


Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Date of Appointment, Candidacy, Election or Nomination (Month/Day/Year)		Reporting Status (Check appropriate box) <input type="checkbox"/> Incumbent	Calendar Year Covered by Report	<input checked="" type="checkbox"/> New Entrant, Nominee or Candidate	<input type="checkbox"/> Termination File	Termination Date (If Applicable) (Month/Day/Year)	Fee for Late Filing Any individual who is required to file this report and does so more than 30 days after the date the report is required to be filed, or, if an extension is granted, more than 30 days after the last day of the filing extension period shall be subject to a \$200 fee.
Reporting Individual's Name		Last Name Reed		First Name and Middle Initial Pearlie S.		Reporting Periods Incumbents: The reporting period is the preceding calendar year except Part II of Schedule C and Part I of Schedule D where you must also include the filing year up to the date you file. Part II of Schedule D is not applicable. Termination Filers: The reporting period begins at the end of the period covered by your previous filing and ends at the date of termination. Part II of Schedule D is not applicable. Nominees, New Entrants and Candidates for President and Vice President: Schedule A—The reporting period for income (BLOCK C) is the preceding calendar year and the current calendar year up to the date of filing. Value assets as of any date you choose that is within 31 days of the date of filing. Schedule B— Not applicable. Schedule C, Part I (Liabilities): The reporting period is the preceding calendar year and the current calendar year up to any date you choose that is within 31 days of the date of filing. Schedule C, Part II (Agreements or Arrangements): Show any agreements or arrangements as of the date of filing. Schedule D— The reporting period is the preceding two calendar years and the current calendar year up to the date of filing.	
Position for Which Filing		Title of Position Assistant Secretary for Administration		Department or Agency (If Applicable) U.S. Department of Agriculture		Reporting Periods (continued)	
Location of Present Office (or forwarding address)		Address (Number, Street, City, State, and ZIP Code) 1400 Independence Avenue, S.W. Washington, DC 20250			Telephone No. (Include Area Code) (202) 720-3291 38W		
Position(s) Held with the Federal Government During the Preceding 12 Months (If Not Same as Above)		Title of Position(s) and Date(s) Held					
Presidential Nominees Subject to Senate Confirmation		Name of Congressional Committee Considering Nomination Agriculture, Nutrition, and Forestry		Do You Intend to Create a Qualified Diversified Trust? <input type="checkbox"/>		Reporting Periods (continued)	
Certification		Signature of Reporting Individual <i>Pearlie S. Reed</i>		Date (Month/Day/Year) April 28, 2009			
Other Review (If desired by agency)		Signature of Other Reviewer		Date (Month/Day/Year)			
Agency Ethics Official's Opinion On the basis of information contained in this report, I conclude that the filer is in compliance with applicable laws and regulations (subject to any comments in the box below).		Signature of Designated Agency Ethics Official/Reviewing Official <i>R. H. Lee</i>		Date (Month/Day/Year) 4-29-2009			
Office of Government Ethics Use Only		Signature <i>Don Fox</i>		Date (Month/Day/Year) 5/4/09			
Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheet)							
(Check box if filing extension granted & indicate number of days _____) <input type="checkbox"/>  (Check box if comments are continued on the reverse side) <input type="checkbox"/>							
Agency Use Only OGE Use Only APR 30 2009							

SCHEDULE A continued
 (Use only if needed)

Pearl S. Reed

BLOCK A Assets and Income	BLOCK B Valuation of Assets at close of reporting period										BLOCK C Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item																	
											Type	Amount										Other Income Specify Type & Actual Amount	Date (Mo., Day Yr.) Only if Honoraria					
											Dividends	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000			Over \$5,000,000				
None <input type="checkbox"/>	None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Excepted Investment Firm	Excepted Trust	Qualified Trust	Dividends	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000			\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000
1	Monsanto Company St. Louis, MO Accounts Receivable through 4/30/09	X																										
2	Land Loss Prevention Project Durham, NC Accounts Receivable through 4/30/09	X																										
3	University of Arkansas, Pine Bluff Pine Bluff, Arkansas Accounts Receivable through 4/30/09	X																										
4																												
5																												
6																												
7																												
8																												
9																												

* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.

Do not Complete Schedule B if you are a new entrant, nominee, Vice Presidential or Presidential Candidate

Reporting Individual's Name Pearlie S. Reed	SCHEDULE B	Page Number 4
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Part I: Transactions

Report any purchase, sale, or exchange by you, your spouse, or dependent children during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Do not report a transaction involving property used solely as your personal residence, or a transaction solely between you, your spouse, or dependent child. Check the Certificate of divestiture block to indicate sales made pursuant to a certificate of divestiture from OGE.

	Identification of Assets	Transaction Type(s)			Date (Mo., Day, Yr.)	Amount of Transaction (\$)											
		Purchase	Sale	Exchange		\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Certificate of divestiture
1	Example: Central Airlines Corporation				2/1/99												
2																	
3																	
4																	
5																	

* This category applies only if the underlying asset is solely that of the filer's spouse or dependent children. If the underlying asset is either held by the filer or jointly held by the filer with the spouse or dependent children, use the other higher categories of value, as appropriate.

Part II: Gifts, Reimbursements, and Travel Expenses

For you, your spouse and dependent children, report the source, a brief description, and the value of: (1) gifts (such as tangible items, transportation, lodging, food, or entertainment) received from one source totaling more than \$260; and (2) travel-related cash reimbursements received from one source totaling more than \$260. For conflicts analysis, it is helpful to indicate a basis for receipt, such as personal friend, agency approval under 5 U.S.C. § 4111, or other statutory authority, etc. For travel-related gifts and reimbursements, include travel itinerary, dates, and the nature of expenses provided. Exclude any funds given to you by the U.S. Government, given to your agency in connection with official travel, received from relatives, received by your spouse or dependent child totally independent of their relationship to you, or provided as personal hospitality at the donor's residence. Also, for purposes of aggregating gifts to determine the total value from one source, exclude items worth \$114 or less. See instructions for other exclusions.

	Source (Name and Address)	Brief Description	Value
Examples:	Natl Assn. of Rock Collectors, NY, NY	Airline ticket, hotel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty)	\$500
	Frank Jones, San Francisco, CA	Leather briefcase (personal friend)	\$300
1			
2			
3			
4			
5			

Reporting Individual's Name
 Pearlle S. Reed

SCHEDULE C

Part I: Liabilities

Report liabilities over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse or dependent children. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence unless it is rented out; loans secured by automobiles, household furniture or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.

None

Category of Amount or Value (X)

Examples	Creditors (Name and Address)	Type of Liability	Date Incurred	Interest Rate	Term if applicable	Category of Amount or Value (X)																
						\$10,001-\$15,000	\$15,001-\$50,000	\$50,001-\$100,000	\$100,001-\$250,000	\$250,001-\$500,000	\$500,001-\$1,000,000	Over \$1,000,000	\$1,000,001-\$5,000,000	\$5,000,001-\$25,000,000	\$25,000,001-\$50,000,000	Over \$50,000,000						
	First District Bank, Washington, DC 13th St, Washington, DC	Mortgage on rental property, Delaware	1991	8%	25 yrs																	
		Promissory note	1999	10%	on demand																	
1	Chase Bank	Credit Card	Various	12%	Monthly		X															
2																						
3																						
4																						
5																						

* This category applies only if the liability is solely that of the filer's spouse or dependent children. If the liability is that of the filer or a joint liability of the filer with the spouse or dependent children, mark the other higher categories, as appropriate.

Part II: Agreements or Arrangements

Report your agreements or arrangements for: (1) continuing participation in an employee benefit plan (e.g., 401k, deferred compensation); (2) continuation payment by a former employer (including severance payments); (3) leaves of absence; and (4) future employment. See instructions regarding the reporting of negotiations for any of these arrangements or benefits.

None

Examples	State and Terms of any Agreement or Arrangement	Parties	Date
	Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through 1/00.	Doe Jones & Smith, Hometown, State	7/85
1			
2			
3			
4			
5			
6			

Reporting Individual's Name Pearlie S. Reed	SCHEDULE D	Page Number 6
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Part I: Positions Held Outside U.S. Government

Report any positions held during the applicable reporting period, whether compensated or not. Positions include but are not limited to those of an officer, director, trustee, general partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise or any non-profit organization or educational institution. Exclude positions with relations to social, fraternal, or political entities and those solely of an honorary nature.

None

	Organization (Name and Address)	Type of Organization	Position Held	From (Mo./Yr.)	To (Mo./Yr.)
Examples	Natl Assn of Rock Collectors, NY, NY Doe Jones & Smith, Hometown, State	Non-profit/education Law firm	President Partner	6/92 7/83	Present 1/00
1	Monsanto Company St. Louis, MO	Agriculture seed company	Consultant	7/07	Present
2	East Arkansas Enterprise Community Forest City, AR	Non-profit Community based Organization	Consultant	6/06	Present
3	National Association of Resource Conservation & Development Councils, Washington, DC	Conservation Nonprofit	Board Member	6/06	2/09
4	Land Loss Prevention Project Durham, NC	Community based Organization Non-profit	Consultant	7/07	Present
5	Black Family Land Trust Durham, NC	Conservation Nonprofit	Board Member	6/08	Present
6	P. S. R. Natural Resources Consulting, LLC Marion, AR	For profit Consulting Business	Owner	03/08	Present

Part II: Compensation In Excess Of \$5,000 Paid by One Source

Report sources of more than \$5,000 compensation received by you or your business affiliation for services provided directly by you during any one year of the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise or any other non-profit organization when you directly provided the services generating a fee or payment of more than \$5,000. You need not report the U.S. Government as a source.

Do not complete this part if you are an Incumbent, Termination Filer, or Vice Presidential or Presidential Candidate.
None

	Source (Name and Address)	Brief Description of Duties
Examples	Doe Jones & Smith, Hometown, State Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services Legal services in connection with university construction
1	Monsanto Company St. Louis, MO	Consulting work on Black Farmer issues.
2	Landloss Prevention Project Durham, NC	Consultant work on Kellogg Foundation Project on equity.
3	East Arkansas Enterprise Community, Forest City, AR	Consulting work on wildlife habitat conservation project.
4	Virginia State University Petersburg, VA	Consultant to Dean--School of Agriculture
5	National Environmental Trust Washington, DC	Consultant on Global Warming Project
6	Oxfam America Boston, MA	Consultant of 2008 Farm Bill Project

Reporting Individual's Name Pearlie S. Reed	SCHEDULE D	Page Number 7
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Part I: Positions Held Outside U.S. Government

Report any positions held during the applicable reporting period, whether compensated or not. Positions include, but are not limited to those of an officer, director, trustee, general partner, proprietor, representative, employee, or

consultant of any corporation, firm, partnership, or other business enterprise or any non-profit organization or educational institution. Exclude positions with religious, social, fraternal, or political entities and those solely of an honorary nature.

None

	Organization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)
Examples:	Natl. Assn. of Book Collectors, NY, NY Doe Jones & Smith, Hometown, State	Non-profit/education Law firm	President Partner	6/92 7/85	Present 1/00
1	University of Arkansas at Pine Bluff Pine Bluff AK	University	Consultant Intermittent work	7/08 2005	2/09 Present
2	Oxfam America Boston, MA	Conservation/Economic Development	Consultant	01/07	8/08
3	National Environmental Trust Washington, DC	Conservation	Consultant	07/05	12/07
4					
5					
6					

Part II: Compensation In Excess Of \$5,000 Paid by One Source

Report sources of more than \$5,000 compensation received by you or your business affiliation for services provided directly by you during any one year of the reporting period. This includes the names of clients and customers of any

corporation, firm, partnership, or other business enterprise, or any other non-profit organization when you directly provided the services generating a fee or payment of more than \$5,000. You need not report the U.S. Government as a source.

Do not complete this part if you are an incumbent, Termination Filer, or Vice Presidential or Presidential Candidate.

None

	Source (Name and Address)	Brief Description of Duties
Examples:	Doe Jones & Smith, Hometown, State Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services Legal services in connection with university construction
1		
2		
3		
4		
5		
6		