

**FINANCIAL DISCLOSURE REPORT
FOR CALENDAR YEAR 2004**

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

1. Person Reporting (Last name, First name, Middle initial) WILHOIT, HENRY R	2. Court or Organization U.S. District Court, ED/KY	3. Date of Report 5/15/2005
4. Title (Article III Judges indicate active or senior status; magistrate judges indicate full- or part-time) Senior U. S. District Judge	5. Report Type (check appropriate type) <input type="radio"/> Nomination. Date <input type="radio"/> Initial <input checked="" type="radio"/> Annual <input type="radio"/> Final	6. Reporting Period 1/1/2004 to 12/31/2004
7. Chambers or Office Address Room 320 1405 Greenup Avenue Ashland, KY 41101	8. On the basis of the information contained in this Report and any modifications pertaining thereto, it is, in my opinion, in compliance with applicable laws and regulations. Reviewing Officer _____ Date _____	

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. Sign on last page.

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

NONE - (No reportable positions.)

<u>POSITION</u>	<u>NAME OF ORGANIZATION/ENTITY</u>
1. PAST PRESIDENTS ADVISORY COUNCIL	U.K. ALUMNI ASSOCIATION

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

NONE - (No reportable agreements.)

<u>DATE</u>	<u>PARTIES AND TERMS</u>
1. 06/96	HILLIARD LYONS, INC., I.R.A. ROLLOVER FROM 1982 KEOUGH PLAN

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FINANCIAL
DISCLOSURE OFFICE

FINANCIAL DISCLOSURE REPORT

Name of Person Reporting

WILHOIT, HENRY R

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5/15/2005

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.)

DATE

SOURCE AND TYPE

GROSS INCOME
(yours, not spouse's)

1. _____

B. Spouse's Non-Investment Income - (If you were married during any portion of the reporting year, please complete this section. Dollar amount not required except for honoraria.)

NONE - (No reportable non-investment income.)

DATE

SOURCE AND TYPE

1. _____

IV. REIMBURSEMENTS -- transportation, lodging, food, entertainment.

(Includes those to spouse and dependent children. See pp. 25-27 of instructions.)

NONE - (No such reportable reimbursements.)

SOURCE

DESCRIPTION

1. _____

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

NONE - (No such reportable gifts.)

SOURCE

DESCRIPTION

VALUE

1.

VI. LIABILITIES. (Includes those of spouse and dependent children. See pp. 32-34 of instructions.)

NONE - (No reportable liabilities.)

CREDITOR

DESCRIPTION

VALUE CODE

1.

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VII. INVESTMENTS and TRUSTS - income, value, transactions (includes those of the spouse and dependent children. See pp. 34-57 of filing instructions.)

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, merger, redemption)	If not exempt from disclosure			
						(2) Date: Month - Day	(3) Value Code 2 (J-P)	(4) Gain Code 1 (A- T)	(5) Identity of buyer/seller (if private transaction)
<input type="checkbox"/> NONE (No reportable income, assets, or transactions)									
1. FARM & FARM EQUIP. Pactolas KY	E	Rent	N	W					
2. 1st NAT'L BANK GRAYSON (Checking)	A	Interest	J	T					
3. COM'L BANK GRAYSON (Checking)	A	Interest	J	T					
4. 1st NAT'L BANK (Checking)	C	Interest	K	T					
5. COM'L BANK GRAYSON Checking	C	Interest	L	T					
6. COMMERCIAL BANK STOCK	E	Dividend	N	T					
7. FARM, GRAYSON, KY 1/3 INT	E	Cap/Gain	K	W					
8. RENTAL HOUSE, GRAYSON 1/3	B	Rent	K	W					
9. COMMERCIAL BLDG, GRAYSON 1/3	B	Rent	K	W					
10. UNIV. HEALTH REALTY STOCK	C	Dividend	L	T					
11. NAT'L HEALTH INVESTORS, INC.	A	Dividend	J	T					
12. NELSON COUNTY BOND	B	Dividend	L	T					
13. PIKEVILLE METHODIST BONDS	B	Interest	K	T					
14. NATIONAL HEALTH INVESTOR	B	Dividend	L	T					
15. WARREN COUNTY BONDS	B	Interest	K	T					
16. JEFFERSON CO. WATER DISTRICT	B	Interest	K	T					
17. BRISTOL MYERS CO.	A	Dividend	J	T					
18. CHRISTIAN CO. BONDS	B	Interest	K	T					

1. Income/Gain Codes: 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
(See Columns B1 and D4) 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: J = \$15,000 or less K = \$15,001-\$50,000 L = \$50,001-\$100,000 M = \$100,001-\$250,000
(See Columns C1 and D3) N = \$250,000-\$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 Q = Appraisal R = Cost (Real Estate Only) S = Assessment T = Cash/Market

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19. GEORGETOWN KY BONDS	B	Interest	K	T					
20. KY ST. HSG. BONDS	B	Interest	K	T					
21. LOUISVILLE KY BONDS	B	Interest	K	T					
22. WARREN COUNTY KY BONDS	B	Interest	K	T					
23. PROCTOR-GAMBLE CO.	A	Dividend	J	T					
24. GENERAL ELECTRIC	A	Dividend	J	T					
25. GLIMCHER REALTY Common	B	Dividend	J	T					
26. LOUISVILLE KY PKG AUTH	A	Interest	K	T					
27. ALTRIA GROUP, INC.	A	Dividend	J	T					
28. GENERAL ELECTRIC	A	Dividend	J	T					
29. KY HSG CRP HSG RV	E	Interest	K	T					
30. KY. HSG CRP	A	Interest	K	T					
31. TEXAS UTIL. (PREFERRED)	A	Dividend	K	T	Sell	02/04	K	C	
32. AMER. CAP. STRAT.	A	Dividend	K	T					
CHARTER MAC	B	Dividend	K	T	Buy	03/04	K		
MHI HOSPITALITY	A	Dividend	J	T	Buy	12/04	J		
35. CHARTER MAC	D	Dividend	M	T	Buy	02/04	M		
36. AMER. CAP. STG.	C	Dividend	K	T	Buy	02/04	K		

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37. *TEXAS UTIL. (PREFERRED)	A	Dividend	K	T	Sell	02/04	K	C	

~~* This entry inadvertently omitted from report for period of 1/03 to 12/03 as having been bought 01/03. The above entry showing the sell of this asset is correct.~~

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VIII. ADDITIONAL INFORMATION OR EXPLANATIONS (Indicate part of Report.)

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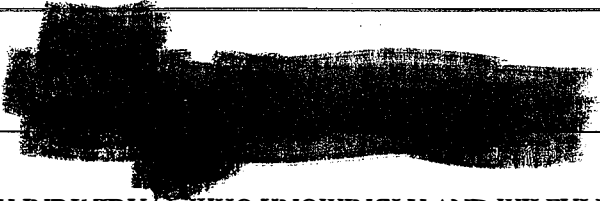
5/12/2005

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

Signature



Date

5-12-05

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

FILING INSTRUCTIONS

Mail signed original and 3 additional copies to:

Committee on Financial Disclosure
Administrative Office of the United States Courts
Suite 2-301
One Columbus Circle, N.E.
Washington, D.C. 20544