

UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

FORM A
For use by Members, officers, and employees

Page 1 of 8

HAND DELIVERED

OFFICE RESOURCE CENTER

Bennie G. Thompson

202-225-5876

(Full Name)

(Daytime Telephone)

MAY 17 AM 9:41
(Office Use Only)

Filer Status
☒ Member of the U.S. House of Representatives
State: MS
District: 2nd

☐ Officer Or Employee
Employing Office:

Termination Date:

Report Type
☒ Annual (May 15)
☐ Amendment
☐ Termination

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 \$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 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 Bennie G. Thompson

Page 2 of 8

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
State of Mississippi	Pension	\$8,500
State of Mississippi	Spouse Retirement Plan	N/A
Valic Retirement Services Company	Spouse Annuity	N/A
The Pension Boards - United Church of Christ	Spouse Pension	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Bernie G. Thompson

Page 3 of 8

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 source 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); non-exemptible Section 529 plan income; or income from a personal checking or	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.
SP Congressional Federal Credit Union	\$100,001 - \$250,000	INTEREST	\$5,001 - \$15,000	
SP Congressional Federal Credit Union (See footnote)	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
SP Jackson Federal Credit Union Jackson, MS	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
JT Liberty National Bank accounts New Orleans, LA	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
JT Trustmark Bank accounts Jackson, MS	\$15,001 - \$50,000	INTEREST	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name **Bernie G. Thompson**

Page 4 of 8

		DIVIDENDS		
JT	Regions Financial Corporation - Common Stock Providence, RI	\$1,001 - \$15,000	\$1 - \$200	
SP	Regions Bank Clinton, MS	INTEREST \$50,001 - \$100,000	\$201 - \$1,000	
	BancorpSouth Bank Clinton, MS	INTEREST \$100,001 - \$250,000	\$1,001 - \$2,500	
SP	BancorpSouth Bank Clinton, MS	INTEREST \$15,001 - \$50,000	\$201 - \$1,000	
	Merchants and Planters Bank, Bolton, MS (See footnote)	INTEREST \$1,001 - \$15,000	\$1 - \$200	
SP	Bolivar Cty Chancery Clerk Cleveland, MS (See footnote)	INTEREST \$1 - \$1,000	\$1 - \$200	
JT	Lot 1, L. C. Turner Circle Bolton, MS	None \$1,001 - \$15,000	NONE	
	Dwelling, 212 Sharon Street Bolton, MS	None \$15,001 - \$50,000	NONE	
	1 acre unimproved property, Mt. Olive Road Bolton, MS	None \$1,001 - \$15,000	NONE	
	2 acres unimproved property, Northside Drive, Bolton, MS	None \$1,001 - \$15,000	NONE	
JT	Lot 3, L. C. Turner Circle Bolton, MS	None \$1,001 - \$15,000	NONE	
JT	Lot 540, Cottage Grove Subdivision Jackson, MS	None \$1,001 - \$15,000	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name **Bennie G. Thompson**

Page 5 of 8

JT	Lots 44 and 45 West Capitol Street Jackson, MS (See footnote)	\$15,001 - \$50,000	None	NONE
SP	Lot 31, Less Highway, Block 7 Mound Bayou, MS	\$1,001 - \$15,000	None	NONE
SP	Lot 8, Block 2 Southeast Annex Mound Bayou, MS	\$1,001 - \$15,000	None	NONE
SP	AXA Equitable Annuity Syracuse, NY	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500
JT	BancorSouth Bank Jackson, MS	\$1,001 - \$15,000	INTEREST	\$1 - \$200
SP	AIG Valic Annuity Insurance Houston, TX	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500
SP	Hinds County Board of Supervisors Jackson, MS (See footnote)	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000
	1 acre unimproved property, Old Fairground Road Edwards, MS	\$1,001 - \$15,000	None	NONE

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTSName **Bennie G. Thompson**

Page 6 of 8

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling 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 reimbursed or paid directly 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)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
CBC Institute	Aug. 11-15	Bolton, MS-Tunica, MS- Bolton, MS	Y	Y	Y	None

SCHEDULE VIII - POSITIONS

Name Bennie G. Thompson

Page 7 of 8

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 any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
President	BLB Properties
Trustee Emeritus	Tougaloo College
Board Member	Housing Assistance Council

FOOTNOTES

Name: Bennie G. Thompson

Page 8 of 8

Number	Section / Schedule	Footnote	This note refers to the following item
2	Schedule III	Previously 3231 and 3233 West Capitol Street; buildings removed and lots no longer have address numbers	West Capitol Street Jackson, MS (See footnote)
3	Schedule III	Interest generated from investment at county tax sale; interest computed @1.5% monthly for up to three years or until property redeemed by owner or transferred to buyer	Bolivar City Chancery Cleveland, MS
4	Schedule III	Checking account at local bank	Merchants and Planters Bank, Bolton, MS
5	Schedule VII	Unrelated to official duties as a CBC Institute board member	CBC Institute
6	Schedule III	Amount inadvertently included in Member's account last year	Congressional Federal Credit Union (See footnote)