## Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

OMB No. 3209-0001

U.S. Office of Government Ethics	and the second second					
Date of Appointment, Candidacy, Biection or Nomination (Manth, Day, Year)		olendar Year overed by Report	New Entrant, Nominee.	Termination	Termination Date III Appli- cable ) [Month, Day, Year ]	Fee for Late Filing.  Any individual who is required to
	(програние вляга)		or Candidate	Filer		file this report and does so more than
	kast-Name		First Name and Middle	Initial		30 days after the date the report is
Reporting Individual's Name	Goolsbee		Austan	milia		is granted, more than 30 days after the
	Title of Position		Department of Agency	(If Applicable)		shall be subject to a \$200 fee.
Position for Which Filing	Member, Council of Economic A	dvisers	EOP			
	Address (Number, Street, City, Store, and	d ZIP Code	* * * * * * * * * * * * * * * * * * * *	Telephone No (Incl	vide Area (Ode)	Reporting Periods Incumbents: The reporting period is
Location of Present Office (or forwarding address):	University of Chicago, GSB, 580	7 S. Woodlawn Ave,	Chicago, IL 60637	773-702-1234		the preceding calendar year except Part II of Schedule C and Part I of Schedule D where you must also
Position(s) Held with the Federal	Title of Position(s) and Date(s) Held		w s. i	1		
Government During the Preceding 12 Months (If Not Same as Above)	r					you file. Part !! of Schedule Dis not applicable.
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	the control of the same of the same	Alle Solver is	Same of the Comment		a \$2 a5 θ a ± 5 € + 3	Termination Filters: The reporting
Presidential Nominees Subjectito	Name of Congressional Committee Cons		Do You Intend to Creat	e a Qualified Diversiti	ed Trust?	period begins at the end of the period
Scarce Commission	Banking, Housing, and Urban Af	fairs	Yes. 7	X No		covered by your previous filing and ends at the date of termination. Part II
Certification				Date (Monile; Day		of Schedule D is not applicable.
CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct	Signature of Reporting Individual			January		Nominees, New Entrants and Candidates for President and Vice President:
to the best of my knowledge.	700			40.4.00	11/1 000	Schedule A. The reporting period for
	Signature of Other Reviewer		<u> </u>	Date Alonth Day	Year Y. E.	income (BLOCK C) is the preceding calendar year and the current calendar
Other Review (If desired by agency)					170	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.
Agency Ethics Official's Opinion	Signature of Designated Agency Ethics	Official/Reviewing Offici	al.	Date (Month Days	Yeur)	Schedule R. Not applicable
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).	Rosemary 1	1. Roge	n	iful	09	Schedule C. Part I dishibites. The reporting period is the preceding salendar year and the current calendar year up to any date you choose that is.
Office of Government Ethics	Signature			Date (Manik Day	Yent Yent	within 31 days of the date of filing.
Use Only	141 A	Curale		1//2/2	39	Schedule C Part II / a meaments or Arrangements) - Show any agreements
Coraments of Reviewing Officials (If ordain	torial space is required, use the reverse sid	le of this sheet)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	of the latest of	or utrangements as of the date of
		(Check box if)	filing extension granted &	indicate number of de	nys	Schedule II—The recording period is
	:				2	the preceding two calendar years and the current calendar year up to the date of filing
A Section 1		•		÷	2.	Agency Use Only have
			(Check box if commu	ents are continued on i	lho reverse side)	JAN 1 1 2009
9 1 - 2	E ale		·	·		ONIT I I LOUG!

SF278 (Rev. 03/2000)

5 C.F.R. Part 2634 U.S. Office of Government Ethics Reporting Individual's Name Page Number SCHEDULE A 2 of 11 Goolsbee Income: type and amount. If "None (or less than \$201)" is checked, no Assets and Income Valuation of Assets at close of other entry is needed in Block C for that item. reporting period BLOCKB BLOCK A BLOCK C Type Amount For you, your spouse, and dependent children, report each asset held for investment or the production of income which had a fair market value exceeding \$1,000 at the close of the reporting period, or which generated more than \$200 Other Date None for less than \$1,001) in income during the reporting period, together \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 Income (Mo., Day, None (or less than \$201) with such income. Yr.) (Specify \$500 dat . \$1 000 000 - \$500,000 Type & Rent and Royatics - \$100,000 For yourself, also report the source and actual Actual Only if Over \$50,000,000 \$50,001 - \$100,000 Over \$1,000,000\* \$1,001 - \$15,000 Over \$1,000.000 amount of earned income exceeding \$200 (other **Excepted Trust** Over \$5,000,000 Amount) \$5,001 - \$15,000 Honoraria than from the U.S. Government). For your spouse, report the source but not the amount of earned nterest \$250,001 income of more than \$1,000 (except report the \$50,001 actual acount of any honoraria over \$200 of your spouse). None Central Airlines Common Examples Doe Jones & Smith, Hometown, State Kempstone Equity Fund IRA: Heartland 500 Index Fund 403(b) Vanguard Inflation protected securities fund 2 403 (b) Vanguard Long-term bond index fund Vanguard Pacific Stock Index fund 4 solo 401(k)/self-employed profit sharing ked Fidelity Spartan US Equity Index fund 5 IRA--Spouse

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.

USAA Income Stock Fund

6 Residential property, Chicago, IL

X

U.S. Office of Government Ethics Page Number Reporting Individual's Name SCHEDULE A continued 3 of 11 Goolsbee (Use only if needed) Assets and Income Valuation of Assets Income: type and amount. If "None (or less than \$201)" is checked, no at close of other entry is needed in Block C for that item. reporting period BLOCK A BLOOKB BLOCK C Amount -Other Date \$5,000,001 - \$25,000,000 \$24,000,001 - \$40,000 Income (Mo., Day, \$250,001 - \$500,000 \$300,001 - \$1,000,000 Over \$1,000,000 \*\* (Specify Yr.\$50,601~\$100,000 \$100,001 \$250,000 Type & Over \$50,000,000 Actual Only if Excepted Trust Qualified Least \$1,001 - \$15,000 55,001 - \$15,000 Amount) Honoraria Interest Capital Calis Dividends -None Baxter Berkshire Hathaway B Costco Chevron PepsiCa Proctor and Gamble Parker Hannafin 8 401(a) retirement account Vanguard smallcap value Index fund Vanguard European stock index fund 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.

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mark the other higher categories of value, as appropriate.

SF278 (Rev. 03/2000) 5 C.F.R Part 2634

U.S. Office of Government Ethics Reporting Individual's Name Page Number SCHEDULE A continued 4 of 11 Goolsbee (Use only if needed) Assets and Income Valuation of Assets Income: type and amount. If "None (or less than \$201)" is checked, no at close of other entry is needed in Block C for that item. reporting period BLOCKB BLOCK A BLOCK C Amount Lype Other Date. Income (Mo., Day, \$5,000,001 - \$25,000,000 (Specify Yr.) \$400,001, \$1,000,000 Type & \$250,001 - \$500,000 Dividends Rent and Koyattics Over \$1,000,000 \* \$50,001 - \$100,000 Over \$50,000,000 Only if Actual Over \$1,000,000\* \$1,001 - \$15,000 Excepted Trust Oyer:\$5,000,000 \$5,001 - \$15,000 Amount) Honoraria \$1,001 - \$2,500 Interest None Vanguard Extended Market Vipers Wages 465,000 University of Chicago Chicago, IL. 3 Democratic Leadership Council/ Wages Progressive Policy Institute 1000 Washington, DC Wages 23000 Third Way Foundation, Washington DC Wages 3000 National Bureau of Economic Research Cambridge, MA wages 2000 New York Times, NY, NY Oct 3, 2008 7 Leigh Bureau (for speech at the honorarium Global Risk Forum 2008-Wash. DC) 31,500 honorarium 8 Sep 25, 2008 15,000 Reed College Institute Portland, OR wages KPMG corporate finance-services as 15,000 a meeting facilitator, Chicago, IL. 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.

SF278 (Rev. 03/2000)

5 C.F.R Part 2634 U.S. Office of Government Ethics Reporting Individual's Name Page Number SCHEDULE A continued 5 of 11 Goolsbee (Use only if needed) Assets and Income Valuation of Assets Income: type and amount. If "None (or Jess than \$201)" is checked, no at close of other entry is needed in Block C for that item. reporting period BLOCK A BLOODB BLOCKC Evpe A mount Other Date Mo., Day. \$5,000,001 - \$25,000,000 Income None (or less than \$201) \$250,001 - \$500,000 \$500,001 - \$1,00,000 (Specify Yr.) \$104.001-\$254-000 Type & \$15,001 \$50,000 Over \$1,000.000 \* Only if Over \$50,000,000 \$50,001 \$100,030 Actual Over \$1,000,500\* Over \$5,000,000 55.001 - \$15.000 Excepted Trust Amount) Onalified Teach Honoraria \$1,001-\$2,500 Dividends Interest \$50,001 None honorarium James Baker Institute, Rice University Apr 24, 2008 2,500 2 Microeconomics, Worth Publishing (as yet unfinished textbook) Value not readily as certainable Tax exempt interest Fidelity Money Market Fund Fidelity Cash Reserves 5 401(K)-Spouse State Street Global S&P 500 8 401(k)-Spouse Thomburg International Value Fund 7 401(k)-Spouse Wellington Growth Portfolio X 8 401(k)-Spouse: Viacom Company Stock Fund Class B (holds Viacom stock only) 9 401(k)-Spouse Barclav's Global Investors S&P 500 X index Fund 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 wild by the filer with the spouse or dependent children

mark the other higher categories of value, as appropriate.

SF278 (Rev. 03/2000) 5 C.F.R Part 2634

U.S. Office of Government Ethics									
Reporting Individual's Name	CCIII	EDULE A continued	Page Number						
Goolsbee			6 of 11						
Coolabee	(	Use only if needed)							
Assets and Income	Valuation of Assets at close of reporting period	Income: type and amount. If "None (or less than \$201)" other entry is needed in Block C for that item.	)" is checked, no						
BLOCK A	BLOCK A BLOCK C								
	\$1,001 - \$15,000 \$1,001 - \$15,000 \$15,001 - \$100,000 \$50,001 - \$100,000 \$250,001 - \$500,000 \$250,001 - \$500,000 \$250,001 - \$500,000 \$500,001 - \$25,000,000 \$3,000,001 - \$25,000,000 \$2,000,001 - \$25,000,000	Excepted Trust  Excepted Trust  Qualified Trust  Dividends  Restant Royalties  Restant Royalties  Interest  Capital Cans  None for less than \$2017  \$1001-\$2.500  \$1,001-\$2.500  \$1,501-\$1,5000  \$1,501-\$1,000,000*  \$1,000,000*  \$1,000,000*  \$1,000,000*	Other Income (Mo. Dav. (Specify Yr.) Type & Actual Amount) Honoraria						
None	\$100 \$100 \$100 \$100 \$100 \$2250 \$700 \$700 \$700 \$700 \$700 \$700 \$700 \$7	Exception  Qualitic  Qualitic  Divident  Resistant  Interest  Capital  Sandil  Over \$3.							
1 (401(k)—spouse McKinsey/AON US Passive Equity									
2 401(k) spouse McKinsey/AON Non-US Passive Equity	x								
3 401(k)spouse McKinsey/AON Non-US Active Equity	x								
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" This category applies only if the asset/income is	s solely that of the filer's spouse or dependent chil	dren. If the asset/income is either that of the filer or jointly held by the filer wi	th the spouse or dependent children						

SF278 (Rev. 03/2000) 5 C.F.R Part 2634

U.S. Office of Government Ethics Reporting Individual's Name age Number **SCHEDULE A continued** 7 of 11 Goolsbee (Use only if needed) Assets and Income Valuation of Assets Income: type and amount. If "None (or less than \$201)" is checked, no at close of other entry is needed in Block C for that item. reporting period BLCKB BLOCK A BLOCK C Amount Lype Other Date Income Mo., Dav. \$5,000,001 - \$25,000,000 None (or less than \$201) (Specify Yr.) S400,041 - \$1,000,00 \$250,001 - \$500,000 Type & S100,001 - \$250,000 \$50,001 - \$100,000 Actual Only if Over \$1,000,000\* Over \$1,000.000 Over \$5,000,000 \$1,001 - \$15,000 Excepted Trust Amount) Honoraria \$1,001 - \$2,500 Dividends Interest None motorola proshares short financials Financial Select Sector SPDR ETF Fidelity Spartan Total Market Index fund 5 Fidelity Spartan Extended Market Index Fidelity Spartan International Index fund hartford financial group ishares russell 1000 value index fund 9 vanguard value vipers 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.

												Page 1	lumbe	ī				
Goolsbee	SCHEDULE B												8 of 11					
Part I: Transactions						None	9		1							- Admin		
Report any purchase, sale, or exchange by you, your spoor dependent children during the reporting period of any		Transaction Type (x)				Amount of Tra						ansaction (x)						
erty, stocks, bonds, commodity finares, and other rities when the amount of the transaction exceeded 00. Include transactions that resulted in a loss. Do not	your spouse, or dependent child. Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.	Purchase	Salc	Exchange	Date (Mo., Day, Yr.)	00015	\$15,001	- +00'0	20,000	50,000	000,000	er 000,000	000,000	000,001 -	\$25,000,001 -	35,000,000	Certificate of	
	dentification of Assets	-1	Sa	ığ.	1	5 E	35	25.3	\$ 18	2 3	100 ES	0 5	\$ 52	\$5,	\$25	Over \$50,0	io.	
Example: Central Airlines Common		×			2/1/99	-	-	X.	-	-	-	_		1			-	
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	lely that of the filer's spouse or dependent children. If the underlying a																	
	dependent children, use the other higher categories of value, as approp	пате.		_		-		-				-					_	
Part II: Gifts, Reimbursements, and For you, your spouse and dependent children, reportion, and the value of: (1) gifts (such as tangible ite food, or entertainment) received from one source to (2) travel-related cash reimbursements received from than \$260. For conflicts analysis, it is helpful to incas personal friend, agency approval under 5 U.S.C. authority, etc. For travel-related gifts and reimbursed dates, and the nature of expenses provided. Excluding	rt the source, a brief descrip- ms, transportation, lodging, stalling more than \$260; and more source totaling more licate a basis for receipt, such \$4111 or other statutory ements, include travel itinerary, de anything given to you by	the I received the cotal for co	pendi lonor value ther	rom ent of s res e from exclu	nment; giv relatives; r Their relat idence. Als n one sour sions.	en to eceive ionshi so, for se, ex	ip to y	your . 'Gu; O oses (	spons i prov of age	e or d vided	epend as per ng gif	ent ch sonal is to c	ild to hospi letern	stally itality nine to struct	at he			
For you, your spouse and dependent children, reportion, and the value of: (1) giffs (such as tangible ite food, or entertainment) received from one source to (2) travel-related cash reimbursements received from as 260. For conflicts analysis, it is helpful to include as personal friend, agency approval under 5 U.S.C. authority, etc. For travel-related gifts and reimbursed dates, and the nature of expenses provided. Exclusions (Name and Address)	rt the source, a brief descrip- ms, transportation, lodging, otaling more than \$260; and m one source totaling more dicate a basis for receipt, such \$411 for other statutory ements, include travel itinerary, de anything given to you by	the Urece inde the cotal for co	pende lonor value ther	rom ent of s res e from exclu	rnment: giv relatives: r their relati idence. Als in one sour sions:	ven to eceive ionshi so, for se, ex	ed by ip to 9 purpo clude	your . '9à; o oses d items	spons of agg wort	e or d vided regati h \$10	epend as per ng gif	ent ch sonal is to c	ild to hospi letern	stally itality nine to struct	at he ions	Value		
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For you, your spouse and dependent children, reportion, and the value of: (1) giffs (such as tangible ite food, or entertainment) received from one source to (2) travel-related cash reimbursements received from han \$260. For conflicts analysis; it is helpful to include as personal friend, agency approval under 5 U.S.C. authority, etc. For travel-related gifts and reimburst lates, and the nature of expenses provided. Exclusionate (Name and Address)  Examples: Natl Assn. of Rock Collectors, NY, NY.	rt the source, a brief descrip- ms, transportation, lodging, otaling more than \$260; and m one source totaling more dicate a basis for receipt, such \$411 or other statutory ements, include travel itinerary, de anything given to you by  Airline ticket, hotel room & meals incident to national conference 6/1	the Urece inde the cotal for co	pendi lonor value other of	rom ent of s res e from exclu	rment; giv relatives; r f their relat idence. Als in one sour sions.	ven to eceive ionshi so, for se, ex	ed by ip to 9 purpo clude	your . '9à; o oses d items	spons of agg wort	e or d vided regati h \$10	epend as per ng gif	ent ch sonal is to c	ild to hospi letern	stally itality nine to struct	at he ions	\$500		
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For you, your spouse and dependent children, reportion, and the value of: (1) giffs (such as tangible ite food, or entertainment) received from one source to (2) travel-related cash reimbursements received from han \$260. For conflicts analysis; it is helpful to include as personal friend, agency approval under 5 U.S.C. authority, etc. For travel-related gifts and reimburst lates, and the nature of expenses provided. Exclusionate (Name and Address)  Examples: Natl Assi. of Rock Collectors, NY, NY, Frank Jones, San Francisco, CA	rt the source, a brief descrip- ms, transportation, lodging, otaling more than \$260; and m one source totaling more dicate a basis for receipt, such \$411 or other statutory ements, include travel itinerary, de anything given to you by  Airline ticket, hotel room & meals incident to national conference 6/1	the Urece inde the cotal for co	pendi lonor value other of	rom ent of s res e from exclu	rment; giv relatives; r f their relat idence. Als in one sour sions.	ven to eceive ionshi so, for se, ex	ed by ip to 9 purpo clude	your . '9à; o oses d items	spons of agg wort	e or d vided regati h \$10	epend as per ng gif	ent ch sonal is to c	ild to hospi letern	stally itality nine t struct	at he ions	\$500		
For you, your spouse and dependent children, reportion, and the value of: (1) giffs (such as tangible ite food, or entertainment) received from one source to (2) travel-related cash reimbursements received from as personal friend, agency approval under 5 U.S.C. authority, etc. For travel-related gifts and reimbursed dates, and the nature of expenses provided. Exclusionate (Name and Address)  Examples: Natl Assa. of Rock Collectors, NY, NY, Frank Iones, San Francisco, CA	rt the source, a brief descrip- ms, transportation, lodging, otaling more than \$260; and m one source totaling more dicate a basis for receipt, such \$411 or other statutory ements, include travel itinerary, de anything given to you by  Airline ticket, hotel room & meals incident to national conference 6/1	the Urece inde the cotal for co	pendi lonor value other of	rom ent of s res e from exclu	rment: giv relatives; r f their relat idence. Als in one sour sions.	ven to eceive ionshi so, for se, ex	ed by ip to 9 purpo clude	your . '9à; o oses d items	spons of agg wort	e or d vided regati h \$10	epend as per ng gif	ent ch sonal is to c	ild to hospi letern	stally itality nine t struct	at he ions	\$500		

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	Individual's Name	_				-					-		Page 1	Number			_
Goolsbe	e		SCHEDULE C										9 of 11				
Part I	Liabilities			· · · · · ·									-				
	abilities over \$10,000 owed to during the reporting period by	•	personal residence unless it is rented out; loans secured by automobiles, household furniture or appliances; and		No	ne	Category of Amount or Value (x)										
or dependent children. Check the highest amount owed during the reporting period. Exclude a mortgage on your		hest amount owed	liabilities owed to certain relatives listed in instructions.  See instructions for revolving charge accounts.	Date Incurred	Interest Rate	Term if applicable		15,001 -	\$50,001 -	\$100,001 -	\$250,001	5500,001 -	Over \$1,000,000*	\$1,000,001 -	\$5,000,001 -	525,000,001 -	
Creditors. (Name and Address)			Type of Liability	1		CRDIC	\$10,001	\$15,001	\$50	\$100	\$250	\$500	Over \$1.00	51,0	55,0	\$25,	6
Examples	First Dietriet Dank Machine	gton, DC	Mortgage on rental property, Delaware	199 <u>1</u>	8%	25 yrs.		<b>+</b>	- <u>x</u>								-
1 Citit	nortgage		Mortgage on property, Illinois	2005		25 years					x						
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Part	spouse or dependent children  II: Agreements or  your agreements or arrange be benefit plan (e.g. 401k, t by a former employer (in	Arrangements ements for: continuing deferred compensation	s participation in an n: (2) continuation	of absen	ice; and (4	) future e	mploy:	ment.	See in	nstruc or be	tions i		ling th	ie rep	orting	3	
			ny Agreement or Arrangement		11 1			3		. Partie							ate
Exampl	calculated on service perfo	reement, will receive lump somed through 1/00.	um payment of capital account & partnership share		•	Doe Jones & Smith, Hometown, State							.7/	85			
1 On l	eave of absence from the l	University of Chicago b	eginning January 2009 for up to two years.			Ur	niversit	y of C	hicag	o, Chi	cago,	IL	-				
			count while I am on leave. I will not make contributions to while I am on leave.	the accour	nt,		niversit		hicag	o, Chi	cago,	IL					
nor will the University of Chicago make contributions, while I am on leave.  I have a 401(a) retirement account. I will retain the account, but I will no longer make contributions to the account.				nt.		Na	itional imbrid	Burea		cono	nic R	esear	ch				
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U.S. Office of Government Ethics Reporting Individual's Name				Page Number						
		SCHEDULE D	10 of 11							
Goolsbee		SCREDULED		1 100						
A										
Part I: Positions Held Out										
Report any positions held during the	applicable reporting period, whether	consultant of any corporation, firm,	partnership, or other business enterprise or a	ny						
director, trustee, general partner, pro-	le but are not limited to those of an officer.	non-profit organization or education	al institution. Exclude positions with religion and those solely of an honorary nature.	ous.						
	· ·	· · · ·	and trose solery of an itemption familie.	.l None						
Oras	anization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Y					
Maril Agen of Pack Collecto		Non-profit education	· President	6/92	Present					
Doe Jones & Smith, Hometon		Law firm	Partner	7/85	1/00					
1 University of Chicago, Booth S		non-profit education	professor	7/95	present					
U. Chicago Initiative on Globa		non-profit research	co-director	2006	preseri					
2 American Bar Foundation, Ch		non-profit research	research fellow	7/96	present					
New York Times			economics columnist	2006	1/2008					
3 National Bureau of Economic	Research, Cambridge, MA	newspaper non-profit research	Public ec. Steering committee	2002	present					
American Economic Journal:		non-profit journal	associate editor	2007	present					
4 Milton Academy		non-profit education	board of trustees	2005	present					
National Lax Journal		non-profit journal	associate editor	2005	present					
5 University of Chicago laborate	bry 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/D	emocratic Leadership Council	non-profit research	senior economist	6/06	11/2008					
Part II: Compensation In	Excess Of \$5,000 Paid by One So	urce		Do not comp	lete this part					
Report sources of more than \$5,000 o	compensation received by you or your	corporation, firm, partnership, or oth	ner business enterprise, or any other non-pro-							
business affiliation for services provi	ded directly by you during any one year of		ided the services generating a fee or paymen							
the reporting period. This includes the	he names of clients and customers of any	of more than \$5,000. You need not	report the U.S. Government as a source.	Vice Presider						
		Florida (1971) Both Colonia		or Presidentia	al Candidate					
Later and the second				None						
Source (Name and Address)			Thef Description of Daties		-					
Bramples Doe Jones & Smith, Hometo		Legal services								
	Joe Jones & Smith), Moneytown, State	Legal services in connection with unit		1 . 3	-					
1 KPMG Corporate Finance, Ch	nicago, iL	Services provided as a meeting t	facilitator at their M&A conference in Chi-	cago						
2 Reed College Institute, Portla	nd, 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								

Research Fellow

e American Bar Foundation, Chicago IL.

SF 278 (Rev. 03/2000) 5 C.F.R Part 2634 U.S. Office of Government Ethics				ı						
Reporting Individual's Name				Page Number						
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compensated or not. Positions incl	utside U.S. Government he applicable reporting period, whether lude but are not limited to those of an officer, roprietor, representative, employee, or	consultant of any corporation, firm, pa non-profit organization or educational social, fraternal, or political entities an	artnership, or other business enterprise or a institution. Exclude positions with religion dispose solely of an honorary nature.	ous.						
	Control of the contro			None	hammand.					
	rganization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)					
Examples: Nat'l Assn. of Rock Collect		Non-profit education	: Fresident	6/92	Present					
Doe Jones & Smith, Home	De Jones & Smith, Hometown, State Law firm Partr		Partner	7/85	1/00					
1										
					·					
2			•	1	19					
3				1						
4					-					
5				1 1						
		-		-						
6				1						
				1						
Report sources of more than \$5,00 business affiliation for services prothe reporting period. This includes	n Excess Of \$5,000 Paid by One So 0 compensation received by you or your wided directly by you during any one year of sthe names of clients and customers of any	corporation, firm, partnership, or other organization when you directly provid of more than \$5,000. You need not re	412 42	fit if you are ar it Termination Vice Preside	ential tial Candidate					
Source (Name and Addres		•	Brief Description of Daties		1,277					
Examples Doe Jones & Smith, Home	etown, State	Legal services			<u> </u>					
Metro University (client o	t Doe Jones & Smith), Moneytown, State	Legal services in connection with univer	rsity construction		** ** Y. *** ) ***					
Dernocratic Leadership Cou	H (CI)	Senior Economist								
Washington, DC										
2 New York Times		Newspaper Column								
New York, NY										
3 Holtzbrink Publishing		Advance on Royalties for Textbook	K							
New York, NY										
4 j										
			V V V V V V V V V V V V V V V V V V V							
5		Table 1								
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