

INSIDE MAIL

UNITED STATES HOUSE OF REPRESENTATIVES  
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2007

FORM A

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For use by Members, officers, and employees

James H.S. ("Jim") Cooper  
(Full Name)

202-225-4311  
(Daytime Telephone)

(Office Use Only)

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<b>Filer Status</b>	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: TN District: 5	<input type="checkbox"/> Officer Or Employee	Employing Office:	<b>A \$200 penalty shall be assessed against anyone who files more than 30 days late.</b>
<b>Report Type</b>	<input type="checkbox"/> Annual (May 15)	<input checked="" type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Termination Date:	

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? <b>If yes, complete and attach Schedule I.</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$305 and not otherwise exempt)? <b>If yes, complete and attach Schedule VI.</b>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II. 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? <b>If yes, complete and attach Schedule II.</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$305 from one source)? <b>If yes, complete and attach Schedule VII.</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? <b>If yes, complete and attach Schedule III.</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? <b>If yes, complete and attach Schedule VIII.</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? <b>If yes, complete and attach Schedule IV.</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? <b>If yes, complete and attach Schedule IX.</b>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? <b>If yes, complete and attach Schedule V.</b>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	<b>Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.</b>	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

<b>Trusts-</b>	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct 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?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Exemptions-</b>	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 <input type="checkbox"/> No <input checked="" type="checkbox"/>

# SCHEDULE I - EARNED INCOME

Name James H.S. ("Jim") Cooper

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount
Owen School of Management, Vanderbilt University, Adjunct Professor	Approved Teaching Fee	\$22,500

**SCHEDULE II - PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA**

Name James H. S. ("Jim") Cooper

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List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. A green envelope for transmitting the list is included in each Member's filing package. Employees may request a green envelope from the Clerk or use a plain envelope that is appropriately labeled.

Source	Activity	Date	Amount
American Bar Association, Edward R. Finch Award for Best Law Day Speech	Speech	Feb. 14, 2007	\$1,000 to Girl Scout Council of Cumberland Valley

**SCHEDULE III - ASSETS AND "UNEARNED" INCOME**

Name James H.S. ("Jim"), Cooper

BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
<p>Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other assets or sources of income which generated more than \$200 in "unearned" income during the year. For rental property or land, provide a complete address. Provide full names of stocks and mutual funds (do not use ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) that are self directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value and income information on each asset in the account that exceeds the reporting threshold. For retirement plans that are not self-directed, name the institution holding the account and its value at the end of the reporting period. For an active business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. For additional information, see the instruction booklet.</p> <p>Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent or sibling; any deposits totaling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.</p> <p>If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.</p>	<p>at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."</p>	<p>Check all columns that apply. Check "None" if asset did not generate any income during the calendar year. If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)</p>	<p>For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income. Check "None" if no income was earned.</p>	<p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
<p>2319 Woodmont Blvd., Nashville, TN (vacant lot of 1.5+ acres adjoining home). Address changed from 2317B to 2319 in order to make lot more saleable in future.</p>	<p>\$500,001 - \$1,000,000</p>	<p>None</p>	<p>NONE</p>	<p>Other (Insurance Proceeds)</p>
<p>Adam's Properties, Gulfport, MS, 1504 Beach Drive, vacant lot</p>	<p>\$100,001 - \$250,000</p>	<p>CAPITAL GAINS</p>	<p>\$15,001 - \$50,000</p>	<p>Other (Insurance Proceeds)</p>
<p>Assistive Technology Company stock, wheelchair distribution, Naperville, IL</p>	<p>\$100,001 - \$250,000</p>	<p>None</p>	<p>NONE</p>	
<p>ATT stock</p>	<p>\$1,001 - \$15,000</p>	<p>DIVIDENDS</p>	<p>\$1 - \$200</p>	

**SCHEDULE III - ASSETS AND "UNEARNED" INCOME**

Name James H.S. ("Jim") Cooper

Berkshire Hathaway stock	\$100,001 - \$250,000	None	NONE	
Centennial Money Market Shares	\$250,001 - \$500,000	INTEREST	\$15,001 - \$50,000	
Centennial Tax Exempt Trust	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
Coca Cola stock	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
Comcast A stock	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
Congressional Credit Union checking and savings accounts	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
Cooper Bros. Partnership, farm land and lots, Shelbyville, TN and Smith Mills, KY, and Nashville, TN (see attached schedule for details)	\$500,001 - \$1,000,000	Partnership Income	\$100,001 - \$1,000,000	
Discovery Fund, L.P.	\$1 - \$1,000	CAPITAL GAINS	\$15,001 - \$50,000	S(part)
DNP (Duff & Phelps) Select Income Shares	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
Essent Health Care stock, hospital company, Nashville, TN	\$50,001 - \$100,000	None	NONE	
Federated GNMA shares	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
Fidelity Contrafund shares	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	
Fidelity Growth and Income shares	\$15,001 - \$50,000	DIVIDENDS	\$2,501 - \$5,000	

**SCHEDULE III - ASSETS AND "UNEARNED" INCOME**

Name James H.S. ("Jim") Cooper

Fidelity Municipal Money Market shares	\$15,001 - \$50,000	INTEREST	\$1,001 - \$2,500
Fifth Third Bank stock	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500
General Electric stock	\$50,001 - \$100,000	DIVIDENDS	\$2,501 - \$5,000
Harrilton Fairfax, LLC, Nashville, TN, 2106 Fairfax, apartment building	\$100,001 - \$250,000	Partnership Income	\$5,001 - \$15,000
Harpeth Green Properties, LLC, Brentwood, TN, Heritage Retirement Facilities, LLC, and Heritage Health Center LLC, Heritage Way	\$100,001 - \$250,000	None	NONE
Hewlett Packard stock	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200
IBM stock	\$50,001 - \$100,000	DIVIDENDS	\$201 - \$1,000
Ijinc Communications (formerly EDT Learning Co.)	\$1,001 - \$15,000	None	NONE
Intel stock	\$50,001 - \$100,000	DIVIDENDS	\$1,001 - \$2,500
Lennox International stock	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000
Microsoft stock	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200
Nortel stock	\$1,001 - \$15,000	None	NONE
Northern Trust Inst. Gov. Portfolio	\$100,001 - \$250,000	INTEREST	\$5,001 - \$15,000

**SCHEDULE III - ASSETS AND "UNEARNED" INCOME**

Name James H.S. ("Jim") Cooper

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Phoenix Companies stock	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
PLC Properties, LLC, Brentwood, TN, Virginia Way, undeveloped land, and Orinda, TN, 5557 Hwy 31 West, warehouse	\$500,001 - \$1,000,000	Partnership Income	\$15,001 - \$50,000	
Procter and Gamble stock	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
Qualcomm stock	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
Small Town Cable Partners, cable TV company, Brentwood, TN	None	None	NONE	
SunTrust Bank checking account	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
SunTrust Bank stock	\$100,001 - \$250,000	CAPITAL GAINS	\$2,501 - \$5,000	
Thoma Cressey Friends Funds VI and VII, venture capital funds, Chicago, IL	\$100,001 - \$250,000	CAPITAL GAINS	\$15,001 - \$50,000	PS(part)
TIAA Traditional -CREF Stock: Smithsonian Institution Defined Contribution Retirement Plan	\$15,001 - \$50,000	INTEREST/CAPITAL GAINS	\$1,001 - \$2,500	
Wachovia stock	\$15,001 - \$50,000	CAPITAL GAINS	\$1,001 - \$2,500	

**SCHEDULE IV - TRANSACTIONS**

Name James H.S. ("Jim") Cooper

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Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded \$1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. Provide a brief

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
	Adam's Properties, Gulfport, MS, 1504 Beach Drive, vacant lot	Other	Mar. 22, 2007	\$15,001 - \$50,000
	Thoma Cresseey Friends Funds VI and VII, venture capital funds, Chicago, IL	PS(part)	Various dates	\$15,001 - \$50,000
	Discovery Fund, L.P.	S(part)	Oct. 15, 2007	\$15,001 - \$50,000
	Centennial Money Market	P	Various dates	\$15,001 - \$50,000
	Northern Trust Inst. Gov. Portfolio	P	Various dates	\$15,001 - \$50,000
	Centennial Tax Exempt Trust	P	Various dates	\$1,001 - \$15,000

**SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS**

Name James H.S. ("Jim") Cooper

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$305 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
Alliance for Health Policy Reform	Jan. 12-14	Nashville-Miami-Nashville	Y	Y	N	None
Center for Democracy in the Americas	Mar. 15-19	DC-Miami-Havana-Miami-DC	Y	Y	N	None
Interoptimability in Human Services Conference at Yale School of Management	Oct. 30-31	No travel expenses; Registration fee covered by Annie E. Casey Foundation	N	Y	N	None
Fresh Thinking Project at Stanford University	Nov. 29-30	Nashville-San Francisco-Nashville	Y	Y	N	1 day

**SCHEDULE VIII - POSITIONS**

Name James H.S. ("Jim") Cooper

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member	PLC Properties LLC
Member	Hamilton Fairfax LLC
Partner	Cooper Bros. Land Company
Limited Partner	Thoma Cressey Friends Funds VI and VII, L.P.
Limited Partner	Small Town Communications Partners I, L.P.
Limited Partner	The Discovery Fund, L.P.
Member	Harpeth Green Properties, LLC
Director	Health Care Solutions Group Advisory Board, Center for Better Health, Vanderbilt University (a non-profit think tank)
Adjunct Professor	Owen School of Management, Vanderbilt University