

STATEMENT OF FINANCIAL INTEREST

State/District officials file with:
Cole Jester, Secretary of State
500 Woodlane Street
Little Rock, AR 72201
Phone (501) 682-5070
Fax (501) 682-3548

Calendar year covered 2024
(Note: Filing covers the previous calendar year)

For assistance in completing
this form contact:
Arkansas Ethics Commission
Phone (501) 324-9600
Toll Free (800) 422-7773

Is this an amendment? Yes No

Please provide complete information. If the information requested in a particular section does not apply to you, indicate such by noting "Not Applicable" in that section. Do not leave any part of this form blank. If additional space is needed, you may attach the information to this document. Do not file this form with the Arkansas Ethics Commission.

SECTION 1- NAME AND ADDRESS

Name Young Tommy L.
(Last) (First) (Middle)
Address 107 Young Street Tuckerman, Arkansas 72473
(Street or P.O. Box Number) (City) (State) (Zip Code)
Phone (870) 349-2267

Spouse's name Young Amy R.
(Last) (First) (Middle)

All names under which you and/or your spouse do business: Norman Young & Sons, Inc./Young's Mini Storage LLC/Young Bros. Land Co./Tuckerman Land Co./Southfork Development LLC/Young's Irrig. & Eqt.LLC/Generation three Ptshp./TB&J Holdings, LLC/The Store, Inc./Tommy & Nora Young Comm. Prop.

SECTION 2- REASON FOR FILING

- Public Official Jackson County Justice of the Peace, Position #2
(office held)
- Candidate _____
(office sought)
- District Judge _____
(name of district)
- City Attorney _____
(name of city)
- State Government: Agency Head/Department Director/Division Director _____
(name of agency/department/division)
- Chief of Staff or Chief Deputy _____
(name of Constitutional Officer, Senate, or House of Representatives)
- Public appointee to State Board or Commission Arkansas Corn & Grain Sorghum Promotion Board
(name of board/commission)
- School Board member _____
(name of school district)
- Candidate for school board _____
(name of school district)
- Public or Charter School Superintendent _____
(name of school district/school)
- Executive Director of Education Service Cooperative _____
(name of cooperative)
- Advertising and Promotion Commission member _____
(name of advertising and promotion commission)
- Research Park Authority Board member under A.C.A. § 14-144-201 et seq. _____
(name of research park authority board)

FILED

JAN 22 2025

**Arkansas
Secretary of State**

- Appointee to one of the following municipal, county or regional boards or commissions (list name of board or commission):
 - Planning board or commission _____
 - Airport board or commission _____
 - Water or Sewer board or commission _____
 - Utility board or commission _____
 - Civil Service commission _____

SECTION 3- SOURCE OF INCOME

List each employer and/or each other source of income from which you, your spouse, or any other person for the use or benefit of you or your spouse receives gross income amounting to more than \$1,000. (You are not required to disclose the individual items of income that constitute a portion of the gross income of the business or profession from which you or you spouse derives income. For example: accountants, attorneys, farmers, contractors, etc. do not have to list their individual clients.) If you receive gross income exceeding \$1,000 from at least one source, the answer "N/A" is not correct.

a) Check appropriate box: More than \$1,000 More than \$12,500

_____ (name of employer or source of income)

~~YOUNG BROS. LAND CO., INC.~~ (address) YOUNG BROS. LAND CO., INC.
107 YOUNG STREET
 (name under which income received) HERMAN, AR 72479

Provide a brief description of the nature of the services for which the compensation was received Stockholder Dist.

b) Check appropriate box: More than \$1,000 More than \$12,500

_____ (name of employer or source of income)

~~YOUNG BROS. LAND CO., INC.~~ (address) YOUNG BROS. LAND CO., INC.
107 YOUNG STREET
 (name under which income received) HERMAN, AR 72479

Provide a brief description of the nature of the services for which the compensation was received Stockholder Dist.

c) Check appropriate box: More than \$1,000 More than \$12,500

_____ (name of employer or source of income)

~~YOUNG BROS. LAND CO., INC.~~ (address) YOUNG BROS. LAND CO., INC.
107 YOUNG STREET
 (name under which income received) HERMAN, AR 72479

Provide a brief description of the nature of the services for which the compensation was received Stockholder Dist.

List each employer and/or each other source of income from which you, your spouse, or any other person for the use or benefit of you or your spouse receives gross income amounting to more than \$1,000. (You are not required to disclose the individual items of income that constitute a portion of the gross income of the business or profession from which you or your spouse derives income. For example: accountants, attorneys, farmers, contractors, etc. do not have to list their individual clients.) If you receive gross income exceeding \$1,000 from at least one source, the answer N/A is not correct.

e) Check appropriate box: More than \$1,000 More than \$12,500

[REDACTED] (name of employer or source of income)
[REDACTED] (address)
[REDACTED] (name under which income received)

Provide a brief description of the nature of the services for which the compensation was received Salary

f) Check appropriate box: More than \$1,000 More than \$12,500

Young's Mill Storage LLC (name of employer or source of income)
102 S. Main St., Hwy 67 South (address)
Tuckerman, AR 72473 (name under which income received)

Provide a brief description of the nature of the services for which the compensation was received Member (w/ dividend)

g) Check appropriate box: More than \$1,000 More than \$12,500

[REDACTED] INC. (name of employer or source of income)
[REDACTED] (address)
[REDACTED] (name under which income received)

THE STORE, INC.
PO BOX 500
TUCKERMAN, AR 72473

Provide a brief description of the nature of the services for which the compensation was received Stockholder Distrib.

h) Check appropriate box: More than \$1,000 More than \$12,500

(name of employer or source of income)
(address)
(name under which income received)

Provide a brief description of the nature of the services for which the compensation was received

The law penalties for a maximum penalty of \$5,000 per violation and/or imprisonment for not more than one year for any person who knowingly or willfully fails to comply with the provisions of A.C.A. 21-8-401 through 21-8-804. This report constitutes a public record. This form has been approved by the Arkansas State Commission.

List the name of every business in which you, your spouse or any other person for the use or benefit of you or your spouse have an investment or holding. Individual stock holdings should be disclosed. Figures should be based on fair market value at the end of the reporting period.

Check appropriate box: More than \$1,000 More than \$12,500

~~NORMAN HOLDINGS, LLC~~ (name of corporation, firm or enterprise) ~~NORMAN HOLDINGS & SOAK, INC.~~
~~1000 Main Street~~ (address) ~~TUCKERMAN, AR 72473~~
~~TUCKERMAN, AR 72473~~ (name under which investment held)

Check appropriate box: More than \$1,000 More than \$12,500

~~Norman Mini Storage LLC~~ (name of corporation, firm or enterprise) ~~Norman Mini Storage LLC~~
~~P.O. Box 996, Hwy 97 South~~ (address) ~~P.O. Box 996, Hwy 97 South~~
~~Tuckerman, AR 72473~~ (name under which investment held) ~~Tuckerman, AR 72473~~

Check appropriate box: More than \$1,000 More than \$12,500

~~THE STORE, INC.~~ (name of corporation, firm or enterprise) ~~THE STORE, INC.~~
~~1000 Main Street~~ (address) ~~P.O. Box 996~~
~~Tuckerman, AR 72473~~ (name under which investment held) ~~TUCKERMAN, AR 72473~~

Check appropriate box: More than \$1,000 More than \$12,500

~~Southwest Development, LLC~~ (name of corporation, firm or enterprise) ~~Southwest Development, LLC~~
~~P.O. Box 996, Hwy 97 South~~ (address) ~~P.O. Box 996, Hwy 97 South~~
~~Tuckerman, AR 72473~~ (name under which investment held) ~~Tuckerman, AR 72473~~

Check appropriate box: More than \$1,000 More than \$12,500

~~GENERATION THREE PARTNERSHIP~~ (name of corporation, firm or enterprise) ~~GENERATION THREE PARTNERSHIP~~
~~P.O. Box 996~~ (address) ~~P.O. Box 996~~
~~Tuckerman, AR 72473~~ (name under which investment held) ~~TUCKERMAN, AR 72473~~

Check appropriate box: More than \$1,000 More than \$12,500

~~ITM Holdings, LLC~~ (name of corporation, firm or enterprise) ~~ITM Holdings, LLC~~
~~P.O. Box 996 Tuckerman, AR 72473~~ (address) ~~P.O. Box 996 Tuckerman, AR 72473~~
~~Tuckerman, AR 72473~~ (name under which investment held)

Ark. Ann. § 21-9-403 provides that, upon conviction, any person who violates any provision of subchapter 4, 6, 7, or 8 of chapter 8, Title 21 of the Arkansas Code is guilty of a Class A misdemeanor. The culpable mental state required shall be a purposeful violation.
 Revised 12/2017

List the name of every business in which you, your spouse or any other person for the use or benefit of you or your spouse have an investment or holding. Individual stock holdings should be disclosed. Figures should be based on fair market value at the end of the reporting period.

a) Check appropriate box: More than \$1,000 More than \$12,500

Young's Mini Storage LLC (name of corporation, firm or enterprise)
P.O. Box 306, Hwy. 67 South
Tuckerman, AR 72473 (address)
(name under which investment held)

b) Check appropriate box: More than \$1,000 More than \$12,500

Southfork Development LLC (name of corporation, firm or enterprise)
P.O. Box 306, Hwy. 67 South
Tuckerman, AR 72473 (address)
(name under which investment held)

c) Check appropriate box: More than \$1,000 More than \$12,500

GENERATION THREE PARTNERSHIP (name of corporation, firm or enterprise)
P.O. Box 306
TUCKERMAN, AR 72473 (address)
Tommy Young 1/6th - Amy Young 1/6th
(name under which investment held)

d) Check appropriate box: More than \$1,000 More than \$12,500

Stephens, Inc. (name of corporation, firm or enterprise)
Little Rock, AR (address)
IRA Accounts Tommy Young 50% - Amy Young 50%
(name under which investment held)

e) Check appropriate box: More than \$1,000 More than \$12,500

Iberia Bank (name of corporation, firm or enterprise)
Main Street, Tuckerman, AR 72473 (address)
Bank Checking Accounts Tommy Young 50% - Amy Young 50%
(name under which investment held)

f) Check appropriate box: More than \$1,000 More than \$12,500

Merchants & Planters Bank (name of corporation, firm or enterprise)
Hwy. 67 North, Tuckerman, AR 72473 (address)
Bank Checking Accounts Tommy Young 50% - Amy Young 50%
(name under which investment held)

The law provides for a maximum penalty of \$2,000 per violation and/or imprisonment for not more than one year for any person who knowingly or willfully fails to comply with the provisions of A.C.A. § 21-9-401 through § 21-9-404. This report constitutes a public record. This form has been approved by the Arkansas Ethics Commission.

ist every office or directorship held by you or your spouse in any business, corporation, firm, or enterprise subject to jurisdiction of a regulatory agency of this State, or of any of its political subdivisions.

United States Grains Council

1400 K Street NW, Suite 1200/ Washington, DC 20005

Board Member (Western Hemisphere) Advisory Team
Tommy Young (office or directorship held)

Farmers Supply Assoc.

5240 Hwy. 14 East/ Harrisburg, AR 72432

Board Member
Tommy Young (office or directorship held)

Arkansas Corn & Grain Sorghum Promotion Board/P.O. Box 31/Little Rock, AR 72203
COMMON-OWNERS Board Member (Governor Appointed)

at each creditor to whom the value of five thousand dollars (\$5,000) or more was personally owed or personally obligated and is still outstanding. (This does not include debts owed to members of your family or loans made in the ordinary course of business by either a financial institution or a person who regularly and customarily extends credit.)

Ag Heritage Farm Credit Services - Investment Property Mortgage

2800 Stegall Road - Newport, AR 72112

(name of creditor)
(address of creditor)
(name of creditor)
(address of creditor)
(name of creditor)
(address of creditor)

SECTION 7- PAST-DUE AMOUNTS OWED TO GOVERNMENT

the name and address of each governmental body to which you are legally obligated to pay a past-due amount and a description of the nature of the amount of the obligation.

NONE

(name of governmental body) (address of governmental body)
(amount owed) (nature of the obligation)
(name of governmental body) (address of governmental body)
(amount owed) (nature of the obligation)

Ar. Ann. § 21-8-403 provides that, upon conviction, any person who violates any provision of subchapter 4, 6, 7, or 8 of chapter 2, Title 21 of the Arkansas Code is guilty of a Class A misdemeanor. The culpable mental state required shall be a purposeful violation.
Revised 12/2017

List each guarantor or co-maker who has guaranteed a debt of yours that is still outstanding. (This includes debt guarantors arising or extended and refinanced after Jan. 1, 1989. Members of your family who are your guarantors are not required to be disclosed.)

a) NONE

(name)

(address)

(name)

(address)

SECTION 9- GIFTS

List the source, date, description, and a reasonable estimate of the fair market value of each gift of more than \$100 received by you or your spouse and of each gift of more than \$250 received by your dependent children. The term "gift" is defined as "any payment, entertainment, advance, services, or anything of value unless consideration of equal or greater value has been given therefor." There are a number of exceptions to the definition of "gift." Those exceptions are set forth in the Instructions for Statement of Financial Interest prepared for use with this form. (Note: The value of an item shall be considered to be less than \$100 if the public servant reimburses the person from whom the item was received any amount over \$100 and the reimbursement occurs within ten (10) days from the date the item was received.)

1. NONE

(description of gift)

(date)

(fair market value)

(source of gift)

(description of gift)

(date)

(fair market value)

(source of gift)

(description of gift)

(date)

(fair market value)

(source of gift)

(description of gift)

(date)

(fair market value)

(source of gift)

(description of gift)

(date)

(fair market value)

(source of gift)

Ariz. Ann. § 21-8-403 provides that, upon conviction, any person who violates any provision of subsections 4, 6, 7, or 8 of chapter 8, Title 21 of the Arizona Statutes is guilty of a Class A misdemeanor. The culpable mental state required shall be a purposeful violation.

Revised 12/2017

SECTION 10- AWARDS

If you are an employee of a public school district, the Arkansas School for the Blind, the Arkansas School for the Deaf, the Arkansas School for Mathematics, Sciences, and the Arts, a university, a college, a technical college, a technical institute, a comprehensive life-long learning center, or a community college, the law requires you to disclose each monetary or other award over one hundred dollars (\$100) which you have received in recognition of your contributions to education. The information disclosed with respect to each such award should include the source, date, description, and a reasonable estimate of the fair market value.

a) NONE

(description of award)
 (date) (fair market value)
 (source of award)

b)
 (description of award)
 (date) (fair market value)
 (source of award)

c)
 (description of award)
 (date) (fair market value)
 (source of award)

d)
 (description of award)
 (date) (fair market value)
 (source of award)

SECTION 11- NON-GOVERNMENTAL SOURCES OF PAYMENT

List each nongovernmental source of payment of your expenses for food, lodging, or travel which bears a relationship to your office when you appear in your official capacity when the expenses incurred exceed \$100.

1) NONE

(name of person or organization paying expense)
 (business address)
 (date of expense) \$ (amount of expense)
 (nature of expenditure)

(name of person or organization paying expense)
 (business address)
 (date of expense) \$ (amount of expense)
 (nature of expenditure)

Code Ann. § 21-8-493 provides that, upon conviction, any person who violates any provision of subchapter 4, 6, 7, or 8 of chapter 8, Title 21 of the Arkansas Code is guilty of a Class A misdemeanor. The culpable mental state required shall be a purposeful violation.
 Revised 12/2017

at any business which employs you and is under direct regulation or subject to direct control by the governmental body which you serve.

NONE

(name of business)

(governmental body which regulates or controls)

(name of business)

(governmental body which regulates or controls)

(name of business)

(governmental body which regulates or controls)

(name of business)

(governmental body which regulates or controls)

SECTION 12- SALES TO GOVERNMENTAL BODY

List the goods or services sold to the governmental body for which you serve which have a total annual value in excess of \$1,000. List the compensation paid for each category of goods or services sold by you or any business in which you or your spouse is an officer, director, or shareholder owning more than 10% of the stock of the company.

NONE

(goods or services)

(governmental body to whom sold)

(compensation paid)

(goods or services)

(governmental body to whom sold)

(compensation paid)

(goods or services)

(governmental body to whom sold)

(compensation paid)

(goods or services)

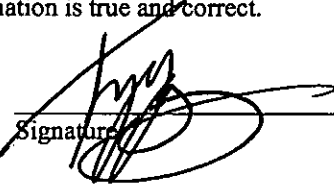
(governmental body to whom sold)

(compensation paid)

Code Ann. § 21-8-403 provides that, upon conviction, any person who violates any provision of subchapter 4, 6, 7, or 8 of chapter 2, Title 21 of the Arkansas Code is guilty of a Class A misdemeanor. The culpable mental state required shall be a purposeful violation.

SECTION 14- SIGNATURE

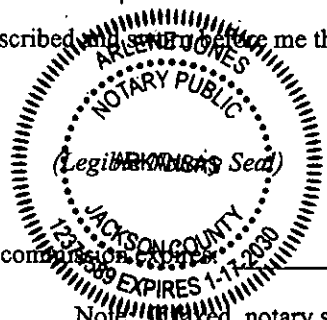
I certify under penalty of false swearing that the above information is true and correct.

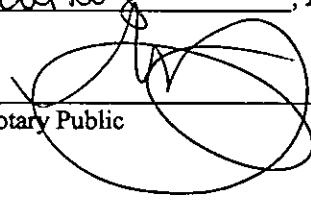
Signature 

STATE OF ARKANSAS

COUNTY OF Jackson } ss

Subscribed and sworn to before me this 22 day of January, 2025.



Notary Public 

My commission expires 1-17-2030

Note: If faxed, notary seal must be legible (i.e., either stamped or raised and inked) and the original must follow within ten (10) days pursuant to Ark. Code Ann. § 21-8-703(b)(3).

IMPORTANT

Where to file:

- State or district candidates/public servants file with the Secretary of State.
- Appointees to state boards/commissions file with the Secretary of State.
- County, township, and school district candidates/public servants file with the county clerk.
- Municipal candidates/public servants file with the city clerk or recorder, as the case may be.
- City attorneys file with the city clerk of the municipality in which they serve.
- District judges file with the Secretary of State.
- Members of regional boards or commissions file with the county clerk of the county in which they reside.

General Information:

- * The Statement of Financial Interest should be filed by January 31 of each year.
- * The filing covers the previous calendar year.
- * Candidates for elective office shall file the Statement of Financial Interest for the previous calendar year on the first Monday following the close of the period to file as a candidate for elective office unless already filed by January 31. In addition, if the party filing period ends before January 1 of the year of the general election, candidates for elective office shall file a Statement of Financial Interest for the previous calendar year by no later than January 31 of the year of the general election.
- * Agency heads, department directors, and division directors of state government shall file the Statement of Financial Interest within thirty (30) days of appointment or employment unless already filed by January 31.
- * Appointees to state boards or commissions shall file the Statement of Financial Interest within thirty (30) days after appointment unless already filed by January 31.
- * If a person is included in any category listed above for any part of a calendar year, that person shall file a Statement of Financial Interest covering that period of time regardless of whether they have left their office or position as of the date the statement is due.