

UNITED STATES SENATE FINANCIAL DISCLOSURE REPORT FOR ANNUAL AND TERMINATION REPORTS

| | | | |
|---|---|--|---|
| Last Name Beigich | First Name and Middle Initial Mark | Annual Report Calendar Year Covered by Report: 2010 | Senate Office / Agency in Which Employed Senate/State of Alaska |
| Senate Office Address (Number, Street, City, State, and ZIP Code) 111 Russell Senate Office Bldg. Washington D.C. 20510 | Senate Office Telephone Number (Include Area Code) 202-224-3304 | Termination Report Termination Date (mm/dd/yy): n/a | Prior Office / Agency in Which Employed |

AFTER READING THE INSTRUCTIONS - ANSWER EACH OF THESE QUESTIONS AND ATTACH THE RELEVANT PART

| | | YES | NO | | | YES | NO |
|---|-------------------------------------|-------------------------------------|----|--|-------------------------------------|-------------------------------------|----|
| Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If Yes, Complete and Attach PART I. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | Did you, your spouse, or dependent child receive any reportable travel or reimbursements for travel in the reporting period (i.e., worth more than \$335 from one source)? If Yes, Complete and Attach PART VI. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Did you or your spouse have earned income (e.g., salaries or fees) or non-investment income of more than \$200 from any reportable source in the reporting period? If Yes, Complete and Attach PART II. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | Did you, your spouse, or dependent child have any reportable liability (more than \$10,000) during the reporting period? If Yes, Complete and Attach PART VII. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| Did you, your spouse, or dependent child hold any reportable asset worth more than \$1,000 at the end of the period, or receive unearned or investment income of more than \$200 in the reporting period? If Yes, Complete & Attach PART IIIA and/or IIIB. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | Did you hold any reportable positions on or before the date of filing in the current calendar year? If Yes, Complete and Attach PART VIII. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than \$1,000 in the reporting period? If Yes, Complete and Attach PART IV. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | Do you have any reportable agreement or arrangement with an outside entity? If Yes, Complete and Attach PART IX. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Did you, your spouse, or dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If Yes, Complete and Attach PART V. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | If this is your FIRST Report: Did you receive compensation of more than \$5,000 from a single source in the <u>two</u> prior years? If Yes, Complete and Attach PART X. | <input type="checkbox"/> | <input type="checkbox"/> | |

Each question must be answered and the appropriate PART attached for each "YES" response.

File this report and any amendments with the Secretary of the Senate, Office of Public Records, Room 232, Hart Senate Office Building, U.S. Senate, Washington, DC 20510. \$200 Penalty for filing more than 30 days after due date.

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The statement will be made available by the Office of the Secretary of the Senate to any requesting person upon written application and will be reviewed by the Select Committee on Ethics. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions. (See 5 U.S.C. app. 4, § 104, and 18 U.S.C. § 1001.)

**FOR OFFICIAL USE ONLY
Do Not Write Below this Line**

| | | |
|--|-----------------------------------|-------------------------|
| Certification | Signature of Reporting Individual | Date (Month, Day, Year) |
| 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 and belief. | | 7-21-11 |

For Official Use Only - Do Not Write Below This Line

| | | |
|---|---------------------------------|-------------------------|
| It is the Opinion of the reviewer that the statements made in this form are in compliance with Title I of the Ethics in Government Act. | Signature of Reviewing Official | Date (Month, Day, Year) |
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PART II. EARNED AND NON-INVESTMENT INCOME

Report the source (name and address), type, and amount of earned income to you from any source aggregating \$200 or more during the reporting period. For your spouse, report the source (name and address) and type of earned income which aggregate \$1,000 or more during the reporting period. No amount needs to be specified for your spouse. (See p.3, CONTENTS OF REPORTS Part B of Instructions.) Do not report income from employment by the U.S. Government for you or your spouse.

Individuals not covered by the Honoraria Ban:

For you and /or your spouse, report honoraria income received which aggregates \$200 or more by exact amount, give the date of, and describe the activity (speech, appearance or article) generating such honoraria payment. Do not include payments in lieu of honoraria reported on Part I.

| Name of Income Source | | Address (City, State) | | Type of Income | Amount |
|-----------------------|---------------------------|-----------------------|---------|----------------|----------------------|
| Example: | JP Computers | Wash., DC | Example | Salary | Example \$15,000 |
| | MCI (Spouse) | Arlington, VA | Example | Salary | Example Over \$1,000 |
| 1 | Sourdough Mercantile (S) | Anchorage, Alaska | | Salary | 96000 |
| 2 | Kobuk Coffee Co. Corp (S) | Anchorage, Alaska | | Salary | 5000 |
| 3 | | | | | |
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Reporting Individual's Name
Mark Begich

PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

Page Number
3a

| BLOCK A Identity of Publicly Traded Assets And Unearned Income Sources | | BLOCK B Valuation of Assets At the close of reporting period. If None, or less than \$1,001, Check the first column. | | | | | | | | | | BLOCK C Type and Amount of Income | | | | | | | | | | | | | | | | | | | | | | |
|--|---|--|--------------------|---------------------|----------------------|-----------------------|-----------------------|-------------------------|---------------------|---------------------------|----------------------------|--------------------------------------|-------------------|------|-----------|---------------|--------------------------|----------------|--------------------------|-------------------------|---------------------------|-------------------------|---------------------------|-------------------|--------------------|---------------------|----------------------|-------------------------|----------------------|---------------------------|---------------------|--|------------------|--|
| | | | | | | | | | | | | Type of Income | | | | | | | | | | Amount of Income | | | | | | | | | | | | |
| | | | | | | | | | | | | None | Dividends | Rent | Interest | Capital Gains | Excepted Investment Fund | Excepted Trust | Qualified Blind Trust | Other (Specify Type) | 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 | Actual Amount Required if "Other" Specified | | |
| Report the complete name of each publicly traded asset held by you, your spouse, or your dependent child, (See p.3, CONTENTS OF REPORTS Part B of Instructions) for production of income or investment which: (1) had a value exceeding \$1,000 at the close of the reporting period; and/or (2) generated over \$200 in "unearned" income during the reporting period. Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan. | | 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 | None | Dividends | Rent | Interest | Capital Gains | Excepted Investment Fund | Excepted Trust | Qualified Blind Trust | Other (Specify Type) | 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 | Actual Amount Required if "Other" Specified |
| Example: DC, or J | S, IBM Corp. (stock) (S) Keystone Fund | | | X | | | | | | | | | X | | | | | | X | | Example | X | | | | | | | | | | Example | | |
| 1 | AKUSA F.C.U. (Bank Account) (J) | X | | | | | | | | | | | | | | X | | | | | | X | | | | | | | | | | | | |
| 2 | Etrade (Bank Account)(S) | X | | | | | | | | | | | | | | X | | | | | | X | | | | | | | | | | | | |
| 3 | Wells Fargo (Checking Account) | X | | | | | | | | | | | | | | X | | | | | | X | | | | | | | | | | | | |
| 4 | Public Employee Retirement System State of Alaska | | | | X | | | | | | | | | | | | | X | | | | | | | X | | | | | | | | | |
| 5 | Public Employee Retirement System State of Alaska (S) | | | X | | | | | | | | | | | | | | X | | | | | X | | | | | | | | | | | |
| 6 | AKUSA F.C.U. (Savings Account)(DC) | X | | | | | | | | | | | | | | X | | | | | | X | | | | | | | | | | | | |
| 7 | Denali F.C.U. (Bank Account) | X | | | | | | | | | | | | | | X | | | | | | X | | | | | | | | | | | | |
| 8 | AKUSA -Bank Acct (S) | | | | X | | | | | | | | | | | X | | | | | | | X | | | | | | | | | | | |
| 9 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.
 *** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

| BLOCK A Identity of Publicly Traded Assets And Unearned Income Sources | | BLOCK B Valuation of Assets | | | | | | | | | | BLOCK C Type and Amount of Income | | | | | | | | | | | | | | | | | | | | | | |
|--|---|--|--------------------|---------------------|----------------------|-----------------------|-----------------------|-------------------------|---------------------|---------------------------|----------------------------|---|-------------------|------|-----------|------|------------------|---------------|--------------------------|----------------|-----------------------|-------------------------|---------------------------|-----------------|-------------------|-------------------|--------------------|---------------------|----------------------|-------------------------|---------------------|---------------------------|------------------|--|
| | | At the close of reporting period. If None, or less than \$1,001, Check the first column. | | | | | | | | | | If "None (or less than \$201)" is Checked, no other entry is needed in Block C for that item. This includes income received or accrued to the benefit of the individual. | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | Type of Income | | | | | Amount of Income | | | | | | | | | | | | | | | | | |
| Report the complete name of each publicly traded asset held by you, your spouse, or your dependent child, (See p.3, CONTENTS OF REPORTS Part B of Instructions) for production of income or investment which: (1) had a value exceeding \$1,000 at the close of the reporting period; and/or (2) generated over \$200 in "unearned" income during the reporting period. Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan. | | 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 | None | Dividends | Rent | Interest | Capital Gains | Excepted Investment Fund | Excepted Trust | Qualified Blind Trust | Other (Specify Type) | 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 | Actual Amount Required if "Other" Specified |
| | | Example: S, DC, or J | IBM Corp. (stock) | | | X | | | | | | | | | X | | | | | | | | Example | X | | | | | | | | | | |
| | (S) Keystone Fund | | | | X | | | | | | | | | | | | X | | | | Example | X | | | | | | | | | | | Example | |
| 1 | (S) Annaly Cap Mgmt - Stock | | | X | | | | | | | | | X | | | | | | | | | | | | X | | | | | | | | | |
| 2 | (S) Nokia Corp Sponsored ADR - Stock | X | | | | | | | | | | | X | | | | | | | | | | X | | | | | | | | | | | |
| 3 | (S) New York Community Bank- Stock | | | X | | | | | | | | | X | | | | | | | | | | X | | | | | | | | | | | |
| 4 | (S) Quantum Fuel Sys Tech Worldwide-Stock | X | | | | | | | | | | | X | | | | | | | | | | X | | | | | | | | | | | |
| 5 | (S) Rite Aid - Stock | X | | | | | | | | | | | X | | | | | | | | | | X | | | | | | | | | | | |
| 6 | (S) Regal Entertainment Group - Stock | | | X | | | | | | | | | X | | | | | | | | | | | | | X | | | | | | | | |
| 7 | (S) Excel Energy Inc - Stock | | | X | | | | | | | | | X | | | | | | | | | | | X | | | | | | | | | | |
| 8 | (S) Xerox - Stock | X | | | | | | | | | | | X | | | | | | | | | | X | | | | | | | | | | | |
| 9 | Acusphere Inc - Stock | X | | | | | | | | | | | X | | | | | | | | | | X | | | | | | | | | | | |
| 10 | Alcatel-Lucent - Stock | X | | | | | | | | | | | X | | | | | | | | | | X | | | | | | | | | | | |

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.
 *** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.



PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

BLOCK A
Identity of Publicly Traded Assets And Unearned Income Sources

Report the complete name of each publicly traded asset held by you, your spouse, or your dependent child, (See p.3, CONTENTS OF REPORTS Part B of Instructions) for production of income or investment which:

(1) had a value exceeding \$1,000 at the close of the reporting period; and/or

(2) generated over \$200 in "unearned" income during the reporting period.

Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.

BLOCK B
Valuation of Assets

At the close of reporting period. If None, or less than \$1,001, Check the first column.

| | | | | | | | | | | | |
|-----------------------------|--------------------|---------------------|----------------------|-----------------------|-----------------------|-------------------------|---------------------|---------------------------|----------------------------|-----------------------------|-------------------|
| 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 |
|-----------------------------|--------------------|---------------------|----------------------|-----------------------|-----------------------|-------------------------|---------------------|---------------------------|----------------------------|-----------------------------|-------------------|

BLOCK C
Type and Amount of Income

If "None (or less than \$201)" is Checked, no other entry is needed in Block C for that item. This includes income received or accrued to the benefit of the individual.

| Type of Income | | | | | | | | | | Amount of Income | | | | | | | | | | Actual Amount Required if "Other" Specified |
|----------------|-----------|------|----------|---------------|--------------------------|----------------|-----------------------|----------------------|---------------------------|------------------|-------------------|-------------------|--------------------|---------------------|----------------------|-------------------------|---------------------|---------------------------|------------------|---|
| None | Dividends | Rent | Interest | Capital Gains | Excepted Investment Fund | Excepted Trust | Qualified Blind Trust | Other (Specify Type) | 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 | |

| | | | | | | | | | | | | | | | | | | | | | |
|-------------------|--------------------------|---|---|---|---|---|--|--|--|---|---|--|---|---|---|--|--|--|--|--|---------|
| Example: DC, or J | S, IBM Corp. (stock) | | | | X | | | | | X | | | | | | | | | | | Example |
| | (S) Keystone Fund | | | | | X | | | | | X | | | | | | | | | | Example |
| 1 | (S) Westwood One - Stock | X | | | | | | | | | | | | X | | | | | | | |
| 2 | IMPASS- Stock | | | X | | | | | | X | | | | | X | | | | | | |
| 3 | Westwood One-Stock | X | | | | | | | | | | | X | | | | | | | | |
| 4 | Citigroup - Stock | X | | | | | | | | | | | | X | | | | | | | |
| 5 | Ambac-stock | | X | | | | | | | X | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | | | | | | | | | |
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EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.

*** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

Reporting Individual's Name
Mark Begich

PART IIIB. NON-PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

Page Number
3b

BLOCK A
Identity of Non-Publicly Traded Assets and Unearned Income Sources

Report the name, address (city, state and description) of each interest held by you, your spouse, or your dependent child (See p.3, CONTENTS OF REPORTS Part B of Instructions) for the production of income or investment in a non-public trade or business which:

(1) had a value exceeding \$1,000 at the close of the reporting period; and/or

(2) generated over \$200 in "unearned" income during the reporting period.

Include the above report for each underlying asset, which is not incidental to the trade or business. Publicly traded assets held by non-public entity may be listed on Part IIIA.

BLOCK B
Valuation of Assets

At the close of reporting period. If None, or less than \$1,001, Check the first column.

BLOCK C
Type and Amount of Income

If "None (or less than \$201)" is Checked, no other entry is needed in Block C for that item. This includes income received or accrued to the benefit of the individual.

| | 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 | Type of Income | | | | | | | | Amount of Income | | | | | | | | Actual Amount Required if "Other" Specified | | | | | | | |
|-------------------|-----------------------------|--------------------|---------------------|----------------------|-----------------------|-----------------------|-------------------------|---------------------|---------------------------|----------------------------|-----------------------------|-------------------|----------------|-----------|------|----------|---------------|--------------------------|----------------|-----------------------|----------------------|---------------------------|-----------------|-------------------|-------------------|--------------------|---------------------|----------------------|---|-------------------------|---------------------|---------------------------|------------------|--|---------|--|
| | | | | | | | | | | | | | None | Dividends | Rent | Interest | Capital Gains | Excepted Investment Fund | Excepted Trust | Qualified Blind Trust | Other (Specify Type) | 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 | | | |
| Example: DC, or J | | | | X | | | | | | | | | | X | | | | | Example | X | | | | | | | | | | | | | | | Example | |
| | | | | | X | | | | | | | | | | | | | | Example | X | | | | | | | | | | | | | | | Example | |
| 1 | X | | | | | | | | | | | | | X | | | | | | | X | | | | | | | | | | | | | | | |
| 2 | | | | | | X | | | | | | | | X | | | | | | | | | | | | | | | | | | | | | | |
| 3 | | | | | X | | | | | | | | | | | X | | | | | | | | | | | | | | | | | | | | |
| 4 | | | | | | X | | | | | | | | X | | | | | | | X | | | | | | | | | | | | | | | |
| 5 | | | | | | X | | | | | | | | X | | | | | | | X | | | | | | | | | | | | | | | |
| 6 | | | X | | | | | | | | | | | X | | | | | | | X | | | | | | | | | | | | | | | |
| 7 | | X | | | | | | | | | | | | X | | | | | | | X | | | | | | | | | | | | | | | |
| 8 | X | | | | | | | | | | | | | X | | | | | | | | | | | | | | | | | | | | | | |
| 9 | X | | | | | | | | | | | | | X | | | | | | | | | | | | | | | | | | | | | | |
| 10 | X | | | | | | | | | | | | | X | | | | | | | | | | | | | | | | | | | | | | |

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.

*** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

PART IV. TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child (See p.3 CONTENTS OF REPORTS Part B of Instructions) 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 between you, your spouse, or dependent child. Please clarify which two properties are involved in any reportable exchange.

| Identification of Assets | | Transaction Type (x) | | | Transaction Date (Mo., Day, Yr.) | Amount of Transaction (x) | | | | | | | | | | | | | |
|----------------------------|--|----------------------|------|----------|----------------------------------|---------------------------|---------------------|----------------------|-----------------------|-----------------------|-------------------------|---------------------|---------------------------|----------------------------|-----------------------------|-------------------|--|--|--|
| | | 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 | | | |
| Example: S, DC, or J | IBM Corp. (stock) NYSE | X | | | 2/1/0X | X | | | | | | | | | | | | | |
| | (DC) Microsoft (stock) NASDAQ/OTC | | X | | 1/27/0X | | | X | | | | | | | | | | | |
| 1 | ALPINE DYNAMIC DIVIDEND Alpine FUND (DC) | X | | | 11/08/10 | X | | | | | | | | | | | | | |
| 2 | Etrade-Stock/SEP (S) | X | | | 07/23/10 | X | | | | | | | | | | | | | |
| 3 | IMPAC Mortgage Holdings -Stock/SEP (S) | X | | | 02/25/10 | X | | | | | | | | | | | | | |
| 4 | Rite Aid/Stock- SEP (S) | X | | | 01/14/10 | X | | | | | | | | | | | | | |
| 5 | IMPAC MOrtgage Holding-stock/ SEP(S) | | X | | 01/14/10 | X | | | | | | | | | | | | | |
| 6 | Annaly Cap Mgmt Inc-Stock/-SEP(S) | X | | | 01/14/10 | X | | | | | | | | | | | | | |
| 7 | Citigroup-stock (S) | | X | | 12/13/2010 | X | | | | | | | | | | | | | |
| 8 | Quantum Fuel Sys Tech Worldwide-Stock(S) | X | | | 12/10/10 | X | | | | | | | | | | | | | |
| 9 | Citigroup-stock (S) | | X | | 11/29/10 | X | | | | | | | | | | | | | |
| 10 | Citi group-stock (S) | | X | | 11/29/10 | X | | | | | | | | | | | | | |
| 11 | Westwood Corp-stock (S) | | X | | 11/10/10 | X | | | | | | | | | | | | | |
| 12 | Westwood Corp-stock (S) | | X | | 11/05/10 | X | | | | | | | | | | | | | |

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.
 *** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

PART VII. LIABILITIES

Report liabilities over \$10,000 owed by you, your spouse, or dependent child (See p.3 CONTENTS OF REPORTS Part B of Instructions), to any one creditor at any time during the reporting period. Check the highest amount owed during the reporting period. Exclude: (1) Mortgages on your personal residences unless rented; (2) loans secured by automobiles, household furniture or appliances; and (3) liabilities owed to certain relatives listed in Instructions. See Instructions for reporting revolving charge accounts.

| Name of Creditor | Address | Type of Liability | Date Incurred | Interest Rate | Term if Applicable | Category of Amount of 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 | |
| <i>Example:</i> S, DC, or J | <i>First District Bank</i> | <i>Wash., DC</i> | <i>Mortgage on undeveloped land</i> | <i>1991</i> | <i>13%</i> | <i>25yrs</i> | | | X | | E | X | A | M | P | L | E |
| | <i>(J) John Jones</i> | <i>Wash., DC</i> | <i>Promissory Note</i> | <i>1999</i> | <i>10%</i> | <i>On dmd</i> | | | | X | E | X | A | M | P | L | E |
| 1 | Wells Fargo (J) | Carson City, NV | Loan-Commercial Property | 2007 | 7.65 | 10 | | | | | | X | | | | | |
| 2 | Evergreen (S) | Anchorage, AK | Loan-Commercial Property | 2003 | 4.9 | 10 | | | | X | | | | | | | |
| 3 | Wells Fargo (S) | Anchorage, AK | Loan- Commercial Property | 2008 | 8.1 | 15 | | | | X | | | | | | | |
| 4 | Wells Fargo | Anchorage, AK | Loan(co-signer on Apartments) on title of Property | 2000 | 7.625 | 25 | | | | | X | | | | | | |
| 5 | Louis/Herta Bonito (S) | Anchorage, AK | Loan Commercial Property | 2010 | 4.0 | 15 | | | | X | | | | | | | |
| 6 | | | | | | | | | | | | | | | | | |
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| 12 | | | | | | | | | | | | | | | | | |

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.
 *** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

PART VIII. POSITIONS HELD OUTSIDE U.S. GOVERNMENT

Report any positions held by you 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. Both the year and month must be reported for the period of time that the position was held.

Exclude: Positions with federal government, religious, social, fraternal, or political entities, and those solely of an honorary nature.

| Name of Organization | | Address (City, State) | Type of Organization | Position Held | From (Mo/Yr) | To (Mo/Yr) |
|----------------------|--|------------------------------|------------------------|------------------------|--------------|------------|
| Example: | National Assn. of Rock Collectors | NY,NY EXAMPLE | Non-profit education | President | 6 / 90 | Present |
| | Jones & Smith | Hometown, USA EXAMPLE | Law Firm | Partner | 7 / 95 | 11 / 0X |
| 1 | Hot Springs Limited LLP (JT) | Carson City, NV | Limited Partnership | General Partner/Member | 1999 | Present |
| 2 | Carson City Holding | Carson City, NV | Limited Liability Corp | Managing Partner | 1999 | Present |
| 3 | Begich Apartments DBA Alaska Commercial Investments (inactive) | Anchorage, Alaska | Business | Owner | 1990 | Present |
| 4 | Kobuk Coffee (S) | Anchorage, Alaska | Corporation | President/Officer | 1993 | Present |
| 5 | Sourdough Mercantile | Anchorage, Alaska | Corporation | President | 1995 | Present |
| 6 | Friends of The Alaska Childrens Trust (S) | Anchorage, Alaska | Non-profit | Chair Emeritus | 2007 | Present |
| 7 | Truman Scholarship | Washington D.C. | Non-profit | Board Member | 2010 | Present |
| 8 | | | | | | |
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| 11 | | | | | | |
| 12 | | | | | | |
| 13 | | | | | | |

Compensation in excess of \$200 from any position must be reported in Part II.