

UNITED STATES SENATE FINANCIAL DISCLOSURE REPORT FOR ANNUAL AND TERMINATION FILERS

<input type="checkbox"/> Amendment			
Last Name		First Name and Middle Initial	
Cotton		Tom	
Senate Office Address (Number, Street, City, State, and ZIP Code)		Senate Office Telephone Number (Include Area Code)	
124 Russell Senate Office Building Washington, DC 20510		202-224-2353	
Annual Report		Termination Report	
Calendar Year Covered by Report		Termination Date (mm/dd/yy)	
2017			
Senate Office / Agency in Which Employed		Prior Office / Agency in Which Employed	
Senator (Arkansas)			

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 \$375 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? If 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 type="checkbox"/>	<input checked="" 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 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? 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 \$375 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 two 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.

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2018 MAY 4 PM 4:45

AT

Tom Cotton

PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

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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 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.

BLOCK C

Type and Amount of Income

[illegible]

XEMPTION 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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Reporting Individual's Name Tom Cotton		<input type="checkbox"/> Amendment		PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES																		Page Number 2			
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.										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										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, DC, or J		IBM Corp. (stock)										X							Example					Example	
		(S) Keystone Fund										X							Example					Example	
Northern Trust Roth IRA (SP) -- assets below																									
MFC Flexshares Trust Quality Dividend Index Fund		X																	X						
MFO Harding Loevner Funds Inc Intl Equity Portfolio		X																	X						
MFO DFA Invt Dimensions Group Inc Emerging Markets Core Equity Portfolio		X																	X						
MFB Northern Funds Core Bond Fund		X																	X						
MFO DFA Dimensions Group Inc US Core Equity 1 Portfolio		X																	X						
MFB Northern High Yield Fixed Income Fund		X																	X						
MFO DFA Invt Dimensions Group Inc Real Estate Securities Portfolio		X																	X						
MFC Flexshares Tr Morningstar Global Upstream Natural Resource Index Fund		X																	X						
Cash -- Money Market Fund		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.																						<input type="checkbox"/>			

PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

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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

None	Other <i>(Specify Type)</i>
Dividends	
Rent	
Interest	
Capital Gains	
Excepted Investment Fund	
Excepted Trust	
Qualified Blind Trust	

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							
			X						

	X						Example
				X			Example

[illegible][illegible][illegible][illegible][illegible][illegible][illegible][illegible][illegible][illegible]

	X									
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* 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.

PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

BLOCK A Identity of Publicly Traded Assets And Unearned Income Sources		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																				
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.													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
Example: S, DC, or J	IBM Corp. (stock)			X										X							Example		X										Example
	(S) Keystone Fund				X													X			Example	X											Example
Northern Trust Discretionary Account (SP) -- assets below																																	
MFB Northern Funds Stock Index Fund				X														X				X											
MFB Northern Funds Global Tactical Asset Allocation Fund (sold)		X																X				X											
MFB Northern Equity Index Funds Mid Cap Index			X															X				X											
MFO DFA US Small Cap Portfolio			X															X				X											
MFB Northern Funds Tax Exempt Fund			X															X				X											
Cash -- Money Market Fund			X															X				X											
MFC Flexshares Trust Quality Dividend Index Fund			X															X				X											
MFB Northern Funds Short Inter Tax Exempt Fund			X															X				X											
MFO DFA Inv't Dimensions Group Inc Emerging Markets Core Equity Portfolio			X															X				X											
MFB Northern Equity Index Funds Intl Equity Index			X															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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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.

All transactions in account held by spouse

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. All transactions in account held by spouse					Transaction Type (x)		Transaction Date (Mo., Day, Yr.)	Amount of Transaction (x)											
					Purchase	Sale		Exchange	\$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
Identification of Assets																			
Example: S, DC, or J	IBM Corp. (stock) NYSE				X			2 / 1 / 1X		X			E	X	A	M	P	L	E
	(DC) Microsoft (stock) NASDAQ/OTC					X		1 / 27 / 1X				X	E	X	A	M	P	L	E
MFB Northern Equity Index Funds Intl Equity Index (SP)					X			6/6/17	X										
MFB Northern Funds Stock Index Fund (SP)					X			6/6/17	X										
MFO DFA Invt Dimensions Group Inc Emerging Markets Core Equity Portfolio (SP)					X			6/7/17	X										
MFB Northern Funds Global Tactical Asset Allocation Fund (SP)						X		6/6/17		X									

Tom Cotton

PART VIII. POSITIONS HELD OUTSIDE U.S. GOVERNMENT

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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.

[illegible]

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