

Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

U.S. Office of Government Ethics

Date of Appointment, Candidacy, Election or Nomination (Month/Day/Year)		Reporting Status <input type="checkbox"/> Incumbent <input checked="" type="checkbox"/> New Entrant, Nominee or Candidate	Calendar Year Covered by Report	Termination Date (If Applicable) (Month/Day/Year)	Reporting Period
Reporting Individual's Name		Last Name and First Name and Middle Initial		Reporting Periods	
Position for Which Filing		Department or Agency (If Applicable)		Incumbents: The reporting period is the preceding calendar year, except for those covered by Schedule D or Schedule E, here you must also include the nine years up to the date you filed a report for Schedule D or not applicable.	
Address of Present Office (or forwarding address)		Address (Number, Street, City, State and ZIP Code)		Telephone Number (Include Area Code)	
Position(s) Held with the Federal Government during the preceding 6 months (if not same as above)		Title and Position(s) and Date(s) Held		Termination Filers: The reporting period begins at the end of the period covered by our previous filing and ends on the date of termination. If not applicable, Schedule D is not applicable.	
Presidential Nominee's Support for Senate Confirmation		Name of Congressional Committee Considering Nomination		Do you intend to create or fund a trust?	
Certification		Signature of Reporting Individual		Date (Month/Day/Year)	
Other Review (if desired by filer)		Signature of Other Reviewer		Date (Month/Day/Year)	
Approval Ethics Official's Opinion		Signature of Designated Agency Ethics Official Reviewing Official		Date (Month/Day/Year)	
Office of Government Ethics Use Only		Signature		Date (Month/Day/Year)	
Comments of Reviewing Officials (if additional spaces are 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"/>					
OGE Use Only MAR 16 2009					

Assets and Income BLOCK A		Valuation of Assets at close of reporting period BLOCK B										Income: type and amount. If "None" (or less than \$200) is checked, no other entry is needed in Block C for that item. BLOCK C																			
		None (or less than \$1,000)	\$1,001 - \$5,000	\$5,001 - \$10,000	\$10,001 - \$25,000	\$25,001 - \$50,000	\$50,001 - \$100,000	Over \$100,000	Over \$500,000	Over \$1,000,000	Over \$5,000,000	Type	Amount	Date (Mo., Day, Yr.)	Only if Honoraria																
Examples												Dividends	Rent and Royalties	Interest	Capital Gains	None (or less than \$200)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.)	Only if Honoraria			
1	F City of Seattle Chief of Police																											\$216,515.00 Salary			
2	F Seattle University Adjunct Professor																												\$3,700.00 Salary		
3	F Rosenkrantz Foundation Guest Debater																												\$1,000.00 Honorarium	Oct. 28, 2008	
4	F Maryland Police Chiefs' Association Guest Speaker																												\$1,500.00 Honorarium	Sept. 10, 2008	
5	F Washington State Dept. of Retirement Systems: LEOFF Plan 2 Defined Bene- fit Plan, value not readily ascertainable																												\$2,500.00 per month upon retirement		
6	F City of St. Petersburg (FL) Defined Benefit Plan Value not ascertainable																												\$10,095.00 Pension Income		

* 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

Richard G. Kerlikowski

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 \$200) is checked, no other entry is needed in Block C for this 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	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Special Investment Fund	Exception Trust	Qualified Trust	Dividend	Rent and Royalties	Interest	Capital Gains	None (or less than \$200)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$500,000	Over \$1,000,000	\$1,000,001 - \$5,000,000	Over \$5,000,000	Other Income (Specify Type & Amount)
1	Circle Solutions, Inc. 401K(American Funds																														
S	INVESCO Stable Value (Collective Trust																														
2	Fund Option-Cash Equivalent																														
S	EuroPacific Growth Fund(R3)		X																												
	Growth Fund of America (R3)			X																											
3	Amerc. Funds New World Fund(R3)		X																												
S	Columbia Mid Cap Index Fund Z		X																												
	Columbia Small Cap Value I Fund Z		X																												
4	Amer. Funds Capital World Gr&Inc R3		X																												
S	Amer. Funds Fundamental Inv R3		X																												
	Amer. Funds Washington Mutual Fund R3		X																												
5	Amer. Funds Capital Income Builder R3		X																												
S	Amer. Funds Bond Fund R3		X																												
	Amer. Funds High Income Trust R3		X																												
6	Circle Solutions, Inc. Stock Ownership				X																										
S	Circle is an Employee-Owned Firm																														
7	Bank of America Checking Account		X																												
J	Bank of America CD															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.

Reporting Individual's Name
 Richard G. Kerlikowski

SCHEDULE A continued

(Use only if needed)

Assets and Income BLOCK A		Valuation of Assets as of the reporting period BLOCK B								Income type and amount. If "None (or less than \$200)" is checked, no other entry is needed in Block C for that item. BLOCK C											
										Type	Amount						Other Income (Specify type & actual amount)	Rate (If other than 0-12%)			
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	Pent and Royalties	Interest	Capital Gains	None (or less than \$200) \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000							
										1	S Circle Solutions, Inc. McLean, Virginia Salary										
2	F City of Seattle Deferred Comp.Prudential. Pimco Total Rtn Instl Fd												X								
3	F Dodge & Cox Stock Fund												X								
3	F American Funds Growth Fd Amer R4 Managers AMG Sm/Mic Cp Gr A																				
3	F Hotchkins & Wiley Sml-Cap Val 1																				
4	F American Funds EuroPac Gr R4 Stable Value Fund-a bank collective																				
4	F fund trustee by Wells Fargo Bank																				
5	F IRA (managed by D.A. Davidson & Co.) Fundamental Investors Inc Cl A (ANCFX)																				
5	F Growth Fund of America CL A (AGTHX)																				
6	J Investment Portfolio D.A. Davidson Cash in Investment Account																				
6	J Bank of America												X								
7	J Boeing																				
7	J Corning, Inc.																				
7	J Costco Wholesale Corp																				
8	J Expeditors Intl Wash Inc.																				
8	J General Electric																				
8	J Johnson and ohnson																				
9	J Microsoft Corp																				
9	J Nyse Euronet																				
9	J Starbucks Corp																				

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Reporting Individual's Name
 Richard G. Kerlikowske

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										Other Income (Specify type & Actual Amount)	Date (M, D, Y) Only if Honorary									
		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 Investment Fund	Excepted Trust	Qualified Trust	Type				Amount												
																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 - \$500,000	Over \$500,000	\$1,000,001 - \$1,499,999	Over \$5,000,000
1	Texas Instruments Corp		x														x															
	3M Company		x														x															
J	Weyerhaeuser		x														x															
2	J GMAC Bank of New York: Certificates of Deposit			x															x													
3	F Hebrew University of Jerusalem																													\$300.00		
4																														Consulting Fee	Jan. 1, 2008	
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 categories of value, as appropriate.

Reporting Individual's Name

Richard G. Kerlikowske

SCHEDULE A continued

(Use only if needed)

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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 \$200), checked, no other entry is needed in Block C for that item. BLOCK C										Date Mo./Day/Year or Honorary										
		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	\$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 \$200)	\$201 - \$1,000		\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000	\$1,000,001 - \$5,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)
1	None <input type="checkbox"/>																															
2																																
3																																
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 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 Richard G. Kerlikowski	SCHEDULE E	Page Number 7
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Part I: Transactions		None <input type="checkbox"/>
Report any purchase, sale, or exchange by you, your spouse, or dependent children during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction 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 appropriate certificate or divestiture block to indicate sales made pursuant to a certificate of divestiture from OGE.		Amount of Transaction (\$)
Transaction Type	Date (Mo., Day, Yr.)	Amount of Transaction (\$)
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
\$1,000,001 - Over	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000
		\$25,000,001 - \$50,000,000
		\$50,000,001 - \$100,000,000
		Certificate of divestiture
Examples: Central Airlines, Commerce		2/1/99
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		None <input type="checkbox"/>
For you, your spouse and dependent children, report the source, a brief description, and the value of: (1) gifts (such as tangible items, transportation, lodging, food, or entertainment) received from one source totaling more than \$260; and (2) travel-related cash reimbursements received from one source totaling more than \$260. For conflicts analysis, it is helpful to indicate a basis for receipt, such as personal friend, agency approval under 5 U.S.C. § 4111, or other statutory authority, etc. For travel-related gifts and reimbursements, include travel dates and the nature of expenses provided. Exclude anything given to you by the U.S. Government, given to you or 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 \$100 or less. See instructions for other exclusions.		Value
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

Richard G. Kerlikowske

SCHEDULE B continued

(Use only if needed)

Page Number

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Part B Transactions		Transaction Type (a)		Date (Mo., Day, Yr.)	Amount of Transaction (b)										Certificate of divestiture		
		Purchase	Sale		\$100 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Other \$1,000,000+	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000		\$50,000,000+	
Identification of Assets																	
Example: Central Airlines common																	
1				2/1/99													
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	
13																	
14																	
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 Richard G. Kerlikowske	SCHEDULE C	Page Number 9
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Part II - Liabilities			Category of Amount or Value (%)														
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 <input checked="" type="checkbox"/>														
	Creditor (Name and Address)	Type of Liability	Date Incurred	Interest Rate	Term if applicable	\$10,001 - \$15,000	\$15,001 - \$20,000	\$20,001 - \$30,000	\$30,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000	Over \$500,000		
1	Example: First District Bank, Washington, DC John Jones, 1234 NSE, Washington, DC	Mortgage on rental property, Delaware Promissory note	1991 1998	8% 10%	25 yrs on Demand												
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 III - Agreements or Arrangements		
Report your agreements or arrangements for continuing participation in an employee benefit plan (e.g., 401k, deferred compensation), (2) continuation payments 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.		
Status and Terms of any Agreement or Arrangement		None <input type="checkbox"/>
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
1	City of Seattle Deferred Compensation. I will continue to participate in my deferred compensation plan. Neither I nor the City will continue to contribute to the plan.	Filer and City of Seattle
2	Washington State Dept. of Retirement Systems-LEOFF Plan 2. This is a defined benefit. Plan. I and the City of Seattle contribute to the Plan. I cannot chose the investment options. Upon retirement I will receive a monthly benefit of \$ 2,500.	Filer and State of Washington
3	City of St. Petersburg (FL) Defined Benefit Plan. I receive \$841.25 monthly beginning at age 55.	Filer and City of St. Petersburg Feb. 1972
4		
5		
6		

Reporting Individual's Name Richard G. Kerlikowski	SCHEDULE D	Page Number 10
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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 to a firm, corporation, firm, partnership, or other business enterprise or any non-profit organization or educational institution. Exclude positions with religious, social, fraternal, or political nature, and those solely of an honorary nature.

None	None	Organization (Name and Address)	Type of Organization	Position Held	From (Mo./Yr.)	To (Mo./Yr.)
<input type="checkbox"/>	<input type="checkbox"/>	Example: Natl. Assn. of Rock Collectors, NY, NY Doe Jones & Smith, Hometown, State	Non-profit/education	President Board	6/97 785	Present 700
		1 Northwest HIDTA, Seattle, WA Seattle Police Department, Seattle, WA	Public Agency Public Agency	Board Member Chief of Police	Jan. 2006 Aug. 2000	present present
		2 Fight Crime, Invest in Kids, Washington DC Major Cities' Chiefs Association, Washington DC	Private Non-Profit Advocacy Private Non-Profit, Prof. Association	Chairman, National Board President	Feb. 98 April 08	present present
		3 Salvation Army, Seattle, WA	Non-Profit Charitable	Advisory Board Member	Jan. 02	present
		4 United Way of King County, Seattle, WA Seattle University, Seattle, WA	Non-Profit Charitable Institution of Higher Education	Seattle Advisory Board Member Adjunct Professor	March 03 Jan. 02	12/2008 present
		5 Hebrew University of Jerusalem, Jerusalem, Israel	Institution of Higher Education	Consultant Reviewer of Academic Report	Jan. 2008	1/2008
		6 CSR, Inc, Arlington, VA	DOJ Contractor	Consultant Reviewer	1983	present

Part III: 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)	Description of Duties
<input type="checkbox"/>	Example: Doe Jones & Smith, Hometown, State Metro University (client of Doe Jones & Smith), Hometown, State	Legal services Began describes an connection with university construction
	1 City of Seattle	Salary as Chief of Police for the City of Seattle
	2	
	3	
	4	
	5	
	6	