	\$600
EXBITIDITIES: Chaf War Roundstate, Retinant, VA (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	\$0 N/A	\$1,000 NAA
BankTel Systems, LLC - Vice President, Sales & Marketing	Salary	\$34,830.83	\$100,000.00
BankTel Systems, LLC	Bonus	\$129,497.79	\$165,000.00

SCHEDULE 0 - LIABILITIES

Boyce E. Adams Page 6 of 6

Name:

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New 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 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 you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. "Column K is for liabilities held solely by your spouse or dependent child.

								Þ	nount	Amount of Liability	챙				
			}		>	69	C	Ð	m	71	ရ	I		٠	*
ठ ५ ५		Creditor	Date Liability Incurred WOYR	Type of Liability	\$10,001- \$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- \$25,000,000	\$25,000,001- \$50,000,000	Over \$50,000,000	Over \$1,000,000* (Spouse/DC Liability)
	Exemple	First Bank of Wilmington, DE	5/98	Mortgage on Rentel Property, Dover, D€				×							
	White Ho	White House Federal Credit Union	4/2013	Mortgage: Rental Property, Madison, MS				×		· · · · · · · · · · · · · · · · · · ·					
	Prosperity Bank	/ Bank	11/2010	Aircraft Loan: Alpha Golf Aviation, LLC				X							
	Citizens N	Citizens National Bank	3/2015	Personal Loan			×								
	Regions Bank	ank	10/2014	Mortgage: Personal Residence, West Point, MS				×							
						<u> </u>			_						

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution offer than the United States. Exclude: Positions listed in Schedule C; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

Poskion	Name of Organization
President	BTS-BIZ, LLC
Member	Adams Waverly Ventures, LLC
Director	Lowndes County Community Development Foundation
Director	Children's Project International
Member	Bravo Alpha, LLC
Member	Alpha Golf Aviation, LLC