

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 checked="" type="checkbox"/> New Entrant, Nominee, or Candidate <input type="checkbox"/> Termination Filer	Calendar Year Covered by Report	Termination Date (If Applicable) (Month, Day, Year)	<p>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.</p> <p>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.</p> <p>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.</p> <p>Nominees, New Entrants and Candidates for President and Vice President: Schedule A--The reporting period for income (BLOCK C) is the preceding calendar year and the current calendar year up to the date of filing. Value assets as of any date you choose that is within 31 days of the date of filing. Schedule B--Not applicable. Schedule C, Part I (Liabilities)--The reporting period is the preceding calendar year and the current calendar year up to any date you choose that is within 31 days of the date of filing. Schedule C, Part II (Agreements or Arrangements)--Show any agreements or arrangements as of the date of filing. Schedule D--The reporting period is the preceding two calendar years and the current calendar year up to the date of filing.</p> <p>Agency Use Only</p> <p>OGE Use Only FEB -3 2009</p>
Reporting Individual's Name	Last Name: Johnsen		First Name and Middle Initial: Dawn E.	
Position for Which Filing	Title of Position: Assistant Attorney General for the Office of Legal Counsel		Department or Agency (if Applicable): Department of Justice	
Location of Present Office (or forwarding address)	Address (Number, Street, City, State, and ZIP Code): 211 S. Indiana Ave., Bloomington, IN 47405		Telephone No. (Include Area Code): 812.856.4984	
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: None			
Presidential Nominees Subject to Senate Confirmation	Name of Congressional Committee Considering Nomination: Senate Judiciary Committee	Do You Intend to Create a Qualified Diversified Trust? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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.	Signature of Reporting Individual: Dawn E. Johnson		Date (Month, Day, Year): 1-30-09	
Other Review (If desired by agency)	Signature of Other Reviewer: Jan M. Braden		Date (Month, Day, Year): 2/2/09	
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: [Signature]		Date (Month, Day, Year): 2/2/09	
Office of Government Ethics Use Only	Signature: [Signature]		Date (Month, Day, Year): 2/13/09	
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"/>				

Reporting Individual's Name

SCHEDULE A continued

Page Number

Johnsen, Dawn E.

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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																				
		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	Over \$25,000,000	Excepted Investment Fund	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	Northwestern Mutual Life Insurance Policy universal life (no investment options)			X															X													
2	Lincoln Financial Group (spouse 403b) LVIP Delaware Social Awareness (fund)			X								X							X													
3	Lincoln Financial Group (spouse 457 plan) LVIP Delaware Special Opportunities (fund)			X								X							X													
4	Tax Exempt Bond, Indiana University through Edward Jones broker	X														X				X												
5	TIAA-CREF Social Choice Equity Fund Investment & Roth IRAs				X							X							X													
6	Indiana College Choice (529 account) IESA Growth Fund CI A 2016 Enrollment Portfolio		X									X							X													
7	Indiana College Choice (529 account) IESA Growth & Income Fund CI A 2013 Enrollment Portfolio		X									X							X													
8	Calvert Investments (IRA) Calvert New Vision Small Cap Fund - A		X									X							X													
9	Calvert Investments (IRA, spouse) Calvert Capital Accumulation Fund - A		X									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

Johnsen, Dawn E.

SCHEDULE A continued

(Use only if needed)

Page Number

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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 <input type="checkbox"/>												Amount										Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
												Type											
1																							
2	Indiana University School of Law, Blooming Gross income for 2008 and 2009																					Professor, salary, \$177,918	
3	Foundation Press, 2009, Book Chapter Presidential Power Stories, Schroeder & Bradley, editors; Hamran v. Rumsfeld: Tryin																					Honorarium \$500 (no other fees)	12/10/2008
4	Enemy Combatants by Military Commission																						
5	City First Bank of D.C., NA (spouse)																					Bank Director fees	
6	University of Wisconsin (spouse)																					Consultant fees state policy center orgztnl efforts	
7	William E. Schmidt Foundation (spouse)																					Charitable frndtn Trustee fees	
8	City First Enterprises (spouse)																					501c3 tax exempt Bank holding co. President, salary	
9																							

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Reporting Individual's Name

SCHEDULE A continued

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Johnsen, Dawn E.

(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.										Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria											
												BLOCK C																						
												Amount																						
None <input type="checkbox"/>		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	Excepted Investment Fund	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			
1	Calvert Investments (spouse retirement) Calvert New Vision Small Cap Fund - B		X										X							X														
2	Calvert Investments (spouse retirement) Calvert World Values International Equity -		X										X							X														
3	Calvert Investments (spouse retirement) Calvert Social Index - B		X										X							X														
4	Calvert Investments (spouse retirement) Calvert Large Cap Growth Fund - B		X										X							X														
5	Indiana Public Employee Retirement Fund S&P 500 Index Fund (spouse) managed by Barclays Global Investors			X									X							X														
6	Indiana Public Employee Retirement Fund US Small Companies Stock Fund (spouse) managed by Dimensional Fund Advisors			X									X							X														
7	Indiana Pub. Emp Defrd Comp Plan (spouse) Vanguard Capital Opportunity - Admiral Fu			X									X							X														
8	Indiana Pub. Emp. Defrd Comp Plan (spouse) Domini Institutional Social Equity		X										X							X														
9	City First Bank of DC, NA common stock		X													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

SCHEDULE A continued

Page Number

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Johnsen, Dawn E.

(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	Excepted Investment Fund	Excepted Trust	Qualified Trust	Type	Amount									Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.)							
																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		Only if Honoraria			
1	American Funds(spouse IRA/SEP) EuroPacific Growth Fund-B	X											X							X															
2	American Funds(spouse IRA/SEP) Growth Fund of America-B	X											X							X															
3	American Funds(spouse IRA/SEP) Capital World Growth and Income Fund-B	X											X							X															
4	American Funds(spouse IRA/SEP) Capital Income Builder-B	X											X							X															
5	Lincoln Investment Planning, Inc. AIM Global Small & Mid Cap Growth Fund-	X											X							X															
6	Lincoln Investment Planning, Inc. American Funds Growth Fund of Amer.-F	X											X							X															
7	Lincoln Investment Planning, Inc. Calvert Aggressive Allocation Fund-A	X											X							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 Johnsen, Dawn E.	SCHEDULE B	Page Number 7
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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 Frank Jones, San Francisco, CA	Airline ticket, hotel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty) Leather briefcase (personal friend)	\$500 \$300
1			
2			
3			
4			
5			

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

Reporting Individual's Name

SCHEDULE B continued
(Use only if needed)

Page Number

Part I: Transactions

	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																		
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15																		
16																		

* 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.

Reporting Individual's Name

Johnsen, Dawn E.

SCHEDULE C

Page Number

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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)

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: 1991	8%	25 yrs.			x												
1999	10%	on demand					x										
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: 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, Home town, State	7/85
1 I will utilize standard university leave policies that allow a two-year leave of absence from my tenured position with the Indiana Univ. Sch. Defined contribution plan contributions will cease; life insurance coverage will cease 3 months into my leave.	Indiana University School of Law, Bloomington, IN	8/1998
2 I will continue to own accounts in the IU retirement plan through TIAA CREF; including unvested retirement benefits in my 401a plan I will continue to be eligible to receive family health benefits pursuant to standard university leave policies.	Indiana University School of Law, Bloomington, IN	8/1998
3		
4		
5		
6		

Reporting Individual's Name Johnsen, Dawn E.	SCHEDULE D	Page Number 9
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Part I: Positions Held Outside U.S. Government

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

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

None

	Organization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)
Examples:	Nat'l Assn. of Rock Collectors, NY, NY Doe Jones & Smith, Hometown, State	Non-profit education Law firm	President Partner	6/92 7/85	Present 1/00
1	American Constitution Society	Nonprofit organization	Director	12/2003	12/31/2008
2	Indiana University School of Law, Bloomington	Educational Institution	Professor of Law	8/98	Present
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

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