UNITED STATES SENATE FINANCIAL DISCLOSURE REPORT FOR ANNUAL AND TERMINATION FILERS

Amendment							Defrict Sugar	\$ 100 A
ast Name	First Name and Middle Ini	tial		Annual Report	,		and the second	ere e de la companya
BOOZMAN	JOHN	N.		Calendar Year Covered by Report	Senate Office / Agency in			
office of Senator Booms		4-48	43	Termination Date (mm/dd/yy)	Prior Office / Agency in W	hich Employed		
AFTER READING THE INSTRUCT	TIONS – ANSW	ER EAC	H OF	THESE QUESTIONS AN	ND ATTACH TH	IE RELEVAN	IT PA	RT
		YES	NO 🔅				YES	NO
Did any individual or organization make a donation to daying you for a speech, appearance, or article in the FYes, complete and attach PART I.	•		$\times \parallel$ \sharp	Did you, your spouse, or dependent eimbursements for travel in the reposition one source)? If Yes, complete and attach PART Views, complete and attach PART Views.	orting period (i.e., worth			
Did you or your spouse have earned income (e.g., salanvestment income of more than \$200 from any reportate porting period? FYes, complete and attach PART II.	•		$\mathbf{X} \coprod \emptyset$	Did you, your spouse, or dependent more than \$10,000) during the report Yes, complete and attach PART V	rting period?	ble liability	X	
Did you, your spouse, or dependent child hold any replace than \$1,000 at the end of the period, or receive unvestment income of more than \$200 in the reporting Yes, complete & attach PART IIIA and/or IIIB.	unearned or		c	Did you hold any reportable positions current calendar year? If Yes, complete and attach PART VI		of filing in the	X	
Did you, your spouse, or dependent child purchase, se eportable asset worth more than \$1,000 in the reporting Yes, complete and attach PART IV.	_ +			Oo you have any reportable agreementity? If Yes, complete and attach PART IX	-	th an outside		X
oid you, your spouse, or dependent child receive any eporting period (i.e., aggregating more than \$350 and exempt)? If Yes, complete and attach PART V.			$X \sqcup $	f this is your FIRST Report: Did you 55,000 from a single source in the two fixes, complete and attach PART X	<u>vo</u> prior years?	n of more than ြ	ECRE 1	X
Each question must b	e answered a	nd the a	pprop	riate PART attached for	r each "YES" r	esponse.		
						FOR OFFICIAL U		

Reporting Individual's Name U D 4 Amenda	ent
BOOZMAN	
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PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

Page Number

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 CO Inst inve

- Incl ide fun exc

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

		t held by you, your spouse, or				CHE	BCK (ne II	rst c	JIUITI	11.						7	уре	e of	Inc	ome	е						Am	our	nt of	Inc	com	ıe		
CONT Instru invest (1) I (2) (in Includ identif fund, except except	rent verballe on Pose	value exceeding \$1,000 at the the reporting period; and/or ted over \$200 in "unearned" during the reporting period. PART IIIA a complete of each public bond, mutual	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		Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	r less	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$15,	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000***	5	000,000,	Actual Amount Required if "Other" Specified
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8]_	ABO	S Equity Fund	e.			X		***				i gy				X		X	X					(X			\supset						
9 J-	Arı	Vest-Checkina			X	3										(1) 有 (1) (1)	,	X	•	A STATE OF THE STA		* ** · · · · · · · · · · · · · · · · ·		X		A comment								:	
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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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PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

Page Number

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			At I	the d	uat close	of res	of A	Ass ting (in \$1	perio	d.						T					ype an			K C	of I									•
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.	None (or less than \$1,001)	1 - \$15,000	\$15,001 - \$50,000] •	,001 - \$250,00	1 - \$500,00	,001 – \$	1,000,000,1	,001 - \$5,000,	01 - \$25,000,0	00,000	Over \$50,000,000		Dividends		Interest	ains ·	Excepted Investment Fund	d Trust	Qualified Blind Trust	Other (Specify Type)	None (or less than \$201)	ès	- 100	- \$5,000	- \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	,001 - \$1,000,000	1,000,000,000,1	\$5,000,000	5,000,000	Actual Amount Required if "Other" Specified	t
S, IBM Corp (stock)				Х										Х							Example		Х										Example	•
or J (S) Keystone Fund	-		-		X		4	_		_			Ļ					Х			Example	Х											Example	_
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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		PAF	RT II	IIB.		101	N-P	UE	3LI	CL'	Y 1	- ΓR/	٩D	ËD	AS	SSE	TS	S A	ND	UI	NEAR	١E١) IN	4C	OM	E S	so	UR	CE	s		Pag	S/B
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,				t the If No	luat close ne, o neck	ion e of r	epor s tha	Ass ting in \$1	perio	od.						Tvn	e o	f Inc	CO II		ype an			K C unt					f In	·	20		
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.	50 those 64 004)	\$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	001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	rer \$1,000,000***	\$1,000,001 - \$5,000,000	000	Actual Amount Required if "Other" Specified
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or J Undeveloped land, Dubuque, Iowa					X								×	-							Example	×											Example
¹ J-Cotswald Partners, LLC ² Rogers, AR	╁							\dashv					_							-										-	_		
Logers, AR	4	<u> </u>	_	<u> </u>										,								, ,											<u> </u>
3 Subdivision lots	╧								X				X									X											
4 House, Rogers, AR	1		X			•				:					X									X			:						
5 Northwest Mutual Whale 1:	Ç		X											X							<u></u>		∇		_					\dashv		_	·
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XEMPTION TEST (see instructions before marking box): ** This category applies only if the asset is/was held indep	lf you ende	omittently by	ed an	ny ass spous	set be se or	ecaus depe	se it i ender	meet nt ch	s the	thre If the	e-pa asse	ert tes	st for	r exer either	nptic hele	n de d by t	scrib the fi	ed in ler or	the i	instru lly he	ctions, ple	ase o	heck	k box egori	to thes o	ne rig f valu	jht. Je, a:	s app	ropri	ate,			

Reporting Individual's Name	Amendment
BOOZMAN	

PART IV. TRANSACTIONS

Page Number

•							Am	ount	10	<u>I ran</u>	isac	tion	<u>(X)</u>		
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	_	nsact ype (•
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.	urchase	Sale	change	Transaction Date (Mo., Day, Yr.)	0001 - \$15,000	5,001 - \$50,000	50,001 - \$100,000	00,001 - \$250,000	50,001 - \$500,000	500,001 - \$1,000,000	ver \$1,000,000***	,000,001 - \$5,000,000	,000,001 - \$25,000,000	5,000,001 - \$50,000,000	ver \$50,000,000
Identification of Assets	۵	Ÿ	ŭ		\$-1	\$	\$	\$1	\$2	\$	Ó	\$	\$5	\$25	Ó
Example: DC, IBM Corp. (stock) NYSE	*X			2/1/1X		$\overline{}$			E	X	Α	M	Р	L.	E
or J (DC) Microsoft (stock) NASDAQ/OTC		$\stackrel{\sim}{\smile}$		1/27/1X	V				E	^	A	IVI	P .	<u> </u>	Ε
1 JABG-Muni Bond Fund		\	The state of the s	11-26-12					: · · · · ·		· ·		1. · · .		1 X 1
2 J ABG- Equity Fund		X		8-12-12		X									
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EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the thin *** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset	ee-part											e.			

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PART VII. LIABILITIES

Page Number 7/8

Category of Amount of Value (x)

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 (except for Senators); (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.

		I : _		`		77.	<u> </u>			••••	<u> </u>	414	<u> </u>	<u></u>
Date Incurred	Interest Rate	Discount Points Paid for Mortgage (Senators Only)	Term if Applicable	\$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
1992	13%	1 pt	25 yrs			X		E	X	A	Μ	Ρ	L	Ш
2000	10%	n/a	On dmd				х	Е	Х	Α	М	Ρ	7	Ε

	Name o	of Creditor	Address	Type of Liability			ομ IO		\$10,0	\$15,	\$50,	\$100	\$250	\$500	₹	~	\$5,0(\$25,	Over
	S, Example: DC,	First District Bank	Wash., DC	Mortgage on undeveloped land	1992	13%	1 pt	25 yrs			Х		E	X /	Α	М	Р	L	E
_	or J	(J) John Jones	Wash., DC	Promissory Note	2000	10%	n/a	On dmd				X	E	X	A	М	Р	L	Ε
1	Arvest	Pank	Rogers, AR	mortgage	2012	4.25	0	28 115					X						ı
2	Arvest	Pank	Roopers AR	200 mortgage	2012	-6,25		5yrs]	X								
3	Arvest		Rogers, AR	mort gage on undeveloped land		Float	5	2013	·					X			. j. 		
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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 ENEMIS O E	☑ <u>Amendment</u>
BOOZMAN	

PART VIII. POSITIONS HELD OUTSIDE U.S. GOVERNMENT

Page Number

Report any positions held by you during the applicable reporting period whether compensated or not. Positions include, but are not limited to those of an officer, director, trustee, general partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise or any non-profit organization or educational institution. Both the year and month must be reported for the period of time that the position was held.

Exclude: Positions with federal government, religious, social, fraternal, or political entities, and those solely of an honorary nature.

Name of Organization			Address (City, State)		Type of Organization	Position Held	From (Mo/Yr)	To (Mo/Yr)
Example:	nle [.]	National Assn. of Rock Collectors	Assn. of Rock Collectors NY,NY EXAMPLE		Non-profit education	President	6/91	Present
Example.		Jones & Smith	Hometown, USA EXAMPLE		Law Firm	Partner	7/96	11 / 1X
1	ats	suald Partners Luc	Rooms.	AR	Real Estate development	Partner	3/8	Present
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Compensation in excess of \$200 from any position must be reported in Part II.