

Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Date of Appointment, Candidacy Election or Nomination (Month, Day, Year)		Reporting Status (Check appropriate boxes) <input type="checkbox"/> Incumbent <input type="checkbox"/> Calendar Year Covered by Report	Calendar Year	<input checked="" type="checkbox"/> New Entrant, Nominee, or Candidate <input type="checkbox"/> Termination Filer	Termination Date (If Applicable) (Month, Day, Year)	Fee for Late Filing: Any individual who is required to file this report and does so more than 30 days after the date the report is required to be filed, or, if an extension is granted, more than 30 days after the last day of the filing extension period shall be subject to a \$200 fee.
Reporting Individual's Name		Last Name Goolsbee		First Name and Middle Initial Austan		
Position for Which Filing		Title of Position Member, Council of Economic Advisers		Department or Agency (If Applicable) EOP		Reporting Periods Incumbents: The reporting period is the preceding calendar year except Part II of Schedule C and Part I of Schedule D where you must also include the filing year up to the date you file. Part II of Schedule D is not applicable.  Termination Filers: The reporting period begins at the end of the period covered by your previous filing and ends at the date of termination. Part II of Schedule D is not applicable.
Location of Present Office (or forwarding address)		Address (Number, Street, City, State, and ZIP Code) University of Chicago, GSB, 5807 S. Woodlawn Ave, Chicago, IL 60637		Telephone No. (Include Area Code) 773-702-1234		
Position(s) Held with the Federal Government During the Preceding 12 Months (If Not Same as Above)		Title of Position(s) and Date(s) Held				
Presidential Nominees Subject to Senate Confirmation		Name of Congressional Committee Considering Nomination Banking, Housing, and Urban Affairs		Do You Intend to Create a Qualified Diversified Trust? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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.				January 11, 2009		
Other Review (If desired by agency)		Signature of Other Reviewer		Date (Month, Day, Year)		
Agency Ethics Official's Opinion On the basis of information contained in this report, I conclude that the filer is in compliance with applicable laws and regulations (subject to any comments in the box below).		Signature of Designated Agency Ethics Official/Reviewing Official		Date (Month, Day, Year)		
				1/11/09		
Office of Government Ethics Use Only		Signature		Date (Month, Day, Year)		
				1/12/09		
Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheet).						
(Check box if filing extension granted & indicate number of days _____) <input type="checkbox"/>						
(Check box if comments are continued on the reverse side) <input type="checkbox"/>						
						Agency Use Only
						OGE Use Only JAN 11 2009



Reporting Individual's Name  
 Goolsbee

**SCHEDULE A continued**

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(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												
		\$0 - \$1,000	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	Over \$1,000,000*	Dividends	Interest	Capital Gain	None (or less than \$201)	\$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*	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.)  Only if Honoraria
1	Baxter							X													
2	Berkshire Hathaway B	X						X			X										
3	Costco							X			X										
4	Chevron	X						X													
5	PepsiCo							X													
6	Proctor and Gamble							X													
7	Parker Hannafin	X						X			X										
8	401(a) retirement account Vanguard smallcap value Index fund	X									X										
9	Vanguard European stock Index fund										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 <b>Goolsbee</b>	<b>SCHEDULE A continued</b> (Use only if needed)	Page Number 6 of 11
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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	\$500,001 - \$1,000,000	Over \$1,000,000 *	\$1,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Excepted Trust	Qualified Trust	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	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000 *	\$1,000,001 - \$5,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.)  Only if Honoraria
None <input type="checkbox"/>																														
1 401(k) - spouse McKinsey/AON US Passive Equity			X														X													
2 401(k) - spouse McKinsey/AON Non-US Passive Equity		X															X													
3 401(k) - spouse McKinsey/AON Non-US Active Equity		X															X													
4																														
5																														
6																														
7																														
8																														
9																														

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

Reporting Individual's Name  
 Goolsbee

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

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BLOCK A	Valuation of Assets at close of reporting period							BLOCK B		BLOCK C							Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.)  Only if Honoraria									
	None	None (or less than \$201)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	Over \$1,000,000 *	Excepted Investment Fund	Excepted Trust	Qualified Trust	Type	Amount														
												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	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000 *	\$1,000,001 - \$2,000,000	Over \$2,000,000		
1	<input type="checkbox"/>											X															
2																		X									
3																											
4																											
5																											
6																											
7												X															
8																											
9																											

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

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

Reporting Individual's Name <b>Goolsbee</b>	<b>SCHEDULE B</b>	Page Number <b>8 of 11</b>
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**Part I: Transactions**

None

Report any purchase, sale, or exchange by you, your spouse, or dependent children during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Do not

report a transaction involving property used solely as your personal residence, or a transaction solely between you, your spouse, or dependent child. Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.

		Identification of Assets	Transaction Type (x)			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	Certificate of divestiture		
		Example: Central Airlines Common	x			2/1/99				x										
1																				
2																				
3																				
4																				
5																				

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

**Part II: Gifts, Reimbursements, and Travel Expenses**

For you, your spouse and dependent children, report the source, a brief description, and the value of: (1) gifts (such as tangible items, transportation, lodging, food, or entertainment) received from one source totaling more than \$260; and (2) travel-related cash reimbursements received from one source totaling more than \$260. For conflicts analysis, it is helpful to indicate a basis for receipt, such as personal friend, agency approval under 5 U.S.C. § 4111 or other statutory authority, etc. For travel-related gifts and reimbursements, include travel itinerary, dates, and the nature of expenses provided. Exclude anything given to you by

the U.S. Government; given to your agency in connection with official travel; received from relatives; received by your spouse or dependent child totally independent of their relationship to you; or provided as personal hospitality at the donor's residence. Also, for purposes of aggregating gifts to determine the total value from one source, exclude items worth \$104 or less. See instructions for other exclusions.

None

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



Reporting Individual's Name Goalsbee	SCHEDULE C	Page Number 9 of 11
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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

Category of Amount or Value (x)

Creditors (Name and Address)	Type of Liability	Date Incurred	Interest Rate	Term if applicable	Category of Amount or Value (x)																	
					\$10,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000							
Examples: First District Bank, Washington, DC	Mortgage on rental property, Delaware	1991	8%	25 yrs.																		
John Jones, 123 F St, Washington, DC	Promissory note	1999	10%	on demand					x													
1 Citimortgage	Mortgage on property, Illinois	2005	5% (ARM)	25 years									x									
2																						
3																						
4																						
5																						

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

**Part II: Agreements or Arrangements**

Report your agreements or arrangements for: 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.	Doe Jones & Smith, Hometown, State	7/85
1	On leave of absence from the University of Chicago beginning January 2009 for up to two years.	University of Chicago, Chicago, IL	
2	I have a 403(b) retirement account. Will retain the account while I am on leave. I will not make contributions to the account, nor will the University of Chicago make contributions, while I am on leave.	University of Chicago, Chicago, IL	
3	I have a 401(a) retirement account. I will retain the account, but I will no longer make contributions to the account.	National Bureau of Economic Research Cambridge, MA	
4			
5			
6			

### Part I: Positions Held Outside U.S. Government

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

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

	Organization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)
	Examples: Nat'l Assn. of Rock Collectors, NY, NY	Non-profit education	President	6/92	Present
	Doe Jones & Smith, Hometown, State	Law firm	Partner	7/85	1/00
1	University of Chicago, Booth School of Business, Chicago IL	non-profit education	professor	7/95	present
	U. Chicago Initiative on Global Markets, Chicago, IL	non-profit research	co-director	2006	present
2	American Bar Foundation, Chicago IL	non-profit research	research fellow	7/96	present
	New York Times	newspaper	economics columnist	2006	1/2008
3	National Bureau of Economic Research, Cambridge, MA	non-profit research	Public ec. Steering committee	2002	present
	American Economic Journal: Public Policy	non-profit journal	associate editor	2007	present
4	Milton Academy	non-profit education	board of trustees	2005	present
	National Tax Journal	non-profit journal	associate editor	2005	present
5	University of Chicago laboratory schools, Chicago, IL	non-profit education	board of trustees	2008	present
	University of Chicago Charter Schools Corporation, Chicago IL	non-profit education	board of directors	2007	present
6	Leadership Greater Chicago	non-profit civic	fellow	2006	2007
	Progressive Policy Institute/Democratic Leadership Council	non-profit research	senior economist	6/06	11/2008

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

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

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

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

	Source (Name and Address)	Brief Description of Duties
	Examples: Doe Jones & Smith, Hometown, State	Legal services
	Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services in connection with university construction
1	KPMG Corporate Finance, Chicago, IL	Services provided as a meeting facilitator at their M&A conference in Chicago
2	Reed College Institute, Portland, OR	Gave an invited lecture on the U.S. Economy
3	Third Way Foundation	Served as senior economist for Progressive Policy Institute and the Democratic Leadership Council
4	Leigh Bureau, Somerville, NJ	Speech to the Global Risk Forum 2008
5	University of Chicago	Professor
6	American Bar Foundation, Chicago IL	Research Fellow

Reporting Individual's Name  
 Goolsbee

**SCHEDULE D**

**Part I: Positions Held Outside U.S. Government**

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

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

			None <input type="checkbox"/>		
	Organization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)
Examples:	Nat'l Assn. of Rock Collectors, NY, NY	Non-profit education	President	6/92	Present
1	Doe Jones & Smith, Hometown, State	Law firm	Partner	7/85	1/00
2					
3					
4					
5					
6					

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

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

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

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

		None <input type="checkbox"/>	
	Source (Name and Address)	Brief Description of Duties	
Examples:	Doe Jones & Smith, Hometown, State	Legal services	
1	Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services in connection with university construction	
	Democratic Leadership Council	Senior Economist	
	Washington, DC		
2	New York Times	Newspaper Column	
	New York, NY		
3	Holtzbrink Publishing	Advance on Royalties for Textbook	
	New York, NY		
4			
5			
6			