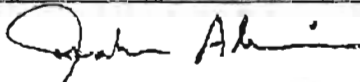
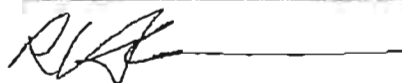



# Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Date of Appointment, Candidacy, Election or Nomination (Month, Day, Year)	Reporting Status (Check appropriate box) Incumbent <input type="checkbox"/>	Calendar Year Covered by Report	New Entrant, Nominee or Candidate <input checked="" type="checkbox"/>	Termination (Check appropriate box) Filed <input type="checkbox"/>	Termination Date (If Applicable) (Month, Day, Year)	<b>Fee for Late Filing</b> 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.  <b>Reporting Periods</b> If an individual is required to file 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 III of Schedule D is not applicable.  <b>Termination Filers:</b> 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 (Income): 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 (Assets and Arrangements): Show any agreements of 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.
Reporting Individual's Name	Last Name: Adelstein		First Name and Middle Initial: Jonathan			
Position for Which Filing	Title of Position: Administrator, Rural Utilities Service		Department or Agency (If Applicable): Department of Agriculture			
Location of Present Office (or forwarding address)	Address (Number, Street, City, State and ZIP Code): 445 12th Street S.W., Washington, D.C. 20554		Telephone No. (Within Area Code): (202) 418-2300			
Position(s) Held with the Federal Government During the Preceding 12 Months (If Not Same as Above)	Title of Position(s) and Dates Held: Commissioner, Federal Communications Commission (December 3, 2002 - Present)					
Presidential Nominee Subject to Senate Confirmation	Name of Congressional Committee Considering Nomination (If any): Committee on Agriculture, Nutrition and Forestry		Do you intend to create a Qualified Diversified Trust? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>Certification</b> I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge.	Signature of Reporting Individual: 		Date (Month, Day, Year): April 24, 2009			
<b>Other Review</b> (If desired by agency)	Signature of Other Reviewer:		Date (Month, Day, Year):			
<b>Agency Ethics Official's Opinion</b> 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: 		Date (Month, Day, Year): 4/24/09			
<b>Office of Government Ethics Use Only</b>	Signature: 		Date (Month, Day, Year): 4/28/09			
Comments of Reviewing Officials (If additional space is required use the reverse side of this sheet) <p style="text-align: right;">(Check box if filing extension granted &amp; indicate number of days _____) <input type="checkbox"/></p> <p>* change per conversation w/ Mike Edwards on 4/27/09. SHJ</p> <p style="text-align: right;">(Check box if comments are continued on the reverse side) <input type="checkbox"/></p>						
<b>OFFICE USE ONLY</b>						
APR 27 2009						

**SCHEDULE A**

Adelstein, Jonathan S.

Assets and Income BLOCK A		Valuation of Assets at close of reporting period - BLOCK B								Income: type and amount. If "None for less than \$200" is checked, no other entry is needed in Block C for that item.		Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.)  Only if Honoraria		
		None or less than \$1,000*	\$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	Excluded Investment Fund	Accepted Trust			Qualified Trust	Type
Examples															
	Central Airlines Common														
	Doe Jones & Smith, Hometown, State														
	Kemstone Equity Fund														
	IRA, Heartland 500 Index Fund														
1	Note receivable - Northwestern Engineering Company, Rapid City, SD Wood products and real estate (C:1:1:1:1)														
2	Northwestern Engineering Company, common stock														
3	Schwab Cash Sweep & Money Market														
4	Checking Account held with Bank of America		X												
5	Trust for minor child #1 held by Chevy Chase Bank, invested in bank CD (custodial account)														
6	Trust for minor child #2 held by Chevy Chase Bank, DC, invested in bank CD (custodial account)														

\* 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.

**SCHEDULE A continued**

Adelstein, Jonathan

(Use only if needed)

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 \$200)" is checked, no other entry is needed in Block C for that item.										Date (Mo., Day, Yr.)  Only if Honorary															
	None	Under \$1,000	\$1,000 - \$5,000	\$5,000 - \$10,000	\$10,000 - \$25,000	\$25,000 - \$50,000	\$50,000 - \$100,000	Over \$100,000	Over \$1,000,000	Over \$5,000,000	Over \$25,000,000	Excepted Investment Fund	Excepted Trust	Qualified Plan	Dividends	Bond and Royalties	Interest	Capital Gains	None (or less than \$200)	\$200 - \$1,000		\$1,000 - \$1,500	\$1,500 - \$5,000	\$5,000 - \$15,000	\$15,000 - \$50,000	\$50,000 - \$100,000	\$100,000 - \$1,000,000	Over \$1,000,000	Over \$10,000,000	Over \$50,000,000	Other Income (Specify Type & Actual Amount)					
1 Trust for minor child #1 held by Bank of America invested in a CD (custodial account)		X																																		
2 Trust for minor child #2 held by Bank of America invested in a CD (custodial account)		X																																		
3 FISERV Cash Management (company purchased by Ameritrade) Cash account														X							X															
4 Federated Investors Cash Management (FISERV, see #3) Cash account																X																				
5 SunTrust Investment (S11) Rldgeworth Large Cap Core			X																			X														
6 Great Granochildren Trust, at Smith Barney consisting of : Bank deposit program																	X																			
7 Lockheed Martin Corp. - common stock														X																						
8 Allstate Corp - common stock			X											X								X														
9 JP Morgan Chase & Co. - common stock			X											X								X														

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**SCHEDULE A continued**  
 (Use only if needed)

Adelstein, Jonathan

Assets and Income BLOCK A	Valuation of Assets at close of reporting period BLOCK B										Income: type and amount. If None (or less than \$201) is checked, no other entry is needed in Block C for that item. BLOCK C														
	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	Over \$1,000,000	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	Over \$25,000,000	Excepted (retirement fund)	Excepted (trust)	Qualified trust	Type		Amount				Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.)  Only If Honorary				
														Dividends	Rents and Royalties	Interest	Capital Gains	None (or less than \$201)	\$201 - \$1,000			\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000
1 Banker Life & Casualty Co - whole life insurance policy		x													x										
2 Security Life of Denver Insurance Co. - whole life insurance policy															x										
3 American Memorial Life Insurance Co. - whole life insurance policy		x													x										
4 Capital One - CD															x										
5 Franklin Growth Fund Class A (FKGRX) - IRA		x													x										
6 American Funds Europacific Growth Fund Class F (AEGFX) - IRA		x													x										
7 SunTrust Securities, Inc. Oppenheimer Capital Appreciation Class A - IRA		x													x										
8 SunTrust Securities, Inc. Oppenheimer Quest Balance Value Class A - IRA		x													x										
9 SunTrust Securities, Inc. Oppenheimer Main St Growth & Income Class A - IRA		x													x										

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Reporting Individual's Name

Adelstein, Jonathan

**SCHEDULE A continued**

(Use only if needed)

Page Number

7/32

Assets and Income BLOCK A	Valuation of Assets as of close of reporting period BLOCK B										Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item. BLOCK C									
	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	Over \$5,000,000	Over \$10,000,000	Over \$50,000,000	Over \$100,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honorary	Type	Amount				
None <input type="checkbox"/>																				
1 Oppenheimer IRA:																				
2 Advantage Primary Liquid Fund															X					
3 AllianceBernstein Small Cap Value Fund	X														X					
4 Allianz NFJ Large-Cap Value	X														X					
5 Fidelity Adv Leverage Company	X														X					
6 Gateway Fund	X														X					
7 Growth Fund of America	X														X					
8 Harding Loevner International	X														X					
9 Thornburg International Value	X														X					

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Reporting Individual's Name  
 Adelstein, Jonathan

**SCHEDULE A continued**  
 (Use only if needed)

Page Number  
 8/32

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 \$204)" is checked, no other entry is needed in Block C for that item.										
	None	None or less than \$1,000	\$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	Over \$5,000,000	Over \$25,000,000	Over \$50,000,000	Over \$100,000,000	Over \$250,000,000	Over \$500,000,000	Over \$1,000,000,000	Over \$2,500,000,000	Over \$5,000,000,000	Over \$10,000,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo./Day/Yr.) Only if Honoraria
1 Ilo K. Adelstein Trust Bonds																					
2 Fannie Mae (FNMA) Pass-thru PL 390900 7.5%		X																			
3 Harley Davidson Motor 2006-2 5.35%		X																			
4 FNMA Real Estate Mortgage Investment Conduit (REMIC) Trust 2006-B1 6%		X																			
5 Ginnie Mae (GNMA) Pass-thru X Single Family 6%		X																			
6 Fed. Home Loan Mort. Corp (FHLMC) REMIC Series 2582 5%		X																			
7 BA Mortgage Securities, Inc. 2003-5 5%		X																			
8 FNMA REMIC Trust 2003-75 4.5%		X																			
9 FNMA REMIC Trust 2003-86 4.5%		X																			

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**SCHEDULE A continued**

Adelstein, Jonathan

(Use only if needed)

Assets and Income BLOCK A	Valuation of Assets at close of reporting period BLOCK B										Income: type and amount. If "None (or less than \$200)" is checked, no other entry is needed in Block C for that item. BLOCK C																
											Type		Amount								Other Income (Specify Type & Actual Amount)	Date: (Mo., Day, Yr.)  Only if Honorary					
											Dividends	Rentals Royalties	None (or less than \$200)	Under \$1,000	\$1,000 - \$2,500	\$2,500 - \$5,000	\$5,000 - \$15,000	\$15,000 - \$50,000	\$50,000 - \$100,000	Over \$100,000			Over \$1,000,000	Over \$5,000,000			
None <input type="checkbox"/>	None (or less than \$1,000)	\$1,000 - \$5,000	\$5,000 - \$10,000	\$10,000 - \$25,000	\$25,000 - \$50,000	\$50,000 - \$100,000	Over \$100,000	Over \$500,000	Over \$1,000,000	Over \$5,000,000	Excepted Investment Trust	Excepted Trust	Qualified Plan	Dividends	Rentals Royalties	None (or less than \$200)	Under \$1,000	\$1,000 - \$2,500	\$2,500 - \$5,000	\$5,000 - \$15,000	\$15,000 - \$50,000	\$50,000 - \$100,000	Over \$100,000	Over \$1,000,000	Over \$5,000,000		
1	FHLMC REMIC Series 2812 5%	X														X											
2	FHLMC REMIC Series 3064 5.5%	X														X											
3	FNMA Series CL M 6.5%	X														X											
4	FHLMC REMIC Series CL K 6.9%	X														X											
5	FNMA Series 93-178 6.5%	X														X											
6	FHLMC REMIC Series G020 5.5%	X														X											
7	FNMA Series 93203 6.5%	X														X											
8	GNMA Pass-thru X SF PL366627X 6.5%	X														X											
9	FNMA Series 93-202 6.5%	X											X														

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Reporting Individual's Name

Adelstein, Jonathan

**SCHEDULE A continued**

(Use only if needed)

Page Number

11/32

Assets and Income BLOCK A		Valuation of Assets at close of reporting period BLOCK B								Income type and amount. If "None" or less than \$200 is checked, no other entry is needed in Block C for that item. BLOCK C																			
		None (over \$100,000)	\$100,001 - \$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	Accepted by Strategic Fund	Exceptional Basis	Qualifying Debt	Type	Amount										Other Income (Specify Type & Actual Amount)	Date (Mo./Day/yr) Only if Honorary				
None <input type="checkbox"/>		None (over \$100,000)	\$100,001 - \$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	Accepted by Strategic Fund	Exceptional Basis	Qualifying Debt	Digipend	Rent and royalties	Interest	Capital Gain	None (or less than \$200)	\$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		
1	FHLMC REMIC Series 1682 6.5%		X														X												
2	FNMA Series 94-081 7.5%		X														X												
3	FNMA REMIC Trust 1994-51 6.75%																X												
4	FNMA Series 94-065 7.375%		X														X												
5	FHLMC Series 1831 7.1%		X														X												
6	GNMA Pass-thru X SF PL424492X 6%		X														X												
7	FNMA MTN 6%		X														X												
8	GNMA Pass-thru M SF PL002322M 7.5%		X														X												
9	FHLMC REMIC Series 2966 5%		X														X												

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**SCHEDULE A continued**

Adelstein, Jonathan

(Use only if needed.)

Assets and Income BLOCK A		Valuation of Assets at close of reporting period BLOCK B										Income type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item. BLOCK C																	
		None (or less than \$1,000)	\$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	Proprietary investment fund	Exceptional trust	Qualified trust	Dividends	Royalties	Interest	Capital gain	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	Over \$100,000	Other Income (Specify Type & Amount)
1	GNMA Pass-thru M SF PL002457M 7.5%	X																		X									
2	GNMA 97-18 7%	X																		X									
3	GNMA Pass-thru M SF PL002536M 7.5%	X															X												
4	FHLMC REMIC Series 2042 7%	X																			X								
5	GNMA Pass-thru M SF PL002565M 7.5%	X																		X									
6	FHLMC REMIC Series 2086 6.5%	X																		X									
7	GNMA Pass-thru X SF PL483362X 7.5%																			X									
8	GNMA Pass-thru M SF PL002810M 7.6%	X																		X									
9	GNMA Pass-thru M SF PL003055M 7.5%																			X									

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Reporting Individual's Name  
 Adelstein, Jonathan

**SCHEDULE A continued**

Page Number  
 13/32

(Use only if needed)

BLOCK A	BLOCK B							BLOCK C														
	Valuation of Assets at close of reporting period							Income: type and amount. If "None (or less than \$200)" 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 Honorary		
							Dividend	Rent and Royalties	Interest	Capital Gains	None (or less than \$200)	\$0 - \$1,000	\$1,001 - \$1,500	\$1,501 - \$2,000	\$2,001 - \$5,000	\$5,001 - \$10,000	\$10,001 - \$100,000	Over \$100,000			Over \$5,000,000	
1	FHLMC REMIC Series 2308 6.375%	X										X										
2	GNMA Pass-thru X SF PL564563X 7.6%	X										X										
3	GNMA Pass-thru X SF PL561992X 7.5%	X								X		X										
4	FHLMC REMIC Series 2358 6%	X										X										
5	GNMA Pass-thru X Plat PL781340X 6.5%	X										X										
6	GNMA REMIC Trust 2001-52 6%	X										X										
7	FNMA REMIC Trust 2001-60 6%											X										
8	FHLMC REMIC Series 2833 5.5%	X										X										
9	FNMA REMIC Trust 2001-63 6%	X										X										

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Reporting Individual's Name

Adelstein, Jonathan

**SCHEDULE A continued**

(Use only if needed)

Page Number

14/32

BLOCK A	BLOCK B								BLOCK C									
	Valuation of Assets at close of reporting period								Type	Income: type and amount. If "None (or less than \$200)" is checked, no other entry is needed in Block C for that item.								
None <input type="checkbox"/>	None (or less than \$1,000)	\$1,001 - \$5,000	\$5,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000	Over \$5,000,000	Over \$25,000,000	Over \$50,000,000	Over \$100,000,000	Over \$500,000,000	Over \$1,000,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.)			
	Dividends	Rents and Royalties	Interest	Capital Gain	None (or less than \$200)	\$201 - \$500	\$501 - \$5,000	\$5,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000	Over \$5,000,000	Over \$25,000,000					
1		X																
2		X																
2		X																
4		X																
6		X																
6		X																
7		X																
8		X																
9		X																

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Reporting Individual's Name  
 Adelstein, Jonathan

**SCHEDULE A continued**  
 (Use only if needed)

Page Number  
 15/32

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 \$20)" is checked, no other entry is needed in Block C for that item.)							
	Over \$1,000,000	\$500,001 - \$1,000,000	\$100,001 - \$500,000	\$25,001 - \$100,000	\$5,001 - \$25,000	Over \$1,000,000	\$500,001 - \$1,000,000	\$100,001 - \$500,000	\$25,001 - \$100,000	\$5,001 - \$25,000	Over \$1,000,000	Over \$500,000	Over \$100,000	Over \$25,000	Over \$5,000	None (or less than \$20)	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
None <input type="checkbox"/>																		
1 GNMA Pass-thru X SF PL556047X 7.5%																X		
2 FNMA REMIC Trust 2002-33 6.25%																X		
3 Chase Commercial Mortgage Securities 2000-2 7.631%																X		
4 FHLMC REMIC Series 2470 6%																X		
5 GNMA REMIC Trust 2002-51 6%																X		
6 GNMA REMIC Trust 2004-63 6%																X		
7 GNMA REMIC Trust 2002-60 6%																X		
8 GNMA REMIC Trust 2002-48 6%																X		
9 GNMA Pass-thru X SF PL576264X 6%																X		

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**SCHEDULE A continued**

Adelstein, Jonathan

(Use only if needed)

BLOCK A	BLOCK B								BLOCK C		Other Income (Specify Type & Amount)	Date (Mo., Day, Yr.) Only if Honoraria				
	Valuation of Assets at close of reporting period								Type	Amount						
	None or less than \$1,000	\$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	Over \$5,000,000	Dividends	None (or less than \$20)	\$20 - \$100	\$101 - \$500	\$501 - \$1,000	\$1,001 - \$500,000	Over \$500,000
1		X														
2		X														
3		X														
4		X														
5		X														
6		X														
7		X														
8		X														
9		X														

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Reporting Individual's Name

Adelstein, Jonathan

**SCHEDULE A continued**

(Use only if needed)

Page Number

17/32

BLOCK A	BLOCK B										BLOCK C						
	None (or less than \$100)	\$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	\$1,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Preferential treatment	Respected Trust	Qualified Trust	Type	Amount	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
None <input type="checkbox"/>																	
1		X												X			
2		X												X			
3		X												X			
4		X												X			
5		X												X			
6		X												X			
7		X												X			
8		X												X			
9		X												X			

\* 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.

Reporting Individual's Name

Adelstein, Jonathan

**SCHEDULE A continued**

Page Number

18/32

(Use only if needed)

BLOCK A	BLOCK B								BLOCK C															
	None	\$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*	None	Dividends	Rent and Royalties	Interest	Capital Gain	None (or less than \$200)	\$201 - \$1,000	\$1,001 - \$1,500	\$1,501 - \$1,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000*	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
1		X												X										
2														X										
3		X												X										
4		X												X										
5		X												X										
6		X												X										
7		X												X										
8		X												X										
9		X												X										

\* 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.

Reporting Individual's Name

Adelslein, Jonathan

**SCHEDULE A continued**

(Use only if needed)

Page Number

19/32

Assets and Income BLOCK A		Valuation of Assets at close of reporting period BLOCK B										Income: type and amount. If None for less than \$20, "N" is checked, no other entry is needed in Block C for that item. BLOCK C											
		None (or less than \$1,000)	\$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	Over \$5,000,000	Over \$25,000,000	Over \$50,000,000	Over \$100,000,000	Over \$500,000,000	Over \$1,000,000,000	Over \$5,000,000,000	Over \$25,000,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honorary				
None <input type="checkbox"/>												Type	Amount										
		None (or less than \$1,000)	\$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	Over \$5,000,000	Over \$25,000,000	Over \$50,000,000	Over \$100,000,000	Over \$500,000,000	Over \$1,000,000,000	Over \$5,000,000,000	Over \$25,000,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honorary				
1	FHLMC REMIC Series 2820 5.5%		X																				
2	FHLMC REMIC Series 2870 6.5%		X																				
3	FHLMC REMIC Series 2749 5.5%		X																				
4	GNMA REMIC Trust 2004-87 4.5%		X																				
5	FNMA REMIC Trust 2004-40 5.5%		X																				
6	CWMBS Inc 2004-9 5.25%		X																				
7	Wells Fargo MBS 2004-6 6%																						
8	FHLMC REMIC Series 2844 5.5%		X																				
9	FNMA REMIC Trust 2004-87 5.25%		X																				

\* 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.

Reporting Individual's Name

Adelstein, Jonathan

**SCHEDULE A continued**

(Use only if needed)

Page Number

20/32

BLOCK A	BLOCK B										BLOCK C														
	Valuation of Assets at close of reporting period										Income, type and amount. If "None for less than \$200" as 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 for less than \$200	Over \$1,000,000	Over \$5,000,000												
None <input type="checkbox"/>	\$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	Over \$5,000,000	Over \$10,000,000	Over \$50,000,000	Accepted Investment Fund	Excepted Trust	Qualified Trust	None for less than \$200	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	Over \$100,000	Over \$1,000,000	Over \$5,000,000		
1	FNMA REMIC Trust 2005-101 5.5%	X											X												
2	FHLMC REMIC Series 3002 5%	X											X												
3	FNMA REMIC Trust 2005-87 5%	X											X												
4	FNMA REMIC Trust 2005-123 5.5%	X											X												
5	GNMA Pass-thru X Plat PL781834X 6%	X											X												
6	ChGroup MTG LN TR 2004-NCM2 6.75%	X											X												
7	FNMA REMIC Trust 2004-82 5.5%	X											X												
8	FNMA REMIC Trust 2004-99 5.5%												X												
9	FNMA REMIC Trust 2004-100 5.5%	X											X												

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**SCHEDULE A continued**

Adelstein, Jonathan

(Use only if needed)

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 \$20)" is checked, no other entry is needed in Block C for that item.									
	None (or less than \$1,000)	\$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	None (or less than \$20)	\$20 - \$100	\$100 - \$250	\$250 - \$500	\$500 - \$1,000	\$1,000 - \$15,000	\$15,000 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
1 FHLMC REMIC Series 2925 5%			X										X							
2 FHLMC REMIC Series 2975 5.5%			X										X							
3 FNMA REMIC Trust 2004-101 5.5%			X										X							
4 FHLMC REMIC Series 3025 5%			X										X							
5 FHLMC REMIC Series 3048 5.25%			X										X							
6 Structured Asset Securities Corp. 2005-6 5.5%			X										X							
7 FHLMC REMIC Series 3002 5%													X							
8 FNMA REMIC Trust 2005-57 5.5%			X										X							
9 FHLMC REMIC Series 3022 5%			X										X							

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Reporting Individual's Name  
 Adelstein, Jonathan

**SCHEDULE A continued**  
 (Use only if needed)

Page Number  
 22/32

BLOCK A	BLOCK B										BLOCK C																	
	Valuation of Assets at close of reporting period										Income: type and amount. If "None (or less than \$200)" is checked, no other entry is needed in Block C for that item.																	
											Type	Amount						Date (Mo., Day, Yr.) Only if Honoraria										
																	Other Income (Specify Type & Actual Amount)											
											None (or less than \$200)	\$200 - \$499	\$500 - \$999	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$49,999		\$50,000 - \$99,999	\$100,000 - \$499,999	Over \$500,000	None (or less than \$200)	\$200 - \$499	\$500 - \$999	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$49,999	Over \$50,000	
1	FHLMC REMIC Series 3022 5.5%											X																
2	FNMA REMIC Trust 2005-84 5.25%											X																
3	FNMA REMIC Trust 2005-84 5%											X																
4	GNMA Pass-thru M SF PL003787M 6%											X																
5	FNMA REMIC Trust 2005-99 5.5%											X																
6	CitiGroup MTG LN TR 2006-1 5.5%											X																
7	FHLMC REMIC Series 3164 6%											X																
8	FNMA REMIC Trust 2006-10 5.5%											X																
9	FHLMC REMIC Series 3333 6%											X																

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Reporting Individual's Name <b>Adelstein, Jonathan</b>	<b>SCHEDULE A continued</b> (Use only if needed)	Page Number <b>23/32</b>
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Assets and Income <small>(BLOCK A)</small>	Valuation of Assets at close of reporting period <small>(BLOCK B)</small>										Income type and amount. If "None for less than \$200" is checked, no other entry is needed in Block C for that item. <small>(BLOCK C)</small>													
	None	\$1,000 - \$49,999	\$50,000 - \$99,999	\$100,000 - \$249,999	\$250,000 - \$499,999	\$500,000 - \$999,999	Over \$1,000,000	\$1,000,000 - \$2,499,999	\$2,500,000 - \$4,999,999	Over \$5,000,000	Exception to General Rule	Divorced/Divorcing	Type	Amount					Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr)	Gift or Honoraria			
None <input type="checkbox"/>	None for less than \$1,000	\$1,001 - \$49,999	\$50,000 - \$99,999	\$100,000 - \$249,999	\$250,000 - \$499,999	\$500,000 - \$999,999	Over \$1,000,000	\$1,000,000 - \$2,499,999	\$2,500,000 - \$4,999,999	Over \$5,000,000	None for less than \$200	\$201 - \$499	\$500 - \$999	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$49,999	\$50,000 - \$99,999	Over \$100,000	Over \$500,000	Over \$1,000,000	None	None		
1 FNMA Pass-thru PL891913 6.5%		X											X											
2 FNMA REMIC Trust 2006-73 6%													X											
3 FHLMC REMIC Series 3243 5.5%		X											X											
4 FHLMC REMIC Series 3243 6%		X											X											
5 FNMA REMIC Trust 2008-58 5.5%		X											X											
6 FHLMC REMIC Series 3347 5%		X											X											
7 GNMA Pass-thru X SF PL671325X 6%		X											X											
8 FHLMC REMIC Series 3415 5.5%		X											X											
9 Credit Suisse First Boston Mortgage Securities Corp. PTC 2005-C5 5.1%		X											X											

\* 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.

Reporting Individual's Name

Adelstein, Jonathan

**SCHEDULE A continued**

(Use only if needed)

Page Number

24/32

BLOCK A	Valuation of Assets at close of reporting period BLOCK B								Income: type and amount. If "None (or less than \$200)" is checked, no other entries are needed in Block C for that item. BLOCK C		Other Income (Specify Type & Amount)	Date (Mo., Day, Yr.) Only if Honorary	
	None (or less than \$100)	\$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	Type	Amount			
									Dividend	None (or less than \$200)			
									Real Estate Royalty	\$101 - \$1,000			
									Interest	\$1,001 - \$15,000			
									Capital Gain	\$15,001 - \$50,000			
										\$50,001 - \$100,000			
										\$100,001 - \$1,000,000			
										Over \$1,000,000			
1	Banc Amar CMBS 2004-1 4.037%										x		
2	Municipal Bonds:												
3	Indio CA CMNTY FAC DIST 4.376%	x									x		
4	Travis Cnty Tex Health FACs 5.2%	x									x		
5	California ST PUB WKS 5.25%	x									x		
6	Ohio St Air Quality Dev 10%	x									x		
7	Washington St Health Care FACS 6.25%	x									x		
8	Port Oakland CA Rev 5%	x									x		
9	Long Beach CA BD Fin Auth 5.25%	x									x		

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Reporting Individual's Name

Adelstein, Jonathan

**SCHEDULE A continued**

(Use only if needed)

Page Number

26/32

BLOCK A	BLOCK B							BLOCK C							
	None or less than \$100,000	\$100,000 - \$150,000	\$150,000 - \$500,000	\$500,000 - \$1,000,000	\$1,000,000 - \$250,000	\$250,000 - \$500,000	Over \$500,000	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	Over \$50,000	Other Income (Specify Type & Actual Amount)
None <input type="checkbox"/>															
1															
Washington St Health Care FACS 5.25%															
2															
Roseville CA Nat Gas 5%	X														
3															
Chula Vista CA INDL Dev Rev 5%	X														
4															
Shasta CA Joint Powers Financing Authority 5%															
5															
Tobacco Settlement Corp NJ 5%	X														
6															
Michigan St Strategic FD 5.65%	X														
7															
Atlanta GA Arpt Rev 5.6%	X														
8															
Long Beach CA BD Fin Auth 5.5%	X														
9															
San Jose CA ARPT REV 5.5%	X														

\* 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.





Reporting Individual's Name  
 Adelstein, Jonathan

**SCHEDULE A continued**  
 (Use only if needed)

Page Number  
 28/32

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.												
	None <input type="checkbox"/>	Over \$1,000,000*	\$500,001 - \$1,000,000	\$100,001 - \$500,000	\$50,001 - \$100,000	\$10,001 - \$50,000	Over \$1,000,000*	\$500,001 - \$1,000,000	\$100,001 - \$500,000	\$50,001 - \$100,000	\$10,001 - \$50,000	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	Over \$1,000,000*	Over \$5,000,000*	Other Income (Specify Type & Actual Amount)	Date (Mo./Day/Yr) Only if Honorary
1	Intentionally blank																				
2	Intentionally blank																				
3	Point Center Mortgage Fund LLC Aliso Viejo, CA, servicing real estate mortgages, primarily in California			X								X									
4	SFG Income Fund VI (SFG): Mortgage fund, Bellevue, Washington 4 notes from SFG payable to the Trust																				
5	SFG-Note 8/30/12 7.25%			X								X									
6	SFG-Note 2/21/13 7.25%			X								X									
7	SFG-Note 7/15/13 7.25%											X									
8	SFG-Note 5/01/11 7.0%											X									
9	End Ita Adelstein Trust																				

\* 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.

Reporting Individual's Name  
 Adelstein, Jonathan

**SCHEDULE A continued**  
 (Use only if needed)

Page Number  
 29/32

BLOCK A	BLOCK B							BLOCK C																
	Valuation of Assets at close of reporting period							Type	Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.															
BLOCK A	None	\$1-\$15,000	\$15,001-\$50,000	\$50,001-\$100,000	\$100,001-\$500,000	\$500,001-\$1,000,000	Over \$1,000,000		Prepaid Investment Fund	Executed Trust	Qualified Plan	Dividends	Rent and Royalties	Interest	Capital Gains	None (or less than \$201)	\$201-\$1,000	\$1,001-\$2,500	\$2,501-\$5,000	\$5,001-\$15,000	\$15,001-\$50,000	Over \$50,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honorary
	1	<input type="checkbox"/>																						
2															X									
3																								
4																								
5				X											X									
6					X										X									
7		X													X									
8				X											X									
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 <b>Adelstein, Jonathan S.</b>	<b>SCHEDULE B</b>	Page Number <b>30/32</b>
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<b>Part I: Transactions</b>		None <input type="checkbox"/>																
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 exceeds \$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.		Transaction Type (a)		Date (Mo., Day, Yr.)		Amount of Transaction (b)												
Identification of Asset		Purchase	Sale	Exchange	None	\$0-\$5,000	\$5,001 - \$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 Common				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.

<b>Part II: Gifts, Reimbursements, and Travel Expenses</b>		None <input type="checkbox"/>																
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. 84111 or other statutory authority, etc. For travel-related gifts and reimbursements, include travel itinerary, dates, and the nature of expenses provided. Exclude anything given or won 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: Nat'l Assn. of Rose Collectors, NY, NY Frank Jones, San Francisco, CA		Airline ticket, hotel room & meals incident to national conference (to spouse/personal activity unrelated to duty)		Leather briefcase (personal friend)														
1																		
2																		
3																		
4																		
5																		

Reporting Individual's Name <b>Adelstein, Jonathan S.</b>	<b>SCHEDULE C</b>	Page Number <b>31/32</b>
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**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

Creditor's Name and address	Type of liability	Date incurred	Interest Rate	Term or applicable	Category of Amount or Value (2)														
					\$ 0/00	\$ 15,000	\$ 25,000	\$ 50,000	\$ 75,000	\$ 100,000	\$ 250,000	\$ 500,000	\$ 1,000,000	Over \$1,000,000	Other				
Example: First District Bank, Washington, DC John Jones, 123 J St., Washington, DC	Mortgage on rental property, Delaware Promissory note	1991-1999	8% 10 3/8%	20 yrs on demand															
1																			
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

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

Reporting Individual's Name <b>Adelstein, Jonathan S.</b>	<b>SCHEDULE D</b>	Page Number <b>32/32</b>
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<b>Part I: Positions Held Outside U.S. Government</b>				
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 nonprofit organization, or educational institution. It includes entities with religious, social, fraternal, or political entities and those solely of an honorary nature.		
Organization (Name and Address)		Type of Organization	Position Held	From (Mo., Yr.)
Examples: <b>Nat'l Assn. of Rock Collectors, NY, NY</b> Nonprofit/education      President      6/92      Present <b>Doc Jones &amp; Smith, Hometown, State</b> Law firm      Partner      7/83      1/00				
1	Great Grandchildren Trust (See Schedule A, Page 3)	Trust	Trustee	10/07      Present
2				
3				
4				
5				
6				

<b>Part II: Compensation in Excess Of \$5,000 Paid by One Source</b>			Do not complete this part if you are an Incumbent, Termination Filer, or Vice Presidential or Presidential Candidate.	
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.		
Source (Name and Address)		Brief Description of Duties		
Examples: <b>Doc Jones &amp; Smith, Hometown, State</b> Legal services <b>Metro University (Client of Doc Jones &amp; Smith), Midtown, State</b> Legal services in connection with university construction				
1				
2				
3				
4				
5				
6				