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UNITED STATES SENATE FINANCIAL DISCLOSURE REPORT FOR ANNUAL AND TERMINATION REPORTS

Last Name	John S. III	First Name and Middle Initial	John S. III
McCain	Senate Office Address (Number, Street, City, State, and ZIP Code)	Senate Office / Agency in Which Employed	U.S. Senator
241 Russell Senate Office Building Washington, DC 20510	(202) 224-2235	Prior Office / Agency in Which Employed	N/A
	Termination Report	Annual Report	2007
	Termination Date (mm/dd/yyyy)	Calendar Year Covered by Report:	
	N/A		

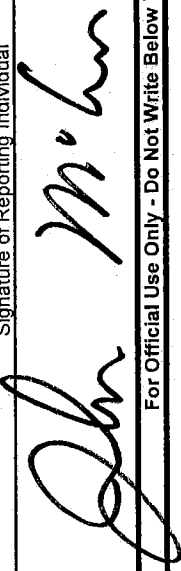
AFTER READING THE INSTRUCTIONS - ANSWER EACH OF THESE QUESTIONS AND ATTACH THE RELEVANT PART

	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"/>	<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"/>	<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"/>	<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"/>	<input checked="" type="checkbox"/>	<input 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"/>	<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"/>	<input type="checkbox"/>	<input checked="" 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"/>	<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"/>	<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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If this is your FIRST Report: Did you receive compensation of more than \$5,000 from a single source in the two prior years? If Yes, Complete and Attach PART X.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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. 6, 104, and 18 U.S.C. 1001.)

Certification 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.	Signature of Reporting Individual 
Date (Month, Day, Year) 05/15/08	
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 I. PAYMENTS TO PAY CHARITABLE ORGANIZATIONS IN LIEU OF HONORARIA

Reporting Individual's Name
McCain, John S. III

Report the source (name and address), date, and amount of any payment from each source to a charitable organization made in lieu of honoraria to you during the reporting period. Identify the activity (speech, article, or appearance), which generated the payment. For further information, see Instructions.

Note: Travel expenses in excess of \$335 related to activities giving rise to these payments must be reported in Part VI, Reimbursements.

Date of Payment	Name of Source	Address (City, State)	Speech, Article, or Appearance	Amount
3/26/0X	Association of American Associations	Wash., DC	Speech	\$1,000
7/23/0X	XYZ Magazine	NY, NY	Article	\$500
1	No Entry			
2	No Entry			
3	No Entry			
4	No Entry			
5	No Entry			
6	No Entry			
7	No Entry			
8	No Entry			
9	No Entry			
10	No Entry			
11	No Entry			
12	No Entry			
13	No Entry			
14	No Entry			

A separate, confidential report which names the charitable organization receiving such payments must be filed directly with the Select Committee on Ethics.

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.

1	Name of Income Source	Address (City, State)	Type of Income	Amount
	JP Computers MCI (Spouse)	Wash., DC Arlington, VA	Salary Salary	\$15,000 Over \$1,000
1	US Navy Finance Center	Cleveland, OH	Annual Pension	\$58,358
2	Sterling Lord Literistics/Random House, Inc. (Please see pages 7, 28 and Attachment A for additional information)	New York, NY	Random House Book Copyright Royalties - Donated to Charity (net of commissions)	\$83,705
3	Sterling Lord Literistics/Warner Books, Inc., a subsidiary of Hachette Book Group USA, Inc. (Please see pages 7, 28, and Attachment A for additional information)	New York, NY	Warner Books, Inc. Book Copyright Royalties - Donated to Charity (net of commissions)	\$91,250
4	Sterling Lord Literistics/Easton Press (Please see page 28 for additional information)	Norwalk, CT	Book Signing Revenue - Donated to Charity (net of commissions)	\$1,553
5	Hensley & Co. (Spouse)	Phoenix, AZ	Salary	Over \$1,000
6	No Entry			
7	No Entry			
8	No Entry			
9	No Entry			
10	No Entry			
11	No Entry			
12	No Entry			
13	No Entry			

Reporting Individual's Name
McCain, John S. III

PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

BLOCK A
Identity of Publicly Traded Assets And Uneamed 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 "uneamed" 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.

S, IBM Corp. (stock)
or J (S) Keystone Fund
Example: DC.

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	X								
\$100,001 - \$250,000			X						
\$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
Dividends	Rent	Interest	Capital Gains	
X				Over \$5,000,000
				\$1,000,001 - \$5,000,000
				Over \$1,000,000***
				\$100,001 - \$1,000,000
				\$50,001 - \$100,000
				\$15,001 - \$50,000
				\$5,001 - \$15,000
				\$2,501 - \$5,000
				\$1,001 - \$2,500
				\$201 - \$1,000
		X		None (or less than \$201)
Example	Example	Example	Example	Example
				Other (Specify Type)
				Qualified Blind Trust
				Excepted Trust
				Excepted Investment Fund
		X		

Assets and Income of John McCain:

1	2	3	4	5	6	7	8	9	
1	Wachovia Bank Checking Account	X							
2	USAA Account (Underlying Asset is USAA Money Market Fund)		X						
3									
4									
5									
6									
7									
8									
9									

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 held independently by the spouse or dependent child, use the other categories of value, as appropriate.

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McCain, John S. III

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								
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. Example: DC, IBM Corp. (stock), or J (S) Keystone Fund		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																		
		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	
		X				X					X										Example	
		X				X				X											Example	
1	(J) Chase Checking and Savings Accounts																					
2	(J) Wachovia Bank Checking Account																					
3	No Entry																					
4	No Entry																					
5	No Entry																					
6	No Entry																					
7	No Entry																					
8	No Entry																					
9	No Entry																					

Joint Assets and Income of John and Cindy McCain:

1	(J) Chase Checking and Savings Accounts																					
2	(J) Wachovia Bank Checking Account																					
3	No Entry																					
4	No Entry																					
5	No Entry																					
6	No Entry																					
7	No Entry																					
8	No Entry																					
9	No Entry																					

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 held jointly, use the other categories of value, as appropriate.

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	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. Example: DC, (S) IBM Corp. (stock) or J (S) Keystone Fund	None (or less than \$1,001)		None (or less than \$201)	X
	\$1,001 - \$15,000		\$201 - \$1,000	
	\$15,001 - \$50,000		\$1,001 - \$2,500	
	\$50,001 - \$100,000	X	\$2,501 - \$5,000	
	\$100,001 - \$250,000	X	\$5,001 - \$15,000	
	\$250,001 - \$500,000		\$15,001 - \$50,000	
	\$500,001 - \$1,000,000		\$50,001 - \$100,000	
	Over \$1,000,000***		\$100,001 - \$1,000,000	
	\$1,000,001 - \$25,000,000		Over \$1,000,000***	
	\$25,000,001 - \$50,000,000		Over \$5,000,000	
	Over \$50,000,000			

Assets and Income of Cindy McCain (Spouse):

		(See items 2-6 below for asset valuations and income amounts)											
1	(S) Hensley & Co. - Assets Held in Retirement Plan												
2	(S) American Funds Europacific A (Sold May 2008)								X				
3	(S) American Funds Growth A								X				
4	(S) American Funds Income A												
5	(S) Anheuser-Busch Stock												
6	(S) Lord ABB Mid Cap Value Fund												
7	(S) Chase Checking and Savings Accounts												
8	No Entry												
9	No Entry												

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 held jointly held, use the other categories of value, as appropriate.

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, and qualified blind trusts, and publicly traded assets of a retirement plan.

S, IBM Corp. (stock)
or J (S) Keystone Fund

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	X			
\$100,001 - \$250,000		X		
\$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	
Dividends	X	None (or less than \$201)	X
Rent		\$201 - \$1,000	
Interest		\$1,001 - \$2,500	
Capital Gains		\$2,501 - \$5,000	
Excepted Investment Fund	X	\$5,001 - \$15,000	
Excepted Trust		\$15,001 - \$50,000	
Qualified Blind Trust		\$50,001 - \$100,000	
Other (Specify Type)	Example	\$100,001 - \$1,000,000	
	Example	\$1,000,001 - \$5,000,000	
		Over \$5,000,000	

Actual Amount Required if "Other" Specified	Example	Example

Assets and Income of Dependent Children:

		(See Attachment B for securities held, asset valuations and income amounts)										
1	(DC) Marketable Securities											
2	(DC) Chase Checking and Savings Accounts	X										
3	(DC) Navy Federal Credit Union Checking and Savings Accounts	X										
4	(DC) USAA Checking Account		X									
5	No Entry											
6	No Entry											
7	No Entry											
8	No Entry											
9	No Entry											

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 held jointly held, use the other categories of value, as appropriate.

BLOCK A Identity of Non-Publicly Traded Assets and Unearned Income Sources		BLOCK B Valuation of Assets		BLOCK C Type and Amount of Income																
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.		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															
Example: DC, or J	S, JP Computer, Software Design, Wash DC	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***	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$150,000	\$150,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000***	Over \$1,000,000***	Over \$5,000,000	Actual Amount Required if "Other" Specified
																				Example
																				Example

Assets and Income of John McCain:

		(See Part II, Page 2, Item 2 for earned income amounts)										(See Part II, Page 2, Item 3 for earned income amounts)									
Value Unascertainable		Value Unascertainable										Value Unascertainable									
1	Sterling Lord Literistics/Random House, Inc., New York NY (Please see pages 2, 28, and Attachment A for additional information)																				
2	Sterling Lord Literistics/Warner Books, Inc., a subsidiary of Hachette Book Group USA, Inc., New York, NY (Please see pages 2, 28, and Attachment A for additional information)																				
3	No Entry																				
4	No Entry																				
5	No Entry																				
6	No Entry																				
7	No Entry																				
8	No Entry																				
9	No Entry																				

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.

