

UNITED STATES SENATE FINANCIAL DISCLOSURE REPORT FOR ANNUAL AND TERMINATION FILERS

<input type="checkbox"/> Amendment			
Last Name	First Name and Middle Initial	Annual Report Calendar Year Covered by Report	Senate Office / Agency in Which Employed
BOOZMAN	JOHN N.	2013	320 HART
Senate Office Address (Number, Street, City, State, and ZIP Code)	Senate Office Telephone Number (Include Area Code)	Termination Report Termination Date (mm/dd/yy)	Prior Office / Agency in Which Employed
Office of Senator BOOZMAN	202-224-4843		

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? 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 totaling \$200 or more from any reportable source in the reporting period? Yes, complete and attach PART II.	<input type="checkbox"/>	<input checked="" 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? 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 checked="" type="checkbox"/>	<input 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? 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)? Yes, complete and attach PART V.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	If this is your <u>FIRST</u> 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 checked="" type="checkbox"/>

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

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

JAN 15 PM 12:12

U.S. SENATE

Reporting Individual's Name

☐ Amendment**PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES**

Page Number

3/8

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 PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment fund, bank account, excepted and qualified blind trust, and publicly traded asset 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.

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
			X								
				X							

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

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
	X							Example		X										Example
					X			Example	X											Example

S,
Example: DC,
or J

IBM Corp. (stock)

(S) Keystone Fund

John Boozman IRA *

* CASH (ARVEST)

J-INVESCO short term treas MM

J-ABG Mun Bond Fund

J-ABG Equity Fund

J-ARVEST CHECKING

Checking

J-Federal Credit Union

Savings

J Federal Credit Union

Checking

Senate Fed Credit Union

Savings

Senate Fed Credit Union

Senate Fed Credit Union

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.

☐

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.

Example: DC, S, or J

IBM Corp. (stock)

(S) *Keystone Fund*

	CASH ACCOUNT
S Regions Bank (IRA)	

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

[illegible]

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.**

Reporting individual's Name

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

Page Number

5/8

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.

S, JP Computer, Software Design,
Example: DC, Wash DC
or J Undeveloped land, Dubuque, Iowa

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

	BLOCK B Valuation of Assets									BLOCK C Type and 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	Type of Income							Amount of Income						Actual Amount Required if "Other" Specified								
													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	
Example: S, JP Computer, Software Design, Wash DC				X										X							Example		X										Example	
Example: or J Undeveloped land, Dubuque, Iowa					X								X								Example	X											Example	
1 J-Cotswalds Partners, LLC																																		
2 Rogers, AR																																		
3 Subdivision Lots* attachment						X							X									X												
4 Northwestern Mutual Whole life			X										X									X												
5																																		
6 John Boozman IRA Commercial Real Estate	X																X												X				(Reinvested in IRA)	
7 House Rogers, AR 1/3 inheritance	X																X																	
8																																		
9																																		
0																																		

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, see the instructions.

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Reporting Individual's Name

☐ Amendment

PART IV. TRANSACTIONS

Page Number

6/8

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		Purch	Sale	Excha		\$1,001 -	\$15,001	\$50,001	\$100,00	\$250,00	\$500,00	Over \$1,	\$1,000,0	\$5,000,0	\$25,000,0	Over \$50
S, Example: DC, or J	IBM Corp. (stock) NYSE (DC) Microsoft (stock) NASDAQ/OTC	X			2/1/1X		X			E	X	A	M	P	L	E
1	John BOOZMAN IRA Commercial Real Estate		X		1/27/1X				X	E <td>X</td> <td>A</td> <td>M</td> <td>P</td> <td>L</td> <td>E</td>	X	A	M	P	L	E
2	J-ABC Equity Fund		X		12/10/13					X						
3	HOUSE, Rogers, AR, 1/3 int. (inheritance)		X		9/16/13	X										
4	J-Cotswald lot E		X		10/29/13		X									
5	J-Cotswald lot F		X		5/30/13											
6	J-Cotswald lots I and J, one buyer		X		4/4/13				X							
7	J-Cotswald lot C		X		4/4/13				X							
8	J-Cotswald lot A and B, one buyer		X		4/4/13				X							
9	J-Cotswald lot K		X		5/17/13				X							
0			X		5/17/13					X						
1					7/9/13			X								
2																

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 in the form.

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 in the form.

Reporting Individual's Name

☐ Amendment

PART VII. LIABILITIES

Page Number

7/8

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.

Name of Creditor	Address	Type of Liability	Date Incurred	Interest Rate	Discount Points Paid for Mortgage (Senators Only)	Term if Applicable	Category of Amount										
							\$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
Example: S, DC, or J	First District Bank	Wash., DC	1992	13%	1 pt	25 yrs			X		E	X	A	M	P	L	E
	(J) John Jones	Wash., DC	2000	10%	n/a	On dmd				X	E	X	A	M	P	L	E
1 ARVEST BANK	Rogers, AR	mortgage	2012	4.25	0	28 yrs					X						
2 ARVEST BANK	Rogers, AR	Home Equity loan	2013	3.7	0	5 yrs			X								
3 ARVEST BANK	Rogers, AR	mortgage on undeveloped land	2013	3.00	0	2 yrs					X						
4																	
5																	
6																	
7																	
8																	
9																	
0																	
1																	
2																	

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 VIII. POSITIONS HELD OUTSIDE U.S. GOVERNMENT

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:	National Assn. of Rock Collectors	NY, NY EXAMPLE	Non-profit education	President	6 / 91	Present
	Jones & Smith	Hometown, USA EXAMPLE	Law Firm	Partner	7 / 96	11 / 1X
1	COTSWALD PARTNERS LLC	Rogers, AR	REAL ESTATE DEVELOPMENT	PARTNER	3/08	PRESENT
2						
3						
4						
5						
6						
7						
8						
9						
0						
1						
2						
3						

Compensation totaling \$200 or more from any position must be reported in Part II.

Cotswalds Partners, LLC

* Attachment Subdivision Lots

Name of Asset	Valuation of Assets	Type of Income	Amount of income
Subdivision Lot D	50,001-100,000	None	None
Subdivision Lot G	15,001-50,000	None	None
Subdivision Lot H	15,001-50,000	None	None
Subdivision Lot L	15,001-50,000	None	None
Subdivision Lot M	15,001-50,000	None	None
Subdivision Lot N	15,001-50,000	None	None
Subdivision Lot O	15,001-50,000	None	None
Subdivision Lot P	15,001-50,000	None	None
Subdivision Lot Q	15,001-50,000	None	None
Subdivision Lot R	15,001-50,000	None	None
Subdivision Lot S	15,001-50,000	None	None
Subdivision Lot T	15,001-50,000	None	None
Subdivision Lot U	15,001-50,000	None	None
Subdivision Lot V	15,001-50,000	None	None
Subdivision Lot W	15,001-50,000	None	None
Subdivision Lot X	15,001-50,000	None	None
Subdivision Lot Y	15,001-50,000	None	None
Subdivision Lot Z	15,001-50,000	None	None
Subdivision Lot AA	15,001-50,000	None	None
Subdivision Lot BB	15,001-50,000	None	None
Subdivision Lot CC	15,001-50,000	None	None
Subdivision Lot DD	15,001-50,000	None	None
Subdivision Lot EE	15,001-50,000	None	None
Subdivision Lot HH	15,001-50,000	None	None
Subdivision Lot II	15,001-50,000	None	None