

FINANCIAL DISCLOSURE REPORT FOR CALENDAR YEAR 2019

Report Required by the Ethics
in Government Act of 1978
(5 U.S.C. app. §§ 101-111)

1. Person Reporting (last name, first, middle initial) Callaway, Henry A.	2. Court or Organization U.S. Bankruptcy Court for the Southern District of Alabama	3. Date of Report 02/06/2020
4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time) Bankruptcy Judge	5a. Report Type (check appropriate type) ☐ Nomination ☐ Date ☐ Initial ☒ Annual ☐ Final 5b. ☐ Amended Report	6. Reporting Period 01/01/2019 to 12/31/2019
7. Chambers or Office Address U.S. Bankruptcy Court 201 St. Louis St. Mobile, AL 36602		
IMPORTANT NOTES: The instructions accompanying this form must be followed. Complete all parts, checking the NONE box for each part where you have no reportable information.		

I. POSITIONS. (Reporting individual only; see pp. 9-13 of filing instructions)

☐ NONE (No reportable positions.)

POSITION

NAME OF ORGANIZATION/ENTITY

1. Executive Board	Mobile Area Council BSA
2.	
3.	
4.	
5.	

II. AGREEMENTS. (Reporting individual only; see pp. 14-16 of filing instructions)

☒ NONE (No reportable agreements.)

DATE

PARTIES AND TERMS

1.	
2.	
3.	

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Name of Person Reporting

Callaway, Henry A.

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III. NON-INVESTMENT INCOME. *(Reporting individual and spouse; see pp. 17-24 of filing instructions)***A. Filer's Non-Investment Income**NONE *(No reportable non-investment income.)*

<u>DATE</u>	<u>SOURCE AND TYPE</u>	<u>INCOME</u> (yours, not spouse's)
1.		
2.		
3.		
4.		

B. Spouse's Non-Investment Income - *If you were married during any portion of the reporting year, complete this section.**(Dollar amount not required except for honoraria.)*NONE *(No reportable non-investment income.)*

<u>DATE</u>	<u>SOURCE AND TYPE</u>
1. 2019	McElhaney State Farm Agency, salary
2.	
3.	
4.	

IV. REIMBURSEMENTS -- *transportation, lodging, food, entertainment.**(Includes those to spouse and dependent children; see pp. 25-27 of filing instructions.)*NONE *(No reportable reimbursements.)*

<u>SOURCE</u>	<u>DATES</u>	<u>LOCATION</u>	<u>PURPOSE</u>	<u>ITEMS PAID OR PROVIDED</u>
1. Alabama State Bar Bankruptcy Section	June 6-9, 2019	Destin, FL	Seminar	Transportation, meals, lodging
2. University of Alabama	November 21-22, 2019	Birmingham, AL	Seminar	Transportation, meals, lodging
3.				
4.				
5.				

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V. GIFTS. (Includes those to spouse and dependent children; see pp. 28-31 of filing instructions.)

☒ NONE (No reportable gifts.)

SOURCE	DESCRIPTION	VALUE
1.		
2.		
3.		
4.		
5.		

VI. LIABILITIES. (Includes those of spouse and dependent children; see pp. 32-33 of filing instructions.)

☒ NONE (No reportable liabilities.)

CREDITOR	DESCRIPTION	VALUE CODE
1.		
2.		
3.		
4.		
5.		

VII. INVESTMENTS and TRUSTS -- income, value, transactions (Includes those of spouse and dependent children; see pp. 34-60 of filing instructions.)

☐ NONE (No reportable income, assets, or transactions.)

A Description of Assets (including trust assets) Place "(X)" after each asset exempt from prior disclosure	B Income during reporting period		C Gross value at end of reporting period		D Transactions during reporting period				
	(1)	(2)	(1)	(2)	(1)	(2)	(3)	(4)	(5)
	Amount Code 1 (A-H)	Type (e g , div , rent, or int)	Value Code 2 (J-P)	Value Method Code 3 (Q-W)	Type (e g , buy, sell, redemption)	Date mm/dd/yy	Value Code 2 (J-P)	Gain Code 1 (A-H)	Identity of buyer/seller (if private transaction)
1. Individual Assets (H)									
2. ServisFirst Bank accounts (cash)	A	Interest	J	T					
3. 401k ACCOUNT #1 (H)									
4. State Farm Associates Balanced Fund (STFBX)		None	K	T					
5. IRA #1 (H)									
6. Vanguard Wellington Fund (VWELX)	B	Dividend	K	T					
7. IRA #2 (H)									
8. Vanguard Wellington Fund (VWELX) (X)		None	J	T					
9. IRA #3 (H)									
10. Vanguard Dividend Apprec Index Adm Cl (VDADX)	D	Dividend	N	T	Sold (part)	04/05/19	J	A	
11.					Sold (part)	11/25/19	K	C	
12. Vanguard Intermediate Term Invest Grade Adviral CL (VFIDX)	A	Dividend	M	T	Buy	11/27/19	M		
13. Vanguard Short Term Invest Grade Adm (VFSUX)	D	Dividend	N	T	Sold (part)	04/05/19	K	A	
14.					Sold (part)	11/25/19	K	A	
15. Vanguard Healthcare Adm (VGHAX)	D	Dividend	M	T	Sold (part)	04/05/19	J		
16.					Sold (part)	11/25/19	J	A	
17. Vanguard Target Retirement 2025 (VTTVX)	B	Dividend	L	T	Sold (part)	02/19/19	K		

1 Income Gain Codes:

(See Columns B1 and D4)

2 Value Codes

(See Columns C1 and D3)

3 Value Method Codes

(See Column C2)

A =\$1,000 or less

F =\$50,001 - \$100,000

J =\$15,000 or less

N =\$250,001 - \$500,000

P3 =\$25,000,001 - \$50,000,000

Q =Appraisal

U =Book Value

B =\$1,001 - \$2,500

G =\$100,001 - \$1,000,000

K =\$15,001 - \$50,000

O =\$500,001 - \$1,000,000

R =Cost (Real Estate Only)

V =Other

C =\$2,501 - \$5,000

H1 =\$1,000,001 - \$5,000,000

L =\$50,001 - \$100,000

P1 =\$1,000,001 - \$5,000,000

P4 =More than \$50,000,000

S =Assessment

W =Estimated

D =\$5,001 - \$15,000

H2 =More than \$5,000,000

M =\$100,001 - \$250,000

P2 =\$5,000,001 - \$25,000,000

T =Cash Market

E =\$15,001 - \$50,000

VII. INVESTMENTS and TRUSTS -- income, value, transactions (Includes those of spouse and dependent children; see pp. 34-60 of filing instructions.)

☐

 NONE (No reportable income, assets, or transactions.)

A Description of Assets (including trust assets) Place "(X)" after each asset exempt from prior disclosure	B Income during reporting period		C Gross value at end of reporting period		D Transactions during reporting period				
	(1)	(2)	(1)	(2)	(1)	(2)	(3)	(4)	(5)
	Amount Code 1 (A-H)	Type (e g , div , rent, or int)	Value Code 2 (J-P)	Value Method Code 3 (Q-W)	Type (e g , buy, sell, redemption)	Date mm/dd/yy	Value Code 2 (J-P)	Gain Code 1 (A-H)	Identity of buyer/seller (if private transaction)
18.					Sold (part)	03/01/19	J		
19.					Sold (part)	03/25/19	J	A	
20.					Buy (add'l)	04/05/19	K		
21.					Buy (add'l)	04/08/19	J		
22.					Sold (part)	04/25/19	J	A	
23.					Sold (part)	05/24/19	J		
24.					Sold (part)	06/25/19	J	A	
25.					Sold (part)	07/25/19	J	A	
26.					Buy (add'l)	08/22/19	J		
27.					Sold (part)	08/23/19	J	A	
28.					Sold (part)	09/09/19	J	A	
29.					Sold (part)	09/25/19	J	A	
30.					Sold (part)	10/25/19	J	A	
31.					Buy (add'l)	11/25/19	L		
32.					Sold (part)	11/25/19	J	A	
33.					Buy (add'l)	11/26/19	K		
34.					Sold (part)	12/02/19	K	A	

1 Income Gain Codes:
(See Columns B1 and D4)

2 Value Codes
(See Columns C1 and D3)

3 Value Method Codes
(See Column C2)

A =\$1,000 or less
F =\$50,001 - \$100,000
J =\$15,000 or less
N =\$250,001 - \$500,000
P3 =\$25,000,001 - \$50,000,000
Q =Appraisal
U =Book Value

B =\$1,001 - \$2,500
G =\$100,001 - \$1,000,000
K =\$15,001 - \$50,000
O =\$500,001 - \$1,000,000
R =Cost (Real Estate Only)
V =Other

C =\$2,501 - \$5,000
H1 =\$1,000,001 - \$5,000,000
L =\$50,001 - \$100,000
P1 =\$1,000,001 - \$5,000,000
P4 =More than \$50,000,000
S =Assessment
W =Estimated

D =\$5,001 - \$15,000
H2 =More than \$5,000,000
M =\$100,001 - \$250,000
P2 =\$5,000,001 - \$25,000,000
T =Cash Market

E =\$15,001 - \$50,000

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Name of Person Reporting

Callaway, Henry A.

Date of Report

02/06/2020

VII. INVESTMENTS and TRUSTS -- income, value, transactions (Includes those of spouse and dependent children; see pp. 34-60 of filing instructions.)

☐ NONE (No reportable income, assets, or transactions.)

A Description of Assets (including trust assets) Place "(X)" after each asset exempt from prior disclosure	B Income during reporting period		C Gross value at end of reporting period		D Transactions during reporting period				
	(1) Amount Code 1 (A-H)	(2) Type (e g , div , rent, or int)	(1) Value Code 2 (J-P)	(2) Value Method Code 3 (Q-W)	(1) Type (e g , buy, sell, redemption)	(2) Date mm/dd/yy	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A-H)	(5) Identity of buyer/seller (if private transaction)
35.					Sold (part)	12/24/19	J	A	
36. Vanguard High Yield Corp Adm (VWEAX)	D	Dividend			Sold (part)	04/05/19	J	A	
37.					Sold (part)	11/25/19	J	A	
38.					Sold	11/27/19	M	C	
39. Vanguard Intl Growth Adm Cl (VWILX)	B	Dividend	M	T	Sold (part)	04/05/19	J		
40.					Sold (part)	11/25/19	J		
41. Prime Cap Odyssey Aggressive Growth (POAGX)	E	Dividend	N	T	Buy (add'l)	04/08/19	K		
42.					Sold (part)	11/25/19	J		
43. Vanguard S&P Mid Cap 400 Index ETF (IVOO)	B	Dividend	M	T	Sold (part)	04/05/19	J		
44.					Sold (part)	11/25/19	J	A	
45. Vanguard S&P Mid Cap 400 Value ETF (IVOV)	B	Dividend	M	T	Sold (part)	04/05/19	J	A	
46.					Sold (part)	11/25/19	J	A	
47. Avendro Inc (AVDR)		None			Buy	02/22/19	J		
48.					Sold	08/19/19	K	D	
49. Castle Biosciences Inc (CSTL)		None			Buy	08/19/19	K		
50.					Sold	11/12/19	K	C	
51. IRA #4 (H)									

1 Income Gain Codes: (See Columns B1 and D4)	A =\$1,000 or less F =\$50,001 - \$100,000	B =\$1,001 - \$2,500 G =\$100,001 - \$1,000,000	C =\$2,501 - \$5,000 H1 =\$1,000,001 - \$5,000,000	D =\$5,001 - \$15,000 H2 =More than \$5,000,000	E =\$15,001 - \$50,000
2 Value Codes (See Columns C1 and D3)	J =\$15,000 or less N =\$250,001 - \$500,000 P3 =\$25,000,001 - \$50,000,000	K =\$15,001 - \$50,000 O =\$500,001 - \$1,000,000	L =\$50,001 - \$100,000 P1 =\$1,000,001 - \$5,000,000 P4 =More than \$50,000,000	M =\$100,001 - \$250,000 P2 =\$5,000,001 - \$25,000,000	
3 Value Method Codes (See Column C2)	Q =Appraisal U =Book Value	R =Cost (Real Estate Only) V =Other	S =Assessment W =Estimated	T =Cash Market	

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	Amount Code 1 (A-H)	Type (e g , div , rent, or int)	Value Code 2 (J-P)	Value Method Code 3 (Q-W)	Type (e g , buy, sell, redemption)	Date mm/dd/yy	Value Code 2 (J-P)	Gain Code 1 (A-H)	Identity of buyer/seller (if private transaction)
52. Vanguard Target Retirement 2025 (X)	A	Dividend	J	T					
53. New York's 529 College Savings Program Direct Plan #1 (H)									
54. Aggressive Age-Based Option: Aggressive Growth Portfolio (X)		None	J	T					

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VIII. ADDITIONAL INFORMATION OR EXPLANATIONS. *(Indicate part of report.)*

Part VII, Column B: Lines reflecting no income are so reported because none was attributed to those particular holdings during the reporting period, whether taxable, tax exempt, or tax deferred, or because the investments do not allocate income to individual holdings, but instead are credited only in unit value, per page 42 of the filing instructions.

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Name of Person Reporting

Callaway, Henry A.

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IX. CERTIFICATION.

I certify that all information given above (including information pertaining to my spouse and minor or dependent children, if any) is accurate, true, and complete to the best of my knowledge and belief, and that any information not reported was withheld because it met applicable statutory provisions permitting non-disclosure.

I further certify that earned income from outside employment and honoraria and the acceptance of gifts which have been reported are in compliance with the provisions of 5 U.S.C. app. § 501 et. seq., 5 U.S.C. § 7353, and Judicial Conference regulations.

Signature: s/ **Henry A. Callaway**

NOTE: ANY INDIVIDUAL WHO KNOWINGLY AND WILLFULLY FALSIFIES OR FAILS TO FILE THIS REPORT MAY BE SUBJECT TO CIVIL AND CRIMINAL SANCTIONS (5 U.S.C. app. § 104)

Committee on Financial Disclosure
Administrative Office of the United States Courts
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