	late.		i ermination		☐ Amenament		(May 15)	Туре	_
more than 30 days	mor	Termination Date:		]				Report	ᇛ
be assessed against anyone who files	be a		Employee		District: 02	entatives	House of Representatives	Status	St
A \$200 penalty shall	> \$	Employing Office:	☐ Officer Or		State: MS	.S.	Member of the U.S.	Filer	ŢĮ.
(Office Use Only)	(6	(Daytime Telephone)			ne)	(Full Name)			
2013 MAY 15 PH 3: 20					ompson	Bennie G. Thompson	Benn		
					***************************************				
	ees	For use by Members, officers, and employees		MENT	OSURE STATI	LDISCI	CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT	ENDAR YE	CAL
DELIVERED	of 9	FORM A Page 1 of 9		TATIVE	REPRESEN	OF F	UNITED STATES HOUSE OF REPRESENTATIVES	ITED ST	S
HAND	_							۵	1

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

#### IPO and EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE < Ξ. ≓ If yes, complete and attach Schedule V period? If yes, complete and attach Schedule IV. 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 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? or more from any source in the reporting period? (more than \$10,000) during the reporting period? Did you, your spouse, or a dependent child have any reportable liability reportable asset in a transaction exceeding \$1,000 during the reporting Did you, your spouse, or dependent child purchase, sell, or exchange any If yes, complete and attach Schedule III. more than \$1,000 at the end of the period? If yes, complete and attach Schedule II. If yes, complete and attach Schedule I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 Yes Yes ✓ Yes Yes Yes < < **8** □ Š Š ٥ ĕ < 3 ≤ × **≦** 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 Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 If yes, complete and attach Schedule IX. current calendar year? schedule attached for each "Yes" response. Each question in this part must be answered and the appropriate Did you have any reportable agreement or arrangement with an outside If yes, complete and attach Schedule VIII. Did you hold any reportable positions on or before the date of filing in the If yes, complete and attach Schedule VI. If yes, complete and attach Schedule VII. from one source)? QUESTIONS Ύes Yes Yes Yes < < Ş S 0 ö S 0

PO-

Trusts-

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.

Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be

Yes

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Yes

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Yes

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Did you purchase any shares that were allocated as a part of an Initial Public Offering?

disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

## **SCHEDULE I - EARNED INCOME**

Name Bennie G. Thompson

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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 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.

State of Mississippi Pension \$9,000  State of Mississippi Spouse Retirement Plan N/A  Valic Retirement Services Company Spouse Annuity N/A  The Northern Trust Company, Benefit Payment Services C-58, 50 LaSalle St., Chicago, Illinois 60630 (See Footnotes)	Source	Туре	Amount
Spouse Retirement Plan Spouse Annuity fit Spouse Pension St.,	State of Mississippi	Pension	\$9,000
Spouse Annuity fit Spouse Pension St.,	State of Mississippi	Spouse Retirement Plan	N/A
npany, Benefit Spouse Pension 8, 50 LaSalle St.,	Valic Retirement Services Company	Spouse Annuity	N/A
	The Northern Trust Company, Benefit Payment Services C-58, 50 LaSalle St., Chicago, Illinois 60630 (See Footnotes)	Spouse Pension	N/A

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<u>\_</u> <u>\_</u> SP SP If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the in, or income derived from, a federal retirement program, including the Thrift Savings Plan. For rental or other real property held for investment, provide a complete address or a description, e.g., "rental property," and a city and state. 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 instruction booklet. For a detailed discussion of Schedule III requirements, please refer to the optional column on the far left. (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest Exclude: Your personal residence, Including second homes and vacation homes location in Block A. 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 each asset held in the account that exceeds the reporting thresholds. For all iRAs and other retirement plans (such as 401(k) plans) provide the value for Provide complete names of stocks and mutual funds (do not use ticker symbols.) 'uneamed" income during the year. eportable asset or sources of income which generated more than \$200 in Asset and/or income Source Union Union Congressional Federal Credit Congressional Federal Credit Jackson Federal Credit Union Jackson, MS New Orleans, LA Liberty National Bank accounts Trustmark Bank accounts Jackson, MS Jackson, MS lackson Federal Credit Union **BLOCK A** S \$15,000 \$1,001 -\$15,001 -\$50,000 \$15,001 -\$15,000 \$1,001 -\$15,000 \$1,001 -\$100,000 \$50,001 held solely by your spouse or dependent child. value should be "None." generated income, the included only because it the reporting year and is If an asset was sold during specify the method used. market value, please method other than fair close of reporting year. If \$50,000 you use a valuation Indicate value of asset at Value of Asset This column is for assets Year-End Name Bennie G. Thompsor BLOCK B during the reporting period. column. Dividends, interest, specific investments or that do not allow you to choose the asset generated no income as income. Check "None" if reinvested, must be disclosed and capital gains, even if you may check the "None" (such as 401(k) plans or IRAs) generate tax-deferred income For retirement accounts that Check all columns that apply INTEREST INTEREST NTEREST NTEREST INTEREST INTEREST Type of Income BLOCKC For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. \$1,001 - \$2,500 \$1 - \$200 \$1 - \$200 generated by assets held solely This column is for income or generated. gains, even if reinvested, must be Dividends, interest, and capital the appropriate box below. \$1 - \$200 \$2,501 - \$5,000 by your spouse or dependent "None" If no income was earned disclosed as income. Check category of Income by checking For all other assets, indicate the \$201 - \$1,000 **Amount of Income** BLOCK D exchanges (E) exceeding \$1,000 in reporting year. sales (S), or had purchases (P), Indicate If asset Transaction Page 3 of 9 BLOCK II

SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name	Bennie G. Thompson		Page 4 of 9
JT	Regions Financial Corporation Common Stock Providence, RI	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
g P	Regions Bank Clinton, MS (see footnote 3)	\$15,001 - \$50,000	INTEREST	\$1 - \$200	PS&E
SP	Western National Annuity, American General Life Insurance Co., PO Box 871, Amarillo, TX 79105-0871 (see footnote 4)	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	PS&E
	BancorpSouth Bank Clinton, MS	\$100,001 - \$250,000	INTEREST	\$201 - \$1,000	
SP P	AIG Valic Annuity Insurance Houston, TX	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
SP	BancorpSouth Bank Clinton, MS	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
JT	BancorpSouth Bank Clinton, MS	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	Merchants and Planters Bank Bolton, MS	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
SP	Bolivar County Chancery Clerk Cleveland, MS	\$1 - \$1,000	INTEREST	\$1 - \$200	
SP	AXA Equitable Annuity Syracuse, NY	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500	
	Dwelling, 212 Sharon Street Bolton, MS	\$15,001 - \$50,000	None	NONE	
	1 acre unimproved property Northside Drive Bolton, MS	\$1,001 - \$15,000	None	NONE	. Name

SCHEDULE III - ASSETS AND "UNEARNED" INCOME	
Name Bennie G. Thompson	

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SCHEDOL	SCHEDOLE III - ASSETS AND ONEARNED INCOME	Name Bennie G. Thompson	. Thompson		Page 5 of 9
	1 acre unimproved property Old Fairground Road Edwards, MS	\$1,001 - \$15,000	None	NONE	
	2 acres unimproved property Northside Drive Bolton, MS	\$1,001 - \$15,000	None	NONE	
JT	Lot 1, L. C. Turner Circle Bolton, MS	\$1,001 - \$15,000	None	NONE	
JT	Lot 3, L. C. Turner Circle Bolton, MS	\$1,001 - \$15,000	None	NONE	
JT	Lot 540, Cottage Grove Subdivision Jackson, MS	\$1,001 - \$15,000	None	NONE	
J	Lots 44 and 45 West Capitol Street Jackson, MS	\$15,001 - \$50,000	None	NONE	
SP	Lot 8, Block 2, Southeast Annex Mound Bayou, MS	\$1,001 - \$15,000	None	NONE	
SP	Lot 31, Less Highway, Block 7 Mound Bayou, MS	\$1,001 - \$15,000	None	NONE	
	Prudential stock Providence, RI	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Hinds County Board of Supervisors Jackson, MS	\$1 - \$1,000	INTEREST	\$201 - \$1,000	
SP	12 acres unimproved property, E. Cox Ferry Road Hinds County, MS (see footnotes 2)	\$1,001 - \$15,000	None	NONE	

### **SCHEDULE IV - TRANSACTIONS**

Name Bennie G. Thompson

Page 6 of 9

investment that exceeded \$1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for is sold, please so indicate (i.e., "partial sale"). See example below.

Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III. \* This column is for assets solely held by your spouse or dependent child.

SP,		Type of	Capital Gain in		
JT,	Asset	Transaction	Excess of \$200?	Date	Amount of Transaction
SP	Regions Bank	Ē	N/A	04/27/12	\$15,001 - \$50,000
	Clinton, MS (see footnote 3)	_			
SP	Western Nationa lAnnuity, American General	m	N/A	04/27/12	\$15,001 - \$50,000
	Life Insurance Co., PO Box 871, Amarillo, TX				
	(see footnote 4)				

# SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Bennie G. Thompson Page 7 of 9

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 spouse or dependent child that is totally independent of his or her relationship to you. 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 sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under 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

Source	Date(s)	Point of Departure DestinationPoint of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Pood? Member Included? (Y/N) (Y/N)	Days not at sponsor's expense
CBC Institute	Aug. 7-11 E	Bolton,MS-Tunica, MS- Bolton,MS	Υ	~	<b>Y</b>	None

#### SCHEDULE VIII - POSITIONS

Name Bennie G. Thompson

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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. 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

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

**FOOTNOTES** ယ N 0 Number Schedule III Schedule III Schedule III Schedule I Section / Schedule County, MS Tax Collector's Office Regions Bank served as agent Funds transferred to annuity from CD for higher interest rate; Western National Funds from CD transferred to an annuity for higher interest with Property acquired through Land Tax Sale conducted by Hinds Paying Agent for Pension Boards-The United Church of Christ Name Bennie G. Thompson Footnote agent Annuity Account, Western National Clinton, MS served as Regions Bank Company Ferry Road The Northern Trust 12 acres on E. Cox the following item This note refers to Page 9 of 9