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FILER INFORMATION

Name:	Hon. Steve Womack
Status:	Member
State/District:	AR03

FILING INFORMATION

Filing Type:	Annual Report
Filing Year:	2020
Filing Date:	07/16/2021

Schedule A: Assets and "Unearned" Income

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Arkansas Public Employee Retirement System- Cash Account [PE]	SP	\$50,001 - \$100,000	Tax-Deferred		
Arvest Bank Accounts [BA]	JT	\$1,001 - \$15,000	Interest	\$201 - \$1,000	
Kansas City Life Insurance Universal Life [WU]		\$1,001 - \$15,000	Interest	\$201 - \$1,000	
Kansas City Life Insurance Universal Life [WU]	DC	\$1,001 - \$15,000	Interest	\$201 - \$1,000	
Pulaski Tech College [GS] Description: Inheritance from family death.	JT	\$50,001 - \$100,000	Interest	\$2,501 - \$5,000	
Rental Property [RP]	JT	\$100,001 - \$250,000	Rent	\$5,001 - \$15,000	Γ
State of Arkansas [PE]		Undetermined	None		
DESCRIPTION: Value will be determined at retirement.					

Asset	Owner	Value of Asset	Income Type(s)	Income	Tx. > \$1,000?
Stephens Inc. Money Market [BA] DESCRIPTION: Inheritance from family death.	SP	\$1,001 - \$15,000	Dividends	\$1 - \$200	Γ
U.S. Savings Bonds [GS]	DC	\$1,001 - \$15,000	Interest	\$1 - \$200	

* For the complete list of asset type abbreviations, please visit <u>https://fd.house.gov/reference/asset-type-codes.aspx</u>.

SCHEDULE B: TRANSACTIONS

None disclosed.

SCHEDULE C: EARNED INCOME

Source	Туре	Amount
Retirement Account	Spouse Salary	N/A

Schedule D: Liabilities

Owner	Creditor	Date Incurred	Туре	Amount of Liability
JT	Wells Fargo	June 2013	Mortgage on Secondary Residence	\$250,001 - \$500,000
JT	DBA Citizens Bank	March 2018	Mortgage on Primary Residence	\$250,001 - \$500,000
JT	First Western Bank	March 2018	Land for Primary Residence	\$15,001 - \$50,000
JT	Signature Bank	September 2019	Mortgage	\$100,001 - \$250,000

SCHEDULE E: POSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

Date	Parties To	Terms of Agreement
January 1999	Arkansas Public Employees Retirement System	Pension Annuity- Mayor of Rogers, AR

SCHEDULE G: GIFTS

None disclosed.

SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS

None disclosed.

SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

IPO: Did you purchase any shares that were allocated as a part of an Initial Public Offering?

Trusts: Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

Exemption: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?

€ Yes € No

CERTIFICATION AND SIGNATURE

I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

Digitally Signed: Hon. Steve Womack, 07/16/2021