

UNITED STATES SENATE FINANCIAL DISCLOSURE REPORT FOR ANNUAL AND TERMINATION REPORTS

☐ Amendment

Last Name	First Name and Middle Initial	Annual Report	
Wicker	Roger F.	Calendar Year Covered by Report: 2011	Senate Office / Agency in Which Employed Senator Roger Wicker
Senate Office Address (Number, Street, City, State, and ZIP Code)		Termination Report	
555 Dirksen, Washington, DC 20510		Senate Office Telephone Number (Include Area Code) 202-224-6253	Termination Date (mm/dd/yyyy): Prior Office / Agency in Which Employed


AFTER READING THE INSTRUCTIONS - ANSWER EACH OF THESE QUESTIONS AND ATTACH THE RELEVANT PART

	YES	NO		YES	NO
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 PART I.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Did you, your spouse, or dependent child receive any reportable travel or reimbursements for travel in the reporting period (i.e., worth more than \$350 from one source)? If Yes, Complete and Attach PART VI.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Did you or your spouse have earned income (e.g., salaries or fees) or non-investment income of more than \$200 from any reportable source in the reporting period? If Yes, Complete and Attach PART II.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Did you, your spouse, or dependent child have any reportable liability (more than \$10,000) during the reporting period? If Yes, Complete and Attach PART VII.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Did you, your spouse, or dependent child hold any reportable asset worth more than \$1,000 at the end of the period, or receive unearned or investment income of more than \$200 in the reporting period? If Yes, Complete & Attach PART IIIA and/or IIIB.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Did you hold any reportable positions on or before the date of filing in the current calendar year? If Yes, Complete and Attach PART VIII.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than \$1,000 in the reporting period? If Yes, Complete and Attach PART IV.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Do you have any reportable agreement or arrangement with an outside entity? If Yes, Complete and Attach PART IX.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Did you, your spouse, or 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 PART V.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	If this is your FIRST Report: Did you receive compensation of more than \$5,000 from a single source in the <u>two</u> prior years? If Yes, Complete and Attach PART X.	<input type="checkbox"/>	<input type="checkbox"/>

Each question must be answered and the appropriate PART attached for each "YES" response.

File this report and any amendments with the Secretary of the Senate, Office of Public Records, Room 232, Hart Senate Office Building, U.S. Senate, Washington, DC 20510. \$200 Penalty for filing more than 30 days after due date.

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The statement will be made available by the Office of the Secretary of the Senate to any requesting person upon written application and will be reviewed by the Select Committee on Ethics. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions. (See 5 U.S.C. app. 4, § 104, and 18 U.S.C. § 1001.)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5-15-12
For Official Use Only - Do Not Write Below This Line		
It is the Opinion of the reviewer that the statements made in this form are in compliance with Title I of the Ethics in Government Act.	Signature of Reviewing Official	Date (Month, Day, Year)

**FOR OFFICIAL USE ONLY
Do Not Write Below this Line**

SECRETARY OF THE SENATE
 12 MAY 15 PM 3:04

Reporting Individual's Name

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Wicker, Roger F.

PART II. EARNED AND NON-INVESTMENT INCOME

Page Number

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Report the source (name and address), type, and amount of earned income to you from any source aggregating \$200 or more during the reporting period. For your spouse, report the source (name and address) and type of earned income which aggregate \$1,000 or more during the reporting period. No amount needs to be specified for your spouse. (See p.3, CONTENTS OF REPORTS Part B of Instructions.) Do not report income from employment by the U.S. Government for you or your spouse.

Individuals not covered by the Honoraria Ban:

For you and /or your spouse, report honoraria income received which aggregates \$200 or more by exact amount, give the date of, and describe the activity (speech, appearance or article) generating such honoraria payment. Do not include payments in lieu of honoraria reported on Part I.

Name of Income Source		Address (City, State)	Type of Income	Amount
Example:	JP Computers	Wash., DC	Salary	\$15,000
	MCI (Spouse)	Arlington, VA	Salary	Over \$1,000
1	University of Mississippi (spouse)	Tupelo, MS	Salary	Over \$1,000
2				
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13				

Reporting Individual's Name

☐ Amendment

Wicker, Roger F.

PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

Page Number

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BLOCK A**Identity of Publicly Traded Assets
And Unearned Income Sources**

Report the complete name of each publicly traded asset held by you, your spouse, or your dependent child, (See p.3, *CONTENTS OF REPORTS Part B of Instructions*) for production of income or investment which:

- (1) had a value exceeding \$1,000 at the close of the reporting period; and/or
(2) generated over \$200 in "unearned" income during the reporting period.

Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.

BLOCK B**Valuation of Assets**

At the close of reporting period.
If None, or less than \$1,001,
Check the first column.

BLOCK C**Type and Amount of Income****Type of Income****Amount of Income**

<p>your dependent child, (See p.3, CONTENTS OF REPORTS Part B of Instructions) for production of income or investment which:</p> <p>(1) had a value exceeding \$1,000 at the close of the reporting period; and/or</p> <p>(2) generated over \$200 in "unearned" income during the reporting period.</p> <p>Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.</p>			None (or less than \$1,001)												None												Actual Amount Required if "Other" Specified											
			\$1,001 - \$15,000												None												None											
			\$15,001 - \$50,000												Dividends												None											
			\$50,001 - \$100,000												Rent												None											
			\$100,001 - \$250,000												Interest												None											
			\$250,001 - \$500,000												Capital Gains												None											
			\$500,001 - \$1,000,000												Excepted Investment Fund												None											
			Over \$1,000,000***												Excepted Trust												None											
			\$1,000,001 - \$5,000,000												Qualified Blind Trust												None											
			\$5,000,001 - \$25,000,000												Other (Specify Type)												None (or less than \$201)											
			\$25,000,001 - \$50,000,000																								\$201 - \$1,000											
			Over \$50,000,000																								\$1,001 - \$2,500											
																											\$2,501 - \$5,000											
																											\$5,001 - \$15,000											
																											\$15,001 - \$50,000											
																											\$50,001 - \$100,000											
																											\$100,001 - \$1,000,000											
																											Over \$1,000,000***											
																											\$1,000,001 - \$5,000,000											
																											Over \$5,000,000											
Example: S, IBM Corp. (stock)						X																	Example		X									Example				
or J (S) Keystone Fund							X													X			Example	X									Example					
1	S	ABAG Fin Auth (bond)		X																					X													
2	S	FHLMC			X																				X													
3	S	CSX Corp (bond)			X																					X												
4	S	Petrobras Intl (bond)		X																					X													
5	S	General Elec (bond)			X																					X												
6	S	Bunge Limited			X																					X												
7	S	Torchmark Corp			X																					X												
8	S	United States Treasury (bond)		X																					X													
9	S	Protective Life Corp (stock)		X																					X													
10	S	Dreyfus General Money Mkt Class B			X																			X														

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.

*** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

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BLOCK A Identity of Publicly Traded Assets And Unearned Income Sources			BLOCK B Valuation of Assets										BLOCK C Type and Amount of Income																						
Report the complete name of each publicly traded asset held by you, your spouse, or your dependent child, (See p.3, CONTENTS OF REPORTS Part B of Instructions) for production of income or investment which: (1) had a value exceeding \$1,000 at the close of the reporting period; and/or (2) generated over \$200 in "unearned" income during the reporting period. Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.			At the close of reporting period. If None, or less than \$1,001, Check the first column.										Type of Income							Amount of Income															
			None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$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	None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	Over \$5,000,000	Actual Amount Required if "Other" Specified
Example: S, IBM Corp. (stock) DC, (S) Keystone Fund or J						X								X							Example		X										Example		
							X											X				Example	X										Example		
1		Dreyfus General Money Mkt Class B		X										X									X												
2		Putnam Growth & Income IRA, Class A			X									X									X												
3	S	Investment Company of America, Class A		X										X									X												
4	S	GNMA					X										X									X									
5	S	Massey Energy (bond)	X														X						X												
6		Alliance Global Tech Class C (mutual fund)			X									X									X												
7		Amazon.Com (Stock)		X										X																					
8	S	Merck (stock)		X											X								X												
9																																			
10																																			

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.

*** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

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Wicker, Roger F.

PART IIIB. NON-PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

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BLOCK A

Identity of Non-Publicly Traded Assets and Unearned Income Sources

Report the name, address (city, state and description) of each interest held by you, your spouse, or your dependent child (See p.3, CONTENTS OF REPORTS Part B of Instructions) for the production of income or investment in a non-public trade or business which:

- (1) had a value exceeding \$1,000 at the close of the reporting period; and/or
(2) generated over \$200 in "unearned" income during the reporting period.

Include the above report for each underlying asset, which is not incidental to the trade or business. Publicly traded assets held by non-public entity may be listed on Part IIIA.

BLOCK B

Valuation of Assets

At the close of reporting period.
If None, or less than \$1,001,
Check the first column.

BLOCK C

Type and Amount of Income

Type of Income

Amount of Income

None (or less than \$1,001)												\$1,001 - \$15,000												\$15,001 - \$50,000												\$50,001 - \$100,000												\$100,001 - \$250,000												\$250,001 - \$500,000												\$500,001 - \$1,000,000												Over \$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																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																														

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.

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Reporting Individual's Name

☐ Amendment

Wicker, Roger F.

PART IV. TRANSACTIONS

Page Number

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Report any purchase, sale, or exchange by you, your spouse, or dependent child (See p.3 CONTENTS OF REPORTS Part B of Instructions) during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Do not report a transaction involving property used solely as your personal residence, or a transaction between you, your spouse, or dependent child. Please clarify which two properties are involved in any reportable exchange.

Identification of Assets			Pur	Sale	Exc		\$1,0	\$15	\$50	\$100	\$25	\$500	Ove	\$1,0	\$5,0	\$25,	Ove
Example:	S,	IBM Corp. (stock) NYSE	X			2 / 1 / 1X		X			E	X	A	M	P	L	E
	DC, or J	(DC) Microsoft (stock) NASDAQ/OTC		X		1 / 27 / 1X				X	E	X	A	M	P	L	E
1	S	Massey Energy Company (bond)		X		05/24/11		X									
2	S	FNMA (mortgage backed security)		X		3/28/11	X										
3	S	GNMA (mortgage backed security)	X			06/21/11	X										
4	S	GNMA (mortgage backed security)	X			08/26/11	X										
5																	
6																	
7																	
8																	
9																	
10																	
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12																	

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.

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Wicker, Roger F.

PART VII. LIABILITIES

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Report liabilities over \$10,000 owed by you, your spouse, or dependent child (See p.3 CONTENTS OF REPORTS Part B of Instructions), to any one creditor at any time during the reporting period. Check the highest amount owed during the reporting period. Exclude: (1) Mortgages on your personal residences unless rented; (2) loans secured by automobiles, household furniture or appliances; and (3) liabilities owed to certain relatives listed in Instructions. See Instructions for reporting revolving charge accounts.

Report liabilities over \$10,000 owed by you, your spouse, or dependent child (See p.3 CONTENTS OF REPORTS Part B of Instructions), to any one creditor at any time during the reporting period. Check the highest amount owed during the reporting period. Exclude: (1) Mortgages on your personal residences unless rented; (2) loans secured by automobiles, household furniture or appliances; and (3) liabilities owed to certain relatives listed in Instructions. See Instructions for reporting revolving charge accounts.				Date Incurred	Interest Rate	Term if Applicable	Category of Amount of Value (x)											
							\$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	Over \$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	
Name of Creditor		Address	Type of Liability															
Example:	S, DC, or J	First District Bank	Wash., DC	Mortgage on undeveloped land	1992	13%	25yrs			X		E	X	A	M	P	L	E
	(J)	John Jones	Wash., DC	Promissory Note	2000	10%	On dmd				X	E	X	A	M	P	L	E
1	J	Capital One (formerly Chevy Chase Bank)	PO Box 259320, Plano, TX 75025	refinance mortgage on personal residence, Alexandria, VA	2005	5.875	30 yrs				X							
2	J	Capital One Bank	PO Box 259320, Plano, TX 75025	mortgage on rental property, Alexandria, VA	2006	5.875	30 yrs					X						
3	J	BNA Bank	133 East Bankhead Street New Albany, MS 38652	mortgage on personal residence, Oxford, MS	2006	5	30 yrs					X						
4	J	Chase	PO Box 9001871, Louisville, KY 40290	refinance mortgage on personal residence, Tupelo, MS	2003	4.875	15 yrs				X							
5	J	Renasant Bank	209 Troy Street, Tupelo, MS 38801	home equity line of credit on personal residence, Tupelo, MS	2007	3.25	10 yrs			X								
6																		
7																		
8																		
9																		
10																		
11																		
12																		

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right. ☐

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