AO 10
Rev. 2/2025

FINANCIAL DISCLOSURE REPORT FOR CALENDAR YEAR 2024

Report Required by the Ethics in Government Act of 1978 (5 U.S.C. §§ 13101-13111)

1. Person Reporting (last name, first, middle initial)	2. Court or Organization	3. Date of Report
WILLIAMS, OMAR A.	UNITED STATES DISTRICT COURT - CONNECTICUT	08/29/2025
4. Title (Article III judges indicate active or senior status; magistrate judges indicate full- or part-time)	**5a. Report Type (check appropriate type)**	**6. Reporting Period**
UNITED STATES DISTRICT JUDGE	☐ Nomination Date ☐ Initial ☑ Annual ☐ Final **5b.** ☑ Amended Report	01/01/2024 **to** 12/31/2024
7. Chambers or Office Address		
450 MAIN STREET, SUITE 125 HARTFORD, CT 06103-3018		

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 Guide to Judiciary Policy, Volume 2D, Ch. 3, § 345 Trustees, Executors, Administrators, and Custodians; § 350 Power of Attorney; § 355 Outside Positions.)*

☑ NONE *(No reportable positions.)*

	POSITION	NAME OF ORGANIZATION/ENTITY
1.		
2.		
3.		
4.		
5.		

II. AGREEMENTS. *(Reporting individual only; see Guide to Judiciary Policy, Volume 2D, Ch. 3, § 340 Agreements and Arrangements.)*

☐ NONE *(No reportable agreements.)*

	DATE	PARTIES AND TERMS
1.	2003	State Employees Retirement System (SERS IIA) from prior service as public defender
2.	2011	State of CT Judges Retirement System (JRS)
3.		

Name of Person Reporting	Date of Report
WILLIAMS, OMAR A.	08/29/2025

III. NON-INVESTMENT INCOME. *(Reporting individual and spouse; see Guide to Judiciary Policy, Volume 2D, Ch. 3, § 320 Income; § 360 Spouses and Dependent Children.)*

A. Filer's Non-Investment Income

☑ NONE *(No reportable non-investment income.)*

	DATE	SOURCE AND TYPE	INCOME (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.)*

	DATE	SOURCE
1.	2024	TRAVELERS, SALARY
2.	2024	TRAVELERS, SALARY
3.		
4.		

IV. REIMBURSEMENTS. *(Includes those to spouse and dependent children; see Guide to Judiciary Policy, Volume 2D, Ch. 3, § 330 Gifts and Reimbursements; § 360 Spouses and Dependent Children.)*

☑ NONE *(No reportable reimbursements.)*

	SOURCE	DATES	LOCATION	PURPOSE	ITEMS PAID OR PROVIDED
1.					
2.					
3.					
4.					
5.					

V. GIFTS. *(Includes those to spouse and dependent children; see Guide to Judiciary Policy, Volume 2D, Ch. 3, § 330 Gifts and Reimbursements; § 360 Spouses and Dependent Children.)*

☑ NONE *(No reportable gifts.)*

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

VI. LIABILITIES. *(Includes those of spouse and dependent children; see Guide to Judiciary Policy, Volume 2D, Ch. 3, § 335 Liabilities; § 360 Spouses and Dependent Children.)*

☐ NONE *(No reportable liabilities.)*

	CREDITOR	DESCRIPTION	VALUE CODE
1.	CHASE	CREDIT CARD	K
2.	NELNET	STUDENT LOAN	K
3.			
4.			
5.			

Name of Person Reporting	Date of Report
WILLIAMS, OMAR A.	08/29/2025

VII. INVESTMENTS and TRUSTS – *income, value, transactions (Includes those of spouse and dependent children; see Guide to Judiciary Policy, Volume 2D, Ch. 3, § 310 Reporting Thresholds for Assets; § 312 Types of Reportable Property; § 315 Interests in Property; § 320 Income; § 325 Purchases, Sales, and Exchanges; § 360 Spouses and Dependent Children; § 365 Trusts, Estates, and Investment Funds.)*

☐ 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 (1) Amount Code 1 (A-H)	B. (2) Type (e.g., div., rent, or int.)	C. Gross value at end of reporting period (1) Value Code 2 (J-P)	C. (2) Value Method Code 3 (Q-W)	D. Transactions during reporting period (1) Type (e.g., buy, sell, redemption)	D. (2) Date mm/dd/yy	D. (3) Value Code 2 (J-P)	D. (4) Gain Code 1 (A-H)	
1. Capital One	A	Interest	J	T					
2. 529 (CT Higher Edu. Trust), Managed by Ameriprise (H)									
3. CT Higher Ed Tr 529 2028 CL A (FAGJX)	D	Dividend	F	T					
4. CT Higher Ed Tr 529 2031 CL A (FAGTX)	D	Dividend	F	T					
5. The Travelers 401(K) Savings Plan (H)									
6. Travelers Restricted Stock (TRV)	A	Dividend	L	T					
7. Travelers Company Stock (TRV) (Fidelity)	D	Dividend	J	T					
8. American 2050 Target Date Retirement Fund (AALTX)(H)	E	Dividend	L	T					
9. Blackrock Strategic Income Opportunities Portfolio (BSIIX)	A	Dividend	J	T					
10. JOHN HANCOCK EMERGING MARKETS EQUITY FUND (JEMMX)	A	Dividend	J	T					
11. MFS INTERNATIONAL INTRINSIC VALUE FUND (MINIX)	A	Dividend	J	T					
12. MFS VALUE FUND (MEIIX)	A	Dividend	J	T					
13. MFS GROWTH FUND (MFEIX)	A	Dividend	J	T					
14. MFS MID-CAP GROWTH FUND (OTCIX)	A	Dividend	J	T					
15. ALLSPRING EMERGING MARKETS EQUITY FUND (EMGNX)	A	Dividend	J	T					
16. ALLSPRING SPECIAL MID-CAP VALUE FUND (WFMIX)	A	Dividend	J	T					
17. TRAVELERS STOCK SALE	E	Dividend	J	T					

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

Name of Person Reporting	Date of Report
WILLIAMS, OMAR A.	08/29/2025

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

Yesterday, I called the Committee on Financial Disclosure at the number listed on the letter of inquiry for guidance in clarifying some of the instructions at Parts II, III, and VII. The examiner with whom I spoke was knowledgeable, helpful, and kind. Thank you for providing this available service.

Name of Person Reporting	Date of Report
WILLIAMS, OMAR A.	08/29/2025

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. § 13141 et. seq., 5 U.S.C. § 7353, and Judicial Conference regulations.

Signature: S/ OMAR A. WILLIAMS

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. § 13106)

Committee on Financial Disclosure
Administrative Office of the United States Courts
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Washington, D.C. 20544