

# Jack CONWAY

FOR UNITED STATES SENATE

SECRETARY OF THE SENATE  
10 AUG 19 AM 11:18

August 12, 2010

Secretary of the Senate  
Office of Public Records  
Room 232, Hart Senate Office Building  
United States Senate  
Washington, DC 20510

SECRETARY OF THE SENATE  
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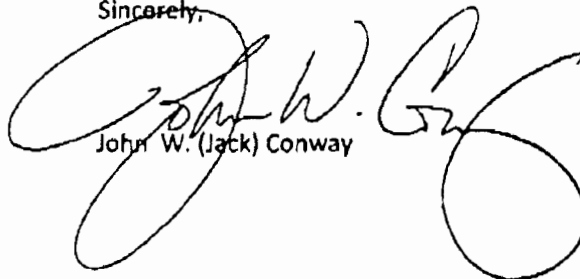
RE: Personal Financial Disclosure—2010

Dear Secretary:

Enclosed please find my 2010 Senate Financial Disclosure Report, due August 13 per the enclosed extension.

Please contact me if you have any questions.

Sincerely,



John W. (Jack) Conway

Encl.

00000492320

WWW.JACKCONWAY.ORG

P.O. BOX 6168 • LOUISVILLE, KY 40206 • 502.632.1820

Paid for by Conway for Senate

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# UNITED STATES SENATE FINANCIAL DISCLOSURE REPORT FOR NEW EMPLOYEE AND CANDIDATE REPORTS

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Last Name <b>Conway</b>	First Name and Middle (initial) <b>John W.</b>	New Employee Report Date of Employment (mandatory):	Senate Office / Agency in Which Employed
Senate/Candidate Office Address (Number, Street, City, State, and ZIP)		Senate/Candidate Office Telephone No.	State in which you are a candidate
<b>PO Box 6168, Louisville, KY 40206</b>		<b>502-632-1821</b>	<b>KY</b>
Candidate Report Commencement of Candidacy (mandatory):			
<b>4/13/09</b>			

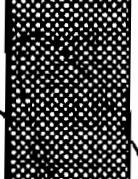
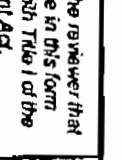
## AFTER READING THE INSTRUCTIONS - ANSWER EACH OF THESE QUESTIONS

	YES	NO		YES	NO
Did you or your spouse have earned income (e.g., salaries or fees) or non-investment income of more than \$200 from any reportable source in the reporting period? If Yes, Complete and Attach PART II.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Did you hold any reportable positions during the reporting period? If Yes, Complete and Attach PART VIII.	<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? If Yes, Complete and Attach PART IIIA and/or IIIB.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Did you have any reportable agreement or arrangement with an outside entity on the filing date? If Yes, Complete and Attach PART IX.	<input checked="" type="checkbox"/>	<input 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 receive compensation of more than \$5,000 from a single source in the two prior years? If Yes, Complete and Attach PART X.	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

**File this report and any amendments with the Secretary of the Senate, Office of Public Records, Room 232, Hart Senate Office Building, U.S. Senate, Washington, DC 20510. \$200 Penalty for filing more than 30 days after due date.**

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The statement will be made available by the Office of the Secretary of the Senate to any requesting person upon written application and will be reviewed by the Select Committee on Ethics. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions. (See 5 U.S.C. app. 4, 104, and 18 U.S.C. 1001.)

Certification I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief!	Signature of Reporting Individual 	Date (Month, Day, Year) <b>8-12-10</b>
For Official Use Only - Do Not Write Below This Line Signature of Reviewing Official 	Date (Month, Day, Year)	FOR OFFICIAL USE ONLY Do Not Write Below this Line 10 AUG 19 AM 11:18 SECRETARY OF THE SENATE

**PART II. EARNED AND NON-INVESTMENT INCOME**

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 p.3, CONTENTS OF REPORTS Part B of 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.

1	Name of Income Source	Address (City, State)	Type of Income		Amount
			Example	Example	
Example:	JP Computers	Wash, DC	Salary	Example	\$15,000
	MCI (Spouse)	Arlington, VA	Salary	Example	Over \$1,000
1	Commonwealth of Kentucky (2009) (salary minus 10% voluntary reduction)	Frankfort, KY	salary+taxable vehicle value		\$100,038.40
2	Commonwealth of Kentucky (2010)	Frankfort, KY	salary to date		\$72,360.32
3	Brown- Forman Corp. (spouse)	Louisville, KY	Salary		Amt not required
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Reporting Individual's Name

John W. Conway

**PART VII. LIABILITIES**

Page Number

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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; (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			Term if Applicable			Category of Amount of Value (x)														
			1991	1999	1997	1991	1999	1997	On dmd	On dmd	On dmd	\$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 (J) John Jones	Wash, DC Wash, DC	Mortgage on undeveloped land Promissory Note	1991	1999	1997	13%	10%	1.5%+	25yrs On dmd	On dmd	On dmd				X	X	E	E	X	A	A	M	P	L	L	E
1 Hilliard Lyons	Louisville, KY	Margin Account			4/09																	X				
2																										
3																										
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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 was held independently by the spouse or dependent child. If the asset was either held by the filer or jointly held, use the other categories of value, as appropriate.

**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.

Example:	Name of Organization	Address (City, State)		Type of Organization	Position Held	From (Mo/Yr)	To (Mo/Yr)
		NY, NY	EXAMPLE				
	1 Commonwealth of Kentucky	Frankfort, KY		State Government	Attorney General	1/08	present
	2 Jack Conway PLLC	Louisville, KY		Law Firm	Member	3/03	2/08
	3 BCRS Partners	Louisville, KY		Partnership	Partner	7/87	present
	4 Conway Insurance Trust	Louisville, KY		Trust	Trustee	1/98	present
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Compensation in excess of \$200 from any position must be reported in Part II.

**PART IX. AGREEMENTS OR ARRANGEMENTS**

Report your agreements or arrangements for future employment (including agreements with a publisher for writing a book or sale of other intellectual property), 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
<p><i>Example:</i> Pursuant to partnership agreement, will receive lump sum payment of capital account &amp; partnership share calculated on services performed through 1/0X and retained pension benefits (diversified, independently managed, fully funded, defined contribution plan)</p> <p>Employment agreement with XYZ Co. to become Vice President of Government Relations. Terms of agreement include salary between \$50,001-\$100,000, signing bonus between \$2,501-\$5,000 and stock options</p>	<p>Jones &amp; Smith, Homelawn, USA <b>Example</b></p> <p>XYZ Co., Bethesda, MD <b>Example</b></p>	<p>1/93</p> <p>1/0X</p>
<p>1 Reasonable attorney fee from pending Kentucky Supreme Court case for work performed prior to 1-7-08 consistent with Kentucky Bar Association ethics opinion letter dated 12-19-07</p>	<p>Beglin v. UMC et al.</p>	<p>12/07</p>
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# Jack CONWAY

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August 12, 2010

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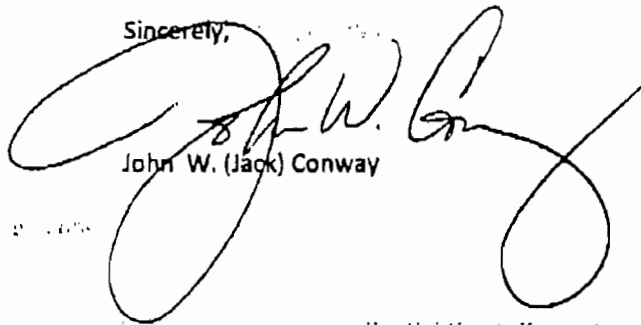
RE: Personal Financial Disclosure Amendments

Dear Secretary:

Enclosed please find amended Part IIIA, page 2a, of my initial Personal Financial Disclosure filed in 2009. While preparing my 2010 disclosure I determined that I had inadvertently checked the "capital gains" box on line 2, when it should have been the "dividend" box with the corresponding amount of income. Additionally, I wanted to clarify that the stock activity reported on line 8 was for calendar year 2008.

Please contact me if you have any questions.

Sincerely,



John W. (Jack) Conway

Encl.

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