

UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT

FORM A
For use by Members, officers, and employees

Page 1 of 8

Sanford D. Bishop, Jr.
(Full Name)

(202) 225-3631
(Daytime Telephone)

Filer Status
☒ Member of the U.S. House of Representatives

State: GA
District: 02

☐ Officer Or Employee

Employing Office:

U.S. HOUSE OF REPRESENTATIVES

Report Type

☒ Annual (May 15)

☐ Amendment

☐ Termination

Termination Date:

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

LEGISLATIVE RESOURCE CENTER

2012 MAY 15 AM 10:46
(Office Use Only)

HAND DELIVERED

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 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 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 checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input checked="" type="checkbox"/> No <input 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 checked="" type="checkbox"/> No <input 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 Sanford D. Bishop, Jr.

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
Consolidated Government of Columbus, Georgia	Spouse Salary	N/A
Legislative Retirement System of Georgia	Legislative Pension	\$1,020

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Sanford D. Bishop, Jr.

Page 3 of 8

BLOCK A		BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset and/or Income Source		Year-End Value of Asset	Type of Income	Amount of Income	Transaction
<p>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.</p> <p>Provide complete names of stocks and mutual funds (do not use ticker symbols.)</p> <p>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.</p> <p>For rental or other real property held for investment, provide a complete address.</p> <p>For an ownership interest in a privately-held business that is not publically traded, state the name of the business, the nature of its activities, and its geographic location in Block A.</p> <p>Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any derivative position; SE 8000 or less in a personal collection or</p>		<p>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."</p>	<p>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.</p>	<p>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.</p>	<p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
<p>Congressional Federal Credit Union</p>		\$1 - \$1,000	INTEREST	\$1 - \$200	N/A
<p>House and lot at 908 Illeges Road, Columbus, Georgia</p>		\$50,001 - \$100,000	RENT	\$5,001 - \$15,000	N/A
<p>Legislative Retirement System of Georgia, 2 Northside 75, Atlanta, Georgia 30318 (Not Self-directed</p>		\$1,001 - \$15,000	Legislative Pension	\$1,001 - \$2,500	N/A
<p>Lot 15, City Block 49, Starkville, Ms.</p>		\$1,001 - \$15,000	None	NONE	N/A
<p>Lot 24A, Lakemont Heights, Hartwell, Georgia</p>		\$1,001 - \$15,000	None	NONE	N/A
<p>Lot 3, City Block 51, Starkville, Ms.</p>		None	CAPITAL GAINS	\$15,001 - \$50,000	S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Sanford D. Bishop, Jr.

Page 4 of 8

Merrill Lynch Bank of America Corporation Unclaimed Property Account	None	Inheritance - Value of Account	\$50,001 - \$100,000	S
Sun Trust Bank, NA Columbus, Georgia Certificate	\$50,001 - \$100,000	INTEREST	\$1 - \$200	N/A
Sun Trust Bank, NA Columbus, Georgia Checking	\$1,001 - \$15,000	INTEREST	\$1 - \$200	N/A
Sun Trust Bank, NA Columbus, Georgia Savings	\$1 - \$1,000	INTEREST	\$1 - \$200	N/A
Wachovia Securities (Wells Fargo) Dryden Municipal Bonds	\$15,001 - \$50,000	Dividends/Interest	\$201 - \$1,000	N/A
Wells Fargo (Formerly Merrill Lynch) CMA Account (Black Rock Govt. Fund) Prudential Inv. Port	\$50,001 - \$100,000	Dividends/Interests	\$2,501 - \$5,000	N/A

SCHEDULE IV - TRANSACTIONS

Name Sanford D. Bishop, Jr.

Page 5 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
JT	Lot 3, City Block 51, Starkville, Ms.	S	Yes	11-30-11	\$1,001 - \$15,000
	Merrill Lynch Bank of America Corporation Unclaimed Property Account inherited from Minnie S. Bishop, deceased mother on her death, but only learned of it in 2011 when contacted by KEANE, an unclaimed property firm who for a fee recovered it	S	No	9-26-11	\$50,001 - \$100,000

SCHEDULE V - LIABILITIES

Name Sanford D. Bishop, Jr.

Page 6 of 8

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 all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; 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.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
SP	Household Finance, now HSBC	March 2004	Mortgage on 908 Iliges Road, Columbus, Georgia	\$50,001 - \$100,000
	Greenberg Traurig, LLP, Attorneys at Law	February- December, 2009	Attorney Fees	\$100,001 - \$250,000
	Sun Trust Mortgage, Inc.	June 28, 2005	Mortgage on personal residence in Albany, Georgia	\$50,001 - \$100,000
	Sun Trust Mortgage, Inc.	June 27, 2005	Mortgage on personal residence in Washington, DC	\$100,001 - \$250,000
SP	GMAC	May 10, 2006	Mortgage on personal residence in Columbus, Georgia	\$50,001 - \$100,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Sanford D. Bishop, Jr.

Page 7 of 8

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$350 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
Congressional Black Caucus Institute	August 11- August 14, 2011	Atlanta, Ga.-Tunica, Ms.- Atlanta, Ga.	Y	Y	Y	None

SCHEDULE IX - AGREEMENTS

Name Sanford D. Bishop, Jr.

Page 8 of 8

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
1993	Myself and State of Georgia	continued participation in pension program