



STATE OF ALABAMA
OFFICE OF THE ATTORNEY GENERAL

LUTHER STRANGE
ATTORNEY GENERAL

501 WASHINGTON AVENUE
P.O. BOX 300152
MONTGOMERY, AL 36130-0152
(334) 242-7300
WWW.AGO.STATE.AL.US

January 4, 2013

2013-0002
Extraordinary Filing

BY HAND DELIVERY

Mr. Hugh Evans
Chief Counsel
Alabama Ethics Commission
100 North Union Street, Suite 104
Montgomery, AL 36104

Dear Hugh:

Attached please find my Statement of Economic Interests for 2010 and my amendments to my Statement of Economic Interests for 2011.

Sincerely,

Luther Strange
Attorney General

LS:mmm
Attachments



This Form May Be Completed On-line at www.ethics.alabama.gov

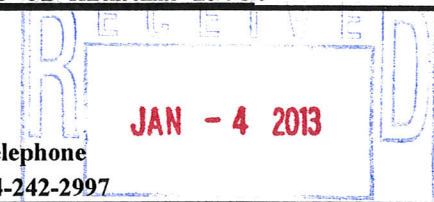
| | | | | | | | |
|-------------------------------------|---|-----|----|---------------|------|--------|-------|
| <input checked="" type="checkbox"/> | CANDIDATE | YES | NO | FOR OFFICE IN | CITY | COUNTY | STATE |
| (Year) | If you are a candidate, complete this section and see last page of instructions. If you are not a candidate, check "no" and continue. | | | | | | |

2010

STATEMENT OF ECONOMIC INTERESTS

FOR ~~2012~~ CALENDAR YEAR - TO BE FILED NO LATER THAN April 30, 2013, EXCEPT FOR CANDIDATES, who must file simultaneously with their qualifying forms as required by Section 36-25-15, Code of Alabama 1975.

| Alabama Ethics Commission | | |
|--|---|--------------|
| Street Address | Mailing Address | Telephone |
| 100 North Union Street, Suite 104 (RSA Union Building) Montgomery, Alabama 36104 | P. O. Box 302300 Montgomery, AL 36130-2300 | 334-242-2997 |



PLEASE READ INSTRUCTIONS BEFORE ATTEMPTING TO COMPLETE FORM.

01. Full Name, Home Address, and Telephone Number(s) of Filing Person:

| | | | | | | |
|---|---------|------------|----------|------------|----------|------------------|
| Strange | Luther | J. | III | | | |
| (Last) | (First) | (Middle) | (Suffix) | (Nickname) | | |
| 3210 East Briarcliff Road Birmingham AL 35223 Jefferson, (205) 218-4379 | | | | | | |
| (Street) | (Route) | (P.O. Box) | (City) | (Zip) | (County) | (Business Phone) |

IF name changed within past year, please indicate former name:

NAME: _____

(Last) (First) (Middle)

PLEASE FILL IN THE BLANKS OR CIRCLE THE CORRECT WORD(S) OR NUMBER(S) AS APPROPRIATE

- 02. Last year, I was an (elected official) (appointed official) (employee) with the (Municipality) (County) (State) and the name and address of my(department)(office)(agency)(college)(county)(municipality)(commission)was Candidate for Attorney General and Attorney General-Elect, P. O. Box 3196, Montgomery, AL 36109
- 02.1 As an elected/appointed official/employee last year, my job title/position was Attorney General-Elect
- 02.2 Last year, the name(s) of the (State) (County) (Municipal) Board(s), Commission(s), Committee(s), Authority(ies), Council(s), etc. of which I was a Member was(were) None
- 02.3 Last year in the above public position(s) in 02. thru 02.2 I earned: (\$0-\$1,000) (\$1,000-\$10,000) (More than \$10,000).
- 03. I am a candidate for the (State)(County) or (Municipal) Office of Attorney General

04. **Other than my public position(s) in 02. thru 02.2, my and/or my spouse's occupation(s) or business(es) last year to which 1/3 or more of working time** was spent (including self-employment) was (were) The Law Firm of Strange LLC.

04.1 The **name** and **address** of my employer, listed in 04. above, **last year** was N/A

04.2 I was self-employed last year and the **name** and **address** of my business **last year** was The Law Firm of Strange LLC, P. O. Box 59562, Homewood, AL 35259

04.3 Information on Family Members: SPOUSE'S Name, address, and business or employer
Melissa B. Strange, 3210 E. Briarcliff Road, Birmingham, AL 35223
DEPENDENT CHILDREN Name, address, and any employment Keehn Strange, 3210 E. Briarcliff Road, Birmingham, AL 35223

Names Only of LIVING ADULT CHILDREN
Luther J. Strange, IV

Names Only of LIVING PARENTS
None

Names Only of LIVING SISTERS/BROTHERS
Dr. Elizabeth S. Simpson

Names Only of LIVING PARENTS OF SPOUSE
None

05. **Last year, from the occupations or businesses listed in 04., I, my spouse and dependents earned an aggregate of:**

| | | |
|---------------|--------------------|------------------------------|
| (\$0-\$1,000) | (\$1,000-\$10,000) | <u>(More than \$10,000).</u> |
|---------------|--------------------|------------------------------|

05.1. **Last year, (I) (My spouse) (dependents) owned 5% or more of the stock in the firm(s) listed in 04.1, 04.2**

05.2 **Last year, (I) (My spouse) was a consultant and earned more than \$1,000 from each firm listed in 04.1, 04.2**

05.3 **Last year, (I) (My spouse) served as an (Officer) (Director) (Trustee) of the firm(s) listed in 04.1, 04.2 sole member of law firm of Strange LLC.**

06. OTHER INCOME INFORMATION ON YOU, YOUR SPOUSE AND DEPENDENT CHILDREN

| List total combined household income, in addition to what is listed in 02.3 thru 05., the names of each business income is derived from, and the income from each business. | Write in type of Income Received: Salaries, Fees, Dividends, Profits, Commissions, Other Compensation (including interest on bank accounts) | Check Appropriate Box | | | | | |
|---|--|--|---------------------|----------------------|-----------------------|------------------------|---------------------|
| | | Less than \$1,000 | \$1,000 to \$10,000 | \$10,000 to \$50,000 | \$50,000 to \$150,000 | \$150,000 to \$250,000 | More than \$250,000 |
| 06.1 See attached | | | | | | | |
| 06.2 Schedule | | | | | | | |
| 06.3 | | | | | | | |
| 06.4 Last year did you earn more than \$5,000 as an: (Circle the applicable one and explain, if necessary.) | Officer | Director | Trustee | Consultant | <u>N/A</u> | | |
| 06.5 Last year did you earn more than \$1,000 but less than \$5,000 as an: (Circle the applicable one and explain, if necessary.) | Officer | Director | Trustee | Consultant | <u>N/A</u> | | |
| 06.6 Last year, did YOU, YOUR SPOUSE or DEPENDENTS serve as: (Circle the applicable one and explain, if necessary.) | Officer | <u>Director</u> Oakworth Capital Bank | Trustee | Consultant | N/A | | |
| 06.7 Name any business or subsidiary thereof in which you, your spouse, or dependents, jointly or severally, owned 5% or more of the stock or in which you, your spouse or dependents served as an officer, director, trustee, or consultant where the service provides income of at least \$1,000 and less than \$5,000; or at least \$5,000 or more for the reporting period. | | | | | | | |
| N/A | | | | | | | |
| | | | | | | | |
| | | | | | | | |

SCHEDULE TO STATEMENT OF ECONOMIC INTERESTS
LUTHER J. STRANGE, III
CALENDAR YEAR 2010

PAGE 3, ITEM 6, OTHER INCOME INFORMATION ON YOU, YOUR SPOUSE AND DEPENDENT CHILDREN

| <u>COMBINED HOUSEHOLD INCOME</u> | <u>TYPE OF INCOME</u> | <u>LESS THAN \$1,000</u> | <u>\$1,000 TO \$10,000</u> | <u>\$10,000 TO \$50,000</u> | <u>\$50,000 TO \$150,000</u> | <u>\$150,000 TO \$250,000</u> | <u>MORE THAN \$250,000</u> |
|---|-----------------------|------------------------------|--------------------------------|---------------------------------|----------------------------------|-----------------------------------|--------------------------------|
| OAKWORTH CAPITAL BANK | INTEREST | X | | | | | |
| OAKWORTH CAPITAL BANK INVESTMENTS | INTEREST | X | | | | | |
| OAKWORTH CAPITAL BANK INVESTMENTS | DIVIDENDS | X | | | | | |
| OAKWORTH CAPITAL BANK INVESTMENTS | NET CAPITAL GAINS | X | | | | | |
| METLIFE | DIVIDENDS | X | | | | | |
| STATE OF ALABAMA | INCOME TAX REFUND | | X | | | | |
| STATE ST. RETIRMENT SERVICES | PENSION | | | | X | | |
| OAKWORTH CAPITAL BANK | IRA WITHDRAWAL | | X | | | | |
| NEEDLE RUSH POINT CONDO | RENTAL | | X | | | | |
| LINVILLE NC PROPERTY | RENTAL | | X | | | | |
| ARK REAL ESTATE OPPORTUNITY FUND I, LLC | PARTNERSHIP INCOME | X | | | | | |
| ARK REAL ESTATE STRATEGIES, LLC | PARTNERSHIP INCOME | X | | | | | |
| THE LAW FIRM OF STRANGE LLC | PROFIT DISTRIBUTION | | | | | | X |

07. REAL ESTATE HOLDINGS (Exclude your Homestead) (TO BE COMPLETED ONLY BY ELECTED OFFICIALS, APPOINTED OFFICIALS or CANDIDATES for State, County or Municipal Offices.)

07.1 Did YOU, YOUR SPOUSE OR DEPENDENTS own real estate for investment or revenue production last year?

 No X Yes

If yes, list each piece of real estate WHEREVER SITUATED separately below and provide the requested information.

07.2 Did YOU, YOUR SPOUSE, DEPENDENTS or A BUSINESS WITH WHICH YOU ARE ASSOCIATED receive any rent or lease income from any governmental agency in Alabama last year?

 X No Yes

If yes, specific details of the lease or rent agreement shall be filed with the Ethics Commission.

(CHECK APPROPRIATE BOXES and ADD ADDITIONAL SHEETS AS NECESSARY.)

| Location of Real Estate (City, County and State) | What is the fair market value? | | | | | What is the annual gross rent or lease income? | | |
|---|--------------------------------|--------------------------|---------------------------|---------------------------|------------------------|--|------------------------------------|---------------------|
| | Less than \$50,000 | \$50,000 to \$100,000 | \$100,000 to \$150,000 | \$150,000 to \$250,000 | More than \$250,000 | Less than \$10,000 | \$10,000 but less than \$50,000 | \$50,000 or more |
| Ashville St. Clair Co, AL | | X | | | | X | | |
| Linville Avery Co., NC | | | | | X | X | | |
| Perdido Key Escambia Co., FL | | | | X | | X | | |
| | | | | | | | | |
| | | | | | | | | |

08. INDEBTEDNESS INFORMATION: Report debts owed to all businesses operating in Alabama*as of December 31 of the reporting year, EXCEPT indebtedness associated with the (homestead) home in which you live. Include debts of YOUR SPOUSE and DEPENDENT CHILDREN. (*Doing business in Alabama, regardless of where their home office is located or where you mail your payment.)

Provide actual NUMBER and CHECK APPROPRIATE CATEGORY– it is not necessary to include name of card(s), business(es), account number(s), or actual amount owed. Check appropriate boxes below.

| TYPE | How <u>many</u> do you OWE? NUMBER | How <u>much</u> do you OWE? (Check box that relates to the combined total in each category) | | | | | |
|---|---------------------------------------|--|----------------------|-----------------------|------------------------|------------------------|---------------------|
| | | Less than \$25,000 | \$25,000 to \$50,000 | \$50,000 to \$100,000 | \$100,000 to \$150,000 | \$150,000 to \$250,000 | More than \$250,000 |
| 08.1 Banks (include Credit Cards) | 6 | X | | | | | |
| 08.2 Credit Unions and Savings and Loan Associations (include Credit Cards) | | | | | | | |
| 08.3 Insurance Companies | | | | | | | |
| 08.4 Mortgage Firms | | | | | | | |
| 08.5 Stockbrokers or Bond Firms | | | | | | | |
| 08.6 Individuals or other businesses (include store cards) | 3 | X | | | | | |

09. PROFESSIONAL OR CONSULTING SERVICES (To be completed if YOU or YOUR SPOUSE received income last year in return for professional or consulting activities, i.e. legal, accounting, medical or health-related, real estate, banking, insurance, educational, farming, engineering, architectural management, or other professional services or consultations, etc. State the number of clients and check appropriate boxes.)

Check if no income was received for Professional or Consulting Services for the categories of Clients shown below.

| Categories of Clients | Number of Clients | Annual Gross Income During Reporting Year | | | | | | | | Anticipated Annual Retainer Income | | |
|----------------------------|-------------------|---|---------------------|----------------------|----------------------|-----------------------|------------------------|------------------------|---------------------|------------------------------------|--------------------|-------------------|
| | | Less than \$1,000 | \$1,000 to \$10,000 | \$10,000 to \$25,000 | \$25,000 to \$50,000 | \$50,000 to \$100,000 | \$100,000 to \$150,000 | \$150,000 to \$250,000 | More than \$250,000 | Less than \$1,000 | \$1,000 to \$5,000 | More than \$5,000 |
| 09.1 UTILITIES | | | | | | | | | | | | |
| Electric | | | | | | | | | | | | |
| Gas | | | | | | | | | | | | |
| Telephone | | | | | | | | | | | | |
| Water | | | | | | | | | | | | |
| Cable Television Companies | | | | | | | | | | | | |
| 09.2 TRANSPORTATION | | | | | | | | | | | | |
| Intrastate Companies | | | | | | | | | | | | |
| Pipeline Companies | | | | | | | | | | | | |

| Categories of Clients | Number of Clients | Annual Gross Income During Reporting Year | | | | | | | | Anticipated Annual Retainer Income | | |
|-------------------------------------|-------------------|---|---------------------|----------------------|----------------------|-----------------------|------------------------|------------------------|---------------------|------------------------------------|--------------------|-------------------|
| | | Less than \$1,000 | \$1,000 to \$10,000 | \$10,000 to \$25,000 | \$25,000 to \$50,000 | \$50,000 to \$100,000 | \$100,000 to \$150,000 | \$150,000 to \$250,000 | More than \$250,000 | Less than \$1,000 | \$1,000 to \$5,000 | More than \$5,000 |
| Oil Exploration | | | | | | | | | | | | |
| Gas Exploration | | | | | | | | | | | | |
| Oil and Gas Retailers | | | | | | | | | | | | |
| 09.3 FINANCE & INSURANCE | | | | | | | | | | | | |
| Banks | | | | | | | | | | | | |
| Savings & Loan Associations | | | | | | | | | | | | |
| Loan and/or Finance Companies | | | | | | | | | | | | |
| Manufacturing Firms | | | | | | | | | | | | |
| Mining Companies | | | | | | | | | | | | |
| Life Insurance Companies | | | | | | | | | | | | |
| Casualty Insurance Companies | | | | | | | | | | | | |
| Other Insurance Companies | | | | | | | | | | | | |

| Categories of Clients | Number of Clients | Annual Gross Income During Reporting Year | | | | | | | | Anticipated Annual Retainer Income | | |
|---------------------------------------|-------------------|---|---------------------|----------------------|----------------------|-----------------------|------------------------|------------------------|---------------------|------------------------------------|--------------------|-------------------|
| | | Less than \$1,000 | \$1,000 to \$10,000 | \$10,000 to \$25,000 | \$25,000 to \$50,000 | \$50,000 to \$100,000 | \$100,000 to \$150,000 | \$150,000 to \$250,000 | More than \$250,000 | Less than \$1,000 | \$1,000 to \$5,000 | More than \$5,000 |
| Retail Companies | | | | | | | | | | | | |
| Beer Companies | | | | | | | | | | | | |
| Wine Companies | | | | | | | | | | | | |
| Liquor Companies | | | | | | | | | | | | |
| Beverage Distributors | | | | | | | | | | | | |
| 09.4 ASSOCIATIONS | | | | | | | | | | | | |
| Trade | | | | | | | | | | | | |
| Professional | | | | | | | | | | | | |
| Governmental | | | | | | | | | | | | |
| Public Employee | | | | | | | | | | | | |
| Public Official | | | | | | | | | | | | |
| 09.5 GOVERNMENT | | | | | | | | | | | | |
| State educational institution | 1 | | | | X | | | | | | | |
| County | | | | | | | | | | | | |
| Municipal | | | | | | | | | | | | |
| Other Government Corp. Or Authorities | | | | | | | | | | | | |
| 09.6 MISCELLANEOUS | 5 | | | | | | | X | | | | |

10. DECLARATION OF REPORTING PERSON

I have read and completed this Statement of Economic Interests, Form ASEC-1(Revised), and do swear (or affirm) that the information contained in said Statement of Economic Interests is true and correct. I fully understand that anyone who violates the disclosure provision of this Act shall be subject to a fine of \$10.00 a day not to exceed \$1,000 annually. I also understand that any attachments that I place with this form become a part of this public record.

SIGNED Luther Strange Date 1.4.13
(Signature of Reporting Person)

PLEASE PRINT/TYPE NAME OF PERSON SIGNING FORM Luther Strange

*****Forms received by FAX or Email will NOT be accepted.*****

**RETURN COMPLETED ORIGINAL SIGNED FORM TO:
Alabama Ethics Commission**

**STREET ADDRESS
RSA Union, Suite 104
100 North Union Street
Montgomery, AL 36104**

**MAILING ADDRESS
P.O. Box 302300
Montgomery, AL 36130-2300**

