SF 278 (Rev. 03/2000) Executive Branch Pe 5 C.F.R. Part 2634 U.S. Office of Government Ethics

Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Form Approved: OMB No. 3209 - 0001

Date of Appointment, Candidacy; Election, or Nomination (Month, Day, Year)	Status Covered by Report N	New Entrant, Nominee, or Candidate	Termination Termination Date (If Appli- Filer Cable) (Month, Day, Year)	Any individual who is required to file this report and does so more than 30 days
Reporting	Last Name	First Name and Mi	ddle Initial	after the date the report is required to be filed, or, if an extension is granted, more
Individual's Name	MILLER	Anthony	W.	than 30 days after the last day of the filing extension period, shall be subject
Land Control of	Title of Position	Department or Ag	ency (If Applicable)	to a \$200 fee.
Position for Which Filing	Deputy Secretary	U.S. Department o	f Education	Reporting Periods Incumbents: The reporting period is
Location of	Address (Number, Street, City, State, and ZIP Code)		Telephone No. (Include Area Code)	the preceding calendar year except Part If of Schedule C and Part I of Schedule D
Present Office (or forwarding address)	400 Maryland Avenue, SW, Washington, D.C.		(202)205-3530	where you must also include the filing year up to the date you file. Part II of
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 Consultant and Senior Advisor to the Secretary of Educatio	on, January 21, 2009 -	Present.	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
Presidential Nominees Subject	Name of Congressional Committee Considering Nomination	on Do You Intend to C	reate a Qualified Diversified Trust?	Schedule D is not applicable.
to Senate Confirmation	Committee on Health, Education, Labor and Pensions	Yes	⊠ No	Nominees, New Entrants and Candidates for President and
Certification	Signature of Reporting Individual	<u> </u>	Date (Month, Day, Year)	Vice President:
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.	ante m. m/s		5/15/2009	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
Other Review (If desired by agency)	Signature of Other Reviewer		Date (Month, Day, Year)	as of any date you choose that is within 31 days of the date of filing.
agency				Schedule B-Not applicable.
Agency Ethics Official's Opinion	Signature of Designated Agency Ethics Official/Reviewing	Official	Date (Month, Day, Year)	Schedule C, Part I (Liabilities)—The reporting period is the preceding calendar
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).			5/19/69	year and the current calendar year up to any date you choose that is within 31 days of the date of filing.
Office of Government Ethics Use Only	Signature full of header		Date (Month, Day, Year)	Schedule C, Part II (Agreements or Arrangements)—Show any agreements or arrangements as of the date of filing.
Comments of Reviewing Officials	(If additional space is required, use the reverse side of this	sheet)	1 / /	Schedule D-The reporting period is the preceding two calendar years and
	(Check box if filing ex	xtension granted & indi	cate number of days }	the current calendar year up to the date of filing.
				Agency Use Only
				MAY 1 8 2009
	(Chec	ck box if comments are	continued on the reverse side)	OGE Use Only
		NO COMPANY DESCRIPTION OF STREET		MAY 1 9 2009

100000	rting Individual's Name R, Anthony W.											S	ĊI	HE	D	UI	LE	A													Pa	ige Number 2 of	9
	Assets and Income	T	at	Va clo	lu	ati of	on	of	fAs	se g pe	ts erio	d					In	nco	om ked	e: t	ype o o	an the	id a	mo	oun y is	t. I	f "N	Non	e (e	or l	ess k C	than \$201 for that it	l)" is em.
	BLOCK A					BL	OCK	ΚB																BL	OCK	C							
producting per in inco with su For you amoun than from the port	at, your spouse, and dependent children, each asset held for investment or the tion of income which had a fair market xceeding \$1,000 at the close of the reportiod, or which generated more than \$200 me during the reporting period, together inch income. The specific period income exceeding \$200 (other om the U.S. Government). For your spouse, the source but not the amount of earned amount of any honoraria over \$200 of pouse).	less than \$1,001)	1-\$15,000	\$15,001-\$50,000	\$50,001 - \$100,000	腦	\$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 \$50,000,000	Excepted Investment Fund	Excepted Trust	Qualified Trust		Rent and Royalties		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	\$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
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* Th	is category applies only if the asset/income the filer with the spouse or dependent chil	is so ldren	olely i, ma	that irk th	of the o	he f	iler'	's sp	cati	e or	r der ries	of v	ient alue,	chil as	dren	ı. If	the	asse	et/ir	con	ie Is	eith	er t	hat	of th	ne fi	ler (or jo	intly	y he	ld		

	leporting Individual's Name									SC			e c							ied	1										ray	a of	9
	Assets and Income		at	V:	alu ose	ati	ion rep	of	As	se pe	ts rio	d					Ir	ico) m	e: t	ype o of	an	d a	mo	un / is	t. If	"N ede	lon ed i	e (e	or le	ess k C	than \$20 for that i	01)" is item.
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		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	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*	\$1,000,0001~\$5,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
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2	GM 401K Plan Fidelity Contrafund			×		Committee of the				Total Section	*			×				The second		September 2	×	A Chief				000000000000000000000000000000000000000		The second second		A Constitution of			
3	Northwestern Mutual Whole Life	T. Contraction		And the last		×				(Falley partie)		-		100		a contract		The state of the s		A Victorian	×	The same		-		Salamona		A Acceptance		S. Comment			100
4	Northwestern Mutual Whole Life	A Company		×		ACTIVITY OF		1		10000						Annual mean		Control Married In		den species	×			700		100 Santah		100		Constitution of the			
5	Northwestern Mutual Whole Life		×		ij	Di-2017												Contract of two		To design	×	Table Co.		-		0.000.000		1000		PASSITA G			
6	Silver Lake Sumeru (underlying holdings listed below)	110000000		×	Ī	The second				1										to and only	×		n			-				Colections			
7	AVI-SPL (Audio Visual Systems and Services) Tampa, FL	Total total	×	-		Mar. 400 - 100				Second						Manager on		1000		afternoon a	×			1		Special street		The second second		Accompany.			
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9	- Mobile Messenger (Software/Processing) Los Angeles, CA	10 mg	×	Party and draw		10/20/20/20	Ī									- Chance				-	×	7		A STATE OF STREET		Strange P.				a tracement			

	Reporting Individual's Name ILLER, Anthony W.									SC								nt		ue	d										Pag	ge Number 4 of	9
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		None (or less than \$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*	\$1,000,0001 - \$5,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
1	Silver Lake Technology Assoc. LP III (reportable underlying holdings listed below):		×			P. C. Control of the				P.Centerricon								-	- Annanananananananananananananananananan		×			200		their one solution		Nac in	1	200000			
2	- Avaya Stock (Telecom) Basking Ridge, NJ		×			Secretaria Acta	Ī		d	and the same						1		T			×					part black				the comment			
3	CDW Senior Subordinated Bridge Loan (Software/Hardware) Vernon Hills, MI	×		100		S. Legendre S.		at the state of th		· Individual									×			×				S MONORAL SO							
4	Basket of Debt Instruments (Income attributable to each not readily ascertainable)	×		-		NESELECT.		****		A		The state of the s				-			×			×				AND SANDERSON							
5	Avaya Senior Secured Term Loan "B" Intelsat 11.25% Sr. Unsec Notes due 2017			- Processing		See and						100000				-		1	1							10 mm		-		- Anna State			
6	3) Intelsat 11.5/12/5% Sr. PIK Notes due 2017' 4) CDW Sr. Sub Bridge Loan			1		Cartella Car		M		adjadranja		- Annielos							-							Charles and U							
7	5) CDW Sr Secured Term Loan 6) Sensata 11.25% Sr. Sub. Notes due 2014					and the special section				the state of the state of		Community (second)							Application of the last							The second				100			
8						Pencileo -				Contractor Co.		-					Ī		CO. 100 C		T			- Allendary		2000000							
9				The state of the s		A North State of				A service of		-		1		and the Company		1								Stitles of				200000			
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	Assets and Income	T	at	Va	lua se d	ation r	one	of A	ig p	ts erio	d			Ī		In	nec) m kec	e: t	ype o o	e an	d a	mo	un / is	t. If	"N ede	lone d in	e (c	or le	ess :	than \$20 for that	01)" is item.
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1	LRN Retirement Fund (via Principal Fin Grp): MidCap Value I Separate Account-R6			-	×	10,774, per 25				The state of the s	8		×				A COLUMNIA SANCE		-constitution-	×	-		more a born		Security Service				Complete man			
2	City of Los Angeles			Appropriate to the same of		to de him to		1		į									September 196	Г	- Armenia de		Ores depart		AND SHOW				A CANADA		Spouse Salary	
3	LACERS (Defined Benefit Plan) (S)			17.0	,	×					1								does the	×			10.00		Contraction of the				Springer Ser			
4	Silver Lake			and other parts	1	The second	-	1		11.40.00.00.00									and probability			X	Contract of the Contract of th		- 100 mgs.		- CONT.		CONT. COLOR		Salary \$1,937,000	
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7					1	Opposition of			T										1		The state of				decision.				- Annual Property			
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	* This category applies only if the asset/incom by the filer with the spouse or dependent ch	e is so	olely n, ma	that rk th	of the	he fi	ler's	spor	use o	r dep	of va	lent	chile as a	drer	n. If	the	asse	et/ir	соп	ne is	eith	er t	hat	of th	ne fil	ler o	or joi	ntly	hel	d		

	Reporting Individual's Name IILLER, Anthony W.								5	SC	H				E A					ue	d										Pag	e Number 6 of	9
	Assets and Income		a	Va t cle	alu		rep	of	ing	se g pe	ts rio	d					I	nco	o m cked	e: t	уро	e ar	nd a	ntry	y is	nee	ede	loned is	e (d	or le	ess k C	than \$20 for that i	1)" is item.
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		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*	\$1,000,0001 - \$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	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only If Honoraria
1	Silver Lake 401(k) Assets: (underlying assets listed below:)	1912.5		100		Total State of the		1000		Tark Associate								24.0		10000				9546		Contract Contract				HEALTH BOW		21	
2	Alliance Bernstein 2040 Retirement Strategy A	T		×) Janasay								×		Total Section			-		×					- Strike Sec.				and an index			
3	AllianceBernstein Small/Mid Cap Value A	T	×	1201		Harry made				CARGON A				×					Commence of Commence		×					planting.		Name of Street		To an individu			
4	AIM Energy Fund A	T	×			26 20 20 40 V				3 31 10 10 10 10 10 10 10 10 10 10 10 10 10				×	1				A CONTRACTOR AND A CONT		×			and the contract of		Albert St.		0					
5	AllianceBernstein International Value A	T	×			- Property		-		C. C				×							×					T Adject all		1		94-551 p/c /**			
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9		t		1		economic property		and the second							1 1000		H		1		The same of the sa					A PARAMETER				Transfer and			
-	* This category applies only if the asset/incomby the filer with the spouse or dependent ch	e is so	olely	tha	t of	the s	filer r his	's sp	oous	e or	dep	enc	lent alue	chil	dre	n. If	the	ass	set/i	ncor	me i	s eit	ner t	hat	of the	ne fi	ler o	or jo	intly	y he	ld		

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Do not complete Schedule B If you are a new entrant, nominee, or Vice Presidential or Presidential Candidate

Reporting Individual's Name MILLER, Anthony W.	SCHEI	DUL	E I	3							Page	e Num		of 9		
Part I: Transactions Report any purchase, sale, or exchange by you, your spouse, or dependent	ge Do not report a transaction involving property used solely as your personal	None	e 🔲	1												
children during the reporting period real property, stocks, bonds, commod	of any residence, or a transaction solely between you, your spouse, or dependent child.	Tra	nsaci ype (tion (x)		223979		A	moun	t of T	ransa	ction	(x)		655651	
futures, and other securities when the amount of the transaction exceeded 5 Include transactions that resulted in	e Check the "Certificate of divestiture" block \$1,000. to indicate sales made pursuant to a	Purchase		Exchange	Date (Mo., Day, Yr.)	\$1,001	5,001 -	\$100,000	50,000	000,000,	**************************************	\$5,000,000	5,000,000	\$25,000,001	\$50,000,000	Certificate of divestiture
Ide	ntification of Assets	Pur	Sale	Ä		53	\$18	\$10	522	\$3	\$1	\$1,	\$5.	\$25	\$20	कुट्ट
Example Central Airlines Common		X		認調	2/1/99			X	可能是					-		1
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		Notice		in many		June			1		-					
5						11/5					-	100				
For you, your spouse and dependent tion, and the value of: (1) gifts (such food, or entertainment) received from (2) travel-related cash reimbursemen than \$260. For conflicts analysis, it is as personal friend, agency approval u authority, etc. For travel-related gifts	as tangible items, transportation, lodging, none source totaling more than \$260, and indep its received from one source totaling more the detailed indicate a basis for receipt, such	S. Gov ed from endent onor's	m re t of t resid	lative their dence one	given to y es; received relationsh a. Also, for source, exc	d by y ip to y purp	your you; oses	spouse or prov of agg:	or devided	as po	dent ersoi ifts t	child nal h	d tot ospi term instr	ally tality ine th	at	
Source (Name and Address)	В	rief D	escrip	ption									Vs	lue	
Examples Nat'l Assn. of Rock Collectors, NY, N	Y Airline ticket, hotel room & meals incident to nation	nal confe	renc	e 6/15	/99 (persona	l activ	ity un	related t	o duty)		- 0		\$5	00	
Frank Jones, San Francisco, CA	Leather briefcase (personal friend)						V							\$3	00	
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	Individual's Name anthony W.	S	CHED	ULE (9						Page	Numb	er 8 of	9	
Report li	I: Liabilities abilities over \$10,000 owed the creditor at any time	a mortgage on your personal residence unless it is rented out; loans secured by automobiles, household furniture	None >	3				(atego	ry of A	moun	t or Va	lue (x)			
your spo Check th	ne reporting period by you, use, or dependent children. e highest amount owed ne reporting period. Exclude	or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.	Date	Interest	Term if	\$15,001 -	\$15,001 -	\$50,001 -	\$250,000-	50,001 -	\$500,001 -	Over \$1,000,000*	\$1,000,001-	\$5,000,001 -	\$25,000,000 -	Over \$50,000,000
	Creditors (Name and Address)	Type of Liability	Incurred	Rate	applicable	Si	\$51	\$50	\$2	\$2	\$5	è i	\$1,	\$5	\$22	\$50
Examples	First District Bank, Washington, DC John Jones, 123 JSt., Washington, DC	Mortgage on rental property, Delaware Promissory note	1991	10%	25 yrs. on demand			2 x 14		x						ESERTE TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE
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2						214				10-240				A-1-		
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4								- 500		1						i i
5																N
*This ca	regory annlies only if the lighility is s	olely that of the filer's snouse or dependent child	ren lf the li	ahility is t	hat of the fi	er or	ioint	liabili	tv of t	the fil	er					
with th	e spouse or dependent children, mark	olely that of the filer's spouse or dependent child the other higher categories, as appropriate.	0.000	*****		21.00	Comp	300,770	8.50	102 800						
Report y	e benefit plan (e.g. pension, 401)	Arrangements s for: (1) continuing participation in an k, deferred compensation); (2) continua- ncluding severance payments); (3) leaves	of absering of n	ice; and (egotiation	4) future on for any	emplo of the	ymer ese ar	it. See	instr ment	ructions or 1	ons re	egard its.	ing th	е гер	ort- None	<u>:</u>
	Status and Te	rms of any Agreement or Arrangement							Partie	es					I	Date
Example	Pursuant to partnership agreement, calculated on service performed thro	will receive lump sum payment of capital account & payment of payment account & payment of capital account & payment	artnership sh	are	Doe Jones	& Smit	h, Hon	etown	, State						7	7/85
1 Gener	al Motors 401K Plan. No further contri	butions made to this plan since I left employment w	ith GM.		General M	fotors									06	6/84
2 LRN D	efined Contribution Plan. No further co	ontributions made to this plan since I left employme	nt with LRN.		LRN										1/	/03
3 Silver	ake 401K Plan. No further contribution	ns made to this plan since I left employment with S	lver Lake.		Silver Lak	e									10	0/07
4 McKin	sey & Co. Defined Contribution Plan.	No further contributions made to this plan since I left	this employ	ment.	McKinsey	& Co.									11	1/92
5																
6																

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100	orting Individual's Name LER, Anthony W.		SCHEDULE D		Page Number	of 9
Rep sate trus	ort 1: Positions Held ort any positions held during the ed or not. Positions include but are stee, general partner, proprietor, or corporation, firm, partnership, or	applicable reporting period, not limited to those of an o epresentative, employee, or	whether compen- organization or edu- fficer, director, consultant of social, fraternal, or nature.	ucational institution. Exclude posi r political entities and those solely o	of an honorary	s,
	Organization (Nam	e and Address)	Type of Organization	Position Held	From (Mo., Yr.,	To (Mo., Yr.
	Nat'l Assn. of Rock Collectors, NY, NY	THE RESERVE OF STREET	Non-profit education	President	6/92	Present
Exam	Doe Jones & Smith, Hometown, State		Law firm	Partner	7/85	1/00
1	Silver Lake, Menlo Park, CA	-	Private Equity Firm	Partner	04/2007	02/2009
2 1	United Friends of the Children, Los Ange	les, CA	Non-profit foster care	Board member	10/2002	02/2009
3 (ConnectQuest, Los Angeles, CA		For Profit Company	CEO	11/2006	3/2007
Rep bus the	art II: Compensation or sources of more than \$5,000 or services provide reporting period. This includes the poration, firm, partnership, or other	compensation received by you during a names of clients and customers	any one year of you directly provide services generating	ation when Presidential or P	ination Filer, or residential Can ,000. You	r Vice
	Source (Name a	and Address)		Brief Description of Duties		
Exan	Doe Jones & Smith, Hometown, State Metro University (client of Doe Jones &	: Smith), Moneytown, State	Legal services Legal services in connection with univ	versity construction		
2 3	Silver Lake, Menlo Park, CA		Portfolio Company Management and	d Investment Advisory Services		
4						
5						
6						_