UNITED S	TATES SENATE PUBLI FOR ANNUAL AND	C FINANCIAL DISCLOS TERMINATION REPORT	SURE REPORT								
Last Name	First Name and Middle Initial	Annual Report	Senate Office / Agency in Which Employed								
		Calendar Year Covered by Report:									
SESSIONS	JEFFERSON B., III	1998	U. S. Senator Jeff	Sessions							
Senate Office Address (Number, Street, City, State, and ZIP Code)	Telephone No. (Include Area Code)	Termination Report	Prior Office / Agency in Which Employed								
493 Russell Senate Building		Termination Date (Mo., Day, Yr.):									
Washington, DC 20510	(202) 224-4124										
AFTER READING THE INSTRUC	CTIONS - ANSWER EACH			EVANT PART							
Did any individual or organization make a donation to charipaying you for a speech, appearance, or article in the report if yes, Complete and Attach PART I.	ity in lieu of ting period?	Did you, your spouse, or dependent child rebursements for travel in the reporting period source)?  If yes, Complete and Attach PART VI.	eceive any reportable travel or reim- (i.e., worth more than \$250 from one	YES NO XX							
Did you or your spouse have earned income (e.g., salaries non-investment income of more than \$200 from any reports in the reporting period?  If yes, Complete and Attach PART II.	or fees) or able source  YES NO XX	Did you, your spouse, or dependent child ha \$10,000) during the reporting period? If yes, Complete and Attach PART VII.	ve any reportable liability (more than	YES NO XX							
Did you, your spouse, or dependent child receive unearner ment income of more than \$200 in the reporting period or reportable asset worth more than \$1,000 at the end of the pif yes, Complete and Attach PART IIIA and/or IIIB.	pefore the date of filing in the current	YES XX NO									
Did you, your spouse, or dependent child purchase, sell, o any reportable asset worth more than \$1,000 in the report If yes, Complete and Attach PART IV.	or exchange ing period?	Do you have any reportable agreement or arr If yes, Complete and Attach PART IX.	angement with an outside entity?	YES NO XX							
Did you, your spouse, or dependent child receive any report the reporting period (i.e., aggregating more than \$250 and wise exempt)? If yes, Complete and Attach PART V.	rtable gift in d not other-	If this is your FIRST Report: Did you receive of from a single source in the two prior years? If yes, complete and attach Part X.	compensation of more than \$5,000 N/A	YES NO							
File this report and any amendm	ents with the Secretary of	of the Senate, Office of Pu	blic Records, Room 23	2, Hart Senate							
Office Building, U.S. Senate, Wa	shington, D.C. 20510. \$2	200 Penalty for filing more	than 30 days after due	date.							
This Financial Disclosure Statement is required available by the Office of the Secretary by the Select Committee on Ethics. Any inditative report may be subject to civil and criminates.	rired by the Ethics in Governmen of the Senate to any requesting p vidual who knowingly and willfully	t Act of 1978, as amended. The st erson upon written application and falsifies, or who knowingly and wil	ratement will be For Official Use Only will be reviewed	- Do Not Write Below This Line SECRECA							
Certification Signature of Reporting	g Individual	Date (Month, Day, Year)		RETAF							
I CERTIFY that the statements I have made on this form and all attiched schedules are true, complete and socrect to the best of my knowledge and belief.	1999	ARY OF THE									
For Official Use Only Do Not Write Bel	ow This Line			E S							
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.	g Official	Date (Month, Day, Year)	(16)	SENATE L: 02							
Previous Editions Cannot Be Used				Revised 3/99							

Reporting Individual's Name

# PART I. PAYMENTS TO CHARITABLE ORGANIZATIONS IN LIEU OF HONORARIA

Page Number

2

Senator Jeff Sessions

Report the source (name and address), date, and amount of any payment from each source to a charitable organization made in lieu of honoraria to you during the reporting period. Identify the activity (speech, article, or appearance) which generated the payment. For further information, see Instructions.

Note: Travel expenses in excess of \$250 related to activities giving rise to these payments must be reported in Part VI, Reimbursements.

Date of P	ayment	Name of Source	Name of Source Address (City, State)								
ample:	3/26/9X 7/23/9X	Association of American Associations <b>EXAMPLE</b> XYZ Magazine	Wash., D.C. <b>EXAMPLE</b> NY, NY	Speech Article	\$1,000 \$500						
None	9										
	ample:	None	ample: 3/26/9X 7/23/9X Association of American Associations EXAMPLE XYZ Magazine  None	ample: 3/26/9X / 7/23/9X Association of American Associations EXAMPLE NO.C. EXAMPLE NY. NY  NONE  NONE    State	ample: 3/26/9X / 7/29/9X Association of American Associations EXAMPLE / XYZ Magazine						

A separate, confidential report which names the charitable organization receiving such payments must be filed directly with the Select Committee on Ethics.



Reporting Individu	al's Name	
Senator	Jeff	Sessions

# PART II. EARNED AND NON-INVESTMENT INCOME

Page Number

3

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 page 3, Part B of the 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 MCI (Spouse)	EXAMPLE Wash., D.C. EXAL Arlington, VA	MPLE Salary Salary	\$15,000 Over \$1,000
1 None			
2			
3			
4			
5			
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14			

#### PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

Page Number

4

Senator Jeff Sessions

BLOCK A

#### **Identity of Publicly Traded Assets** and Unearned Income Sources

Report the complete name of each publicly trade dent prod

Inclu publi inter exce asse

BLOCK B

#### **Valuation of Assets**

At close of reporting period. If none, or less than \$1,001, check the 1st column.

BLOCK C

#### Type and Amount of Income

If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item. This includes income received or accrued to the benefit of the individual.

	held by you, your spouse, or your depen- ee page 3, Part B of the Instructions), for	20000000										1			Ту	pe o	f in	com	e	Amount of Income										
(1) had of the (2) gene durin clude on th blic bond, erest, exc cepted and	f income or investment which: a value exceeding \$1,000 at the close e reporting period; and/or erated over \$200 in "unearned" income g the reporting period. is Part IIIA a complete identification of each mutual fund, publicly traded partnership eepted investment funds, bank accounts, d qualified blind trusts, and publicly traded etirement plan.	or less than \$1	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	F1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	Over \$50,000,000		Dividends	Rent	Interest	Excepted Insendment Fand	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500		\$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		Actual Amount Required if "Other" Specified
Example:	IBM Corp. (stock) NYSE			X		XΑ	MP (A	L				11	×		XΑ		LE				х			3,	ΑN	PL	E 1PL			
Example.	Keystone Equity Fund (widely diversified)				x	E	KA	ME	L E			Ш				3	E	ŦX/	MPLE		<u> </u>	<u> </u>	X		EX	AN	1PL	E_		
See A	ttached Schedule									ļ						-		ļ												
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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 here.

\*\*\* 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.

9

10

### PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

Page 4-1

BLOCK A		BLOCK B	BLOCK C							
OWNER	IDENTITY OF ASSET	VALUE OF ASSET	TYPE OF INCOME	AMOUNT OF INCOME						
Self	TransAmerica Life Companies Simplified Employee Pension Plan	\$1,001-15,000	Interest	None (3)						
Self	Sunamerica Small Company Growth Fund Mutual Fund IRA	\$1,001-15,000	Interest	None (3)						
Self	Mass Mutual/Panorama Growth Fund IRA	\$15,001-50,000	Dividend	None (3)						
Joint w/Spouse & Spouse	Morgan Stanley Dean Witter Compass Bancshares	\$15,001-50,000	Dividend	\$201-1,000						
Joint w/Spouse	Morgan Stanley Dean Witter Community Bankshares, Inc.	\$15,001-50,000	Dividend	\$201-1,000						
Joint w/Spouse	Morgan Stanley Dean Witter Energen Corporation	\$1,001-15,000	Dividend	Less than \$201						
Joint w/Spouse	Morgan Stanley Dean Witter Liquid Asset Account	\$1,001-15,000	Dividend	\$201-1,000						
Joint w/Spouse	Àmerican Express Financial Services High Yield Tax-Exempt Class A Mutual Fund	\$15,001-50,000	DIvidend	\$201-1,000						
Spouse	Morgan Stanley Dean Witter Liquid Asset Account	Less than \$201	Dividend	Less than \$201						
Spouse	Merrill Lynch First Union Corporation	\$15,001-50,000	Dividend	\$201-1,000						
Spouse	Merrill Lynch Enstar Group Inc. Com GA	\$1,001-15,000	None	None						
JTWROS w/Mother	Merrill Lynch(4) Blackrock Inv Q Muncp Tr	\$15,001-50,000	Dividend Capital Gain	None (1) None (1)						
JTWROS w/Mother	Merrill Lynch(4) Colonial Tr IV Utils	\$1,001-15,000	Dividend Reclass Dist	None (1) None (1)						
JTWROS w/Mother	Merrill Lynch(4) Eaton Vance Natl Municipals Fund Cl B	\$1,001-15,000	Reclass Dist	None (1)						
JTWROS w/Mother	Merrill Lynch(4) Huntsville AL WTS Ser C OID	\$15,001-50,000	Interest	None (1)						
JTWROS w/Mother	Merrill Lynch(4) ML High Income Muni Bd Fd	\$15,001-50,000	Capital Gain	None (1)						



BLOCK A	BLOCK B	BLOCK C
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OWNER	IDENTITY OF ASSET	VALUE OF ASSET	TYPE OF INCOME	AMOUNT OF INCOME
JTWROS	Merrill Lynch(4)			
w/Mother	DCH Health Care Auth AL			
	FACS Rev A RFDG OID MBIA	\$1,001-15,000	Interest	<b>N</b> one (1)
JTWROS	Merril! Lynch(4)			
w/Mother	East AL Health Care Auth			
	FAC RV TX Antic OID MBIA	\$1,001-15,000	Interest	None (1)
JTWROS	Merrill Lynch(4)			
w/Mother	CBA Money Fund	\$1,001-15,000	Dividend	None (1)
JTWROS	Camden National Bank (Camden, AL)(4)			
w/Mother	Savings Account	\$1,001-15,000	Interest	None (1)
JTWROS	Camden National Bank (Camden, AL)(4)			
w/Mother	Certificate of Deposit	\$1,001-15,000	Interest	None (1)
JTWROS	Camden National Bank (Camden, AL)(4)			
w/Mother	Certificate of Deposit	\$1,001-15,000	Interest	<b>N</b> one (1)
JTWROS	Camden National Bank (Camden, AL)(4)			
w/Mother	Certificate of Deposit	\$1,001-15,000	Interest	None (1)
JTWROS	Camden National Bank (Camden, AL)(4)			
w/Mother	Certificate of Deposit	\$15,001-50,000	Interest	None (1)
JTWROS	Town & Country National Bank (Camden, AL)(4)			
w/Mother	Savings Account	\$1,001-15,000	Interest	None (1)
JTWROS	Town & Country National Bank (Camden, AL)(4)			
w/Mother	Certificate of Deposit	\$1,001-15,000	Interest	None (1)
JTWROS	Town & Country National Bank (Camden, AL)(4)			
w/Mother	Certificate of Deposit	\$15,001-50,000	Interest	None (1)
JTWROS	Town & Country National Bank (Camden, AL)(4)			
w/Mother	Certificate of Deposit	\$15,001-50,000	Interest	None (1)
JTWROS	Town & Country National Bank (Camden, AL)(4)			
w/Mother	Certificate of Deposit	\$1,001-15,000	Interest	None (1)
JTWROS	AARP Investment Program(4)			
w/Aunt	AARP Insured T-F General Bond	\$15,001-50,000	Dividend	None (1)
Self	Installment Sale Mortgage (Kopf)(5)			
	Bladon Springs Property, Choctaw Co., AL	\$15,001-50,000	Interest	\$1,001-2,500



BLOCK A		BLOCK B	BLO	OCK C
OWNER	IDENTITY OF ASSET	VALUE OF ASSET	TYPE OF INCOME	AMOUNT OF INCOME
Joint w/Spouse	AmSouth Bank Savings Account(5)	\$1,001-15,000	Interest	\$201-1,000
Joint w/Spouse	AmSouth Bank Checking Account(5)	\$1,001-15,000	Interest	Less than \$201
Spouse	AmSouth Bank Savings Account(5)	\$1,001-15,000	Interest	\$201-1,000
DC	Merrill Lynch ML Corp BD INV GRD PT D	\$1,001-15,000	Dividend	Less than \$201
DC	Merrill Lynch ML Growth Fund CL D	None	Dividend Capital Gain	Less than \$201 \$1,001-2,500
DC	Merrill Lynch ML Federal Sec TR CL B	\$1,001-15,000 Sold in 1998 (2)	Dividend Capital Loss	\$201-1,000 -\$0
DC	Merrill Lynch Ready Asset Trust	\$1,001-15,000	Withdrawal Dividend	\$3,200 \$201-1,000
DC	Morgan Stanley Dean Witter Alliance Growth Fund CL B	\$1,001-15,000	Capital Gain	Less than \$201
DC	Morgan Stanley Dean Witter Evergreen Small Company Growth Fund S-4	\$1,001-15,000	Capital Gain	\$201-1,000
DC	Morgan Stanley Dean Witter Liquid Asset Fund	\$1,001-15,000	Dividend	\$201-1,000
DC	Pasadena Investment Trust Growth Fund CL A	All sold in 1997(6)		

<sup>(1)</sup> All income from this investment accrues to the benefit of or is paid to the Senator's mother, Abbie P. Sessions, or Senator's aunt, Mary Powe.



<sup>(2)</sup> See "Part IV. Transactions" for details of this sale.

<sup>(3)</sup> SEPP and IRA income not taxable. Reinvested.

<sup>(4)</sup> Properties owned as JTWROS with mother, Abbie P. Sessions, and aunt, Mary Powe. In process of amending 1996 and 1997 reports to reflect ownership.

<sup>(5)</sup> These accounts listed on previous reports under "IIIB. Non-Publicly Traded Assets and Unearned Income Sources".

<sup>(6) 1997</sup> Transactions being amended to reflect sale.

Reporting	Individual's	Name
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# PART IIIB. NON-PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

Page Number 5

Senator Jeff Sessions

BLOCK A

#### **Identity of Non-Publicly Traded Assets** and **Unearned Income Sources**

BLOCK B

#### **Valuation of Assets**

At close of reporting period. If none, or less than \$1,001, check the 1st column.

BLOCK C

### Type and Amount of Income

If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item. This includes income received or accrued to the benefit of the individual.

	U	nearned income Sources			C	песк	uie	151 0	olulli	111.																						
ead dei pro	ch interest	ame, address (city, state), and description of theld by you, your spouse, or your depen- see page 3, Part B of the Instructions) for the fincome or investment in a non-public trade which:	(100'15			9		90		900	0,000	000'00				T		******	ncor			(1023				An			f Inc			Actual Amount
Inc	(1) had of the (2) generated report reports of the another the another the another the (1) and the (1)	a value exceeding \$1,000 at the close the reporting period; and/or the erated over \$200 in income during the period.  The priod by the trade or business. Publicly traded		11 - \$15,000			\$250,001 - \$500,000		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	dends	ţ	interest	Capital Gains	Excepted investment Fund	Excepted Trust	Oualified Blind Trust	Other (Specify Type)	None (or less than \$201)	₩	\$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	Only if "Other" Specified
as:	sets held l	by a non-public entity may be listed on Part	ş	\$1,001 -	6E0 001	\$10°	\$250	<b>8</b> 20	Ŏ O	0.15	\$5,0	\$25	Š	Divide	Rent	2	Cap	370	Exc	8		O1	\$201	5	\$2,					-	क ठि	
		JP Computers, Wash., D.C. (Computer Sales)		- 199			E		MF					×		Ξ,	(Al	ИP	LE				x						PL		+	
S. DC or J	Example:	Undeveloped land in Dubuque, Iowa				×		E	KΑ	M P	LE		4						-			*			E	<u>:((:</u>	MI	24	E	-	-	
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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 here.

\*\*\* 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 IIIB. NON-PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

Page 5

BLOCK A	1	BLOCK B	BLOCK C						
OWNER	IDENTITY OF ASSET	VALUE OF ASSET	TYPE OF INCOME	AMOUNT OF INCOME					
Spouse	State Farm Life Insurance Policy	Less than \$1,000	Interest	Less than \$201					
Self	⅓ interest in 500 acres of farmland (subject to life estate) in Wilcox County, Alabama	\$250,001-\$500,000	None	None					
Self	½ interest in 10 acres of timberland at Bladon Springs, Choctaw County, Alabama	\$1,001-15,000	None	None					
Self	40 acres of timberland Choctaw County, Alabama	\$50,001-\$100,000	None	None					
Self	1/4 interest in house and 13 acres of timberland in Hybart, Monroe County, Alabama	\$1,001-15,000	None	None					

														Page	Number
PART IV. TRANSACTIONS															
Senator Jeff Sessions														16	
Report any purchase, sale, or exc	change by you, your spouse, or dependent child (see							A	mou	nt of	Trans	Saction		***** •	8
page 3, Part B of the 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					Data	8	98	900'0	20,000	90,00	000'000'	1.00	\$5,000,000		- \$50,000,0
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.		Purchase Sale Exchange		Date (Mo., Day, Yr.)		11,001 - \$15,000	\$15,001 - \$50,000	900,001 - 1100,000	\$100,001 - \$250,000	m/1983 - 140'0578	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000		\$25,000,001 - \$50,000,000 Crew \$40,000,000
S	Identification of Assets	-	Sale	ă		=		32	55		¤ XAI	***********	18	**	3 0
Example: IBM Corp. (stock) NYSE EXA	MPLE	×			2/1/9X		X			-	KAN		<u>-</u>	-	
DC-Merrill Lynch Gro	owth Fund Cl D		X		9/11/98	x	-	-		-					
<sup>2</sup> DC-Merrill Lynch Fed	deral SEC Tr Cl B		х		3/5/98	x		-							
JTWROS Town & Count	cry Bank (Camden, AL) /Close Checking	х			8/20/98		х_	-		<u> </u>					
JTWROS Town & Count w/APS* -Purchase CD/	cry Bank (Camden, AL)	x			8/20/98		x_			<u> </u>					
Merrill Lynch Cor	cp Bond														
5 DC-Investment Grade	Mutual Fund	×		-	9/11/98	X		+	-	+	+	$\Box$		$\dashv$	
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**EXEMPTION TEST** (see instructions before marking box): If you omitted any transaction because it meets the three-part test for exemption described in the Instructions, please check here.

\*\*\* 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 Individ	ual's Name	
Senator	Jeff	Sessions

# **PART V. GIFTS**

Page Numbe

Report the source, brief description and value of all gifts aggregating more than \$250 in value received by you, your spouse, or your dependent child (see page 3, Part B of the Instructions), from each source. Gifts with a value of \$100 or less need not be aggregated towards the disclosure threshold. "Gift" is defined in the Instructions.

**Exclude:** (1) Bequests and other forms of inheritance; (2) Suitable mementos of a function honoring the reporting individual; (3) Political campaign contributions; (4) Communications to your offices including subscriptions to newspapers and periodicals; (5) Consumable products provided by home state businesses to your offices, if those products are intended for consumption by persons other than yourself; (6) Gifts received prior to your Federal employment; (7) Gifts to your spouse or dependent child totally independent of his or her relationship to you; (8) Gifts from relatives; (9) Personal hospitality of any individual (see Instructions); (10) Meals and beverages unless consumed in connection with a gift of overnight lodging; and (11) Food, lodging, transportation, and entertainment provided by a foreign government within a foreign country, or by federal, state, D.C., or local governments.

Name of Source			Address of Source Dates and Brief Description					
xample:	Mr. John Q. Smith	EXAMPLE	Anytown, VA	EXAMPLE	August 12, 199X, Silver platter—Ethics Committee waiver granted	EXAMPLE \$400		
No	ne							
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Note: Most gifts in excess of \$49.99 are prohibited by the Senate Gifts Rule.

8\_

Page Numbe

Report necessary travel related expenses from each source aggregating more than \$250 in value during the reporting period received by you, your spouse and/or dependent child in connection with your provision of services at a speaking engagement, fact-finding event, or other event. Disclosure is required regardless of whether those expenses were **reimbursed** to the individual or **paid directly** by the sponsoring organization. A description of the itinerary, including date(s) and the nature of expenses is required. If you are reimbursed for more than one trip from the same sponsor (and the trips added together are worth more than \$250), then you must report each trip individually, even if the reimbursement for each separate trip does not equal more than \$250. Report Gifts of travel in Part V.

**Exclude:** Travel related expenses provided by federal, state, D.C., and local governments; or by a foreign government; reimbursements from campaign funds which are reported to the FEC; reimbursements to a spouse or dependent child totally independent of his or her relationship to you; and reimbursements reported to the Office of Public Records pursuant to Senate Rule 35. For further information, see Instructions.

	Name of Source Address of Source			Dates and Brief Description					
Ex	ample:	All States Company	EXAMP	LE	Maintown, TX	EXAMP	Roundtrip air travel from Washington, D.C. to Maintown, TX and lunch for self and spouse for speaking engagement: May 1, 199X		
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l	Reporting Individual's Name  PART VII. LIABILITIES  Senator Jeff Sessions																			
2									_		Cate	MOTV O	f Amou	int of V	/alue (x)					
Report liabilities over \$10,000 owed by you, your spouse, or dependent child (see page 3, Part B of the Instructions), to any one creditor at any time during the reporting period. Check the highest amount owed during the reporting period. <b>Exclude:</b> (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	Interest	Term if	\$10,001 - \$15,000			\$100,001 - \$250,000	22		51,000,000 - 15,000,000		Over \$50,000,000			
H	Name of C			dress of Creditor	Type of Liability	incurred	Rate		\$10,00	88,812	\$20,00	STOR D	o'nex	Over \$			Š			
S	First D	District Bank	Washingto	n, D.C. EXAMPLE	Mortgage on undeveloped land EXAMPLE	1951	13%	25yrs.			х			AMI			1			
S DO or J	Example: John J		<u> </u>	n, D.C. EXAMPLE	Promissory note <b>EXAMPLE</b>	1989	10%	on demand					x	EXA	MP	<u>- E</u>				
1	None.	The stu	dent	loan previou	sly listed was to a child												1-			
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**EXEMPTION TEST** (see instructions before marking box): If you omitted any liability because it meets the three-part test for exemption described in the Instructions, please check here.

"This category applies only if the obligation was solely that of the spouse or dependent child. If the obligation was the filer's or a joint obligation with the spouse or dependent child, use the other categories, as appropriate.

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Reporting	Individual's	Name

# 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.

	Name of Organization	Address of Organization	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)
	·Nat'l Assn. of Rock Collectors	NY, NY EXAMPLE	Non-profit education <b>EXAMPLE</b>	President <b>EXAMPLE</b>	6/90	Present
Example:	Jones & Smith	Hometown, USA <b>EXAMPLE</b>	Law firm <b>EXAMPLE</b>	Partner <b>EXAMPLE</b>	7/85	11/9X
1Hun	tingdon College	Montgomery, AL	Non-Profit University	Board of Trustee	s 5/95	Present
	ford University	Birmingham, AL	Non-Profit University	Board of Oversee	rs 10/97	Present
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Compensation in excess of \$200 from any position must be reported in Part II.



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Report your agreements or arrangements for future employment (including agreements with a publisher for writing a book), leaves of absence, continuation of payment by a former employer (including severance payments), or continuing participation in an employee benefit plan. See Instructions regarding the reporting of negotiations for any of these arrangements or benefits.

	Status and Terms of any Agreement or Arrangement	Parties	Date
Exa	Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on services performed through 11/9X and retained pension benefits (diversified, independently managed, fully funded, defined contribution plan)	Jones & Smith, Hometown, USA <b>EXAMPLE</b>	1/83
1	None		
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PART X. COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

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#### FIRST TIME FILERS ONLY:

Report sources of compensation received by you or your business affiliation for services provided directly by you during the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any non-profit organization when you directly provided the services to the clients and/or customers of the firm that generated a fee or payment of more than \$5,000. You need not report the U.S. Government as a source.

		Name of Source	Address of Source		Brief Description of Duties
<u> </u>		Jones & Smith	EXAMPLE Hometown, TX EXAMPLE Moneytown, USA	EXAN	AMPLE Legal services  AMPLE Legal services in connection with university construction
Exa	mple:	Metro University (client of Jones & Smith)	EXAMPLE Moneytown, USA EXAM		Legal services in connection with university construction
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