

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		Calendar Year Covered by Report		New Entrant, Nominee, or Candidate <input checked="" type="checkbox"/>		Termination <input type="checkbox"/> Filer		Termination Date (If Applicable) (Month, Day, Year)		Fee for Late Filing Any individual who is required to file this report and does so more than 30 days after the date the report is required to be filed, or, if an extension is granted, more than 30 days after the last day of the filing extension period shall be subject to a \$200 fee. Reporting Periods Incumbents: The reporting period is the preceding calendar year except Part II of Schedule C and Part I of Schedule D where you must also include the filing year up to the date you file. Part II of Schedule D is not applicable. Termination Filers: The reporting period begins at the end of the period covered by your previous filing and ends at the date of termination. Part II of Schedule D is not applicable. 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 agreement 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.
Reporting Individual's Name		Last Name Rivkin				First Name and Middle Initial Robert S.						
Position for Which Filing		Title of Position General Counsel				Department or Agency (If Applicable) U.S. Department of Transportation						
Location of Present Office (or forwarding address)		Address (Number, Street, City, State, and ZIP Code) Aon Corporation, 200 E. Randolph Street, 8th Floor, Chicago, IL 60601				Telephone No. (Include Area Code) (312) 381-5168						
Position(s) Held with the Federal Government During the Preceding 12 Months (If Not Same as Above)		Title of Position(s) and Date(s) Held										
Presidential Nominees Subject to Senate Confirmation		Name of Congressional Committee Considering Nomination Commerce, Science & Transportation				Do You Intend to Create a Qualified Diversified Trust? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
Certification		Signature of Reporting Individual				Date (Month, Day, Year) March 27, 2009						
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 Other Reviewer <i>Monica</i> 4/14/09 <i>Wm Register</i> 4/14/09 <i>Robert S. Rivkin</i>				Date (Month, Day, Year) 4-14-09						
Other Review (If desired by agency)		Signature of Designated Agency Ethics Official/Reviewing Official <i>Rosalind Atkins</i>				Date (Month, Day, Year) 4/14/09						
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 <i>Theresa A. C...</i>				Date (Month, Day, Year) 4/20/09						
Office of Government Ethics Use Only		Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheet). (Check box if filing extension granted & indicate number of days _____) <input type="checkbox"/>										
		(Check box if comments are continued on the reverse side) <input type="checkbox"/>										
		Agency Use Only OGE Use Only APR 17 2009										

Reporting Individual's Name Rivkin, Robert	SCHEDULE A	Page Number 2
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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																		
<p>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 in income during the reporting period, together with such income.</p> <p>For yourself, also report the source and actual amount of earned income exceeding \$200 (other than from the U.S. Government). For your spouse, report the source but not the amount of earned income of more than \$1,000 (except report the actual amount of any honoraria over \$200 of your spouse).</p> <p>None <input type="checkbox"/></p>											Type		Amount								Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria							
	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
Examples	Central Airlines Common										X										Low Partnership Income \$120,000								
	Doe Jones & Smith, Hometown, State										X																		
	Kempstone Equity Fund										X																		
	IRA: Heartland 500 Index Fund										X																		
1	Atlantic City NJ General Muni Bond										X																		
2	Pocono MTN PA SCH Dist Bond										X																		
3	Rogers AR SCH DIST NO 30 Bond										X																		
4	Mass. State WTR RES Bond										X																		
5																													
6	CVS CAREMARK CORP										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
 Rivkin, Robert

SCHEDULE A continued
 (Use only if needed)

BLOCK A	BLOCK B										BLOCK C																		
	Valuation of Assets at close of reporting period										Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.																		
											Type	Amount									Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria							
										Dividends	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*										
None <input type="checkbox"/>	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	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	INTL GAME TECHNOLOGY	X																X											
2	JP MORGAN CHASE	X																X											
3	METLIFE INC COM	X																X											
4	NORTHROP GRUMMAN CORP	X																X											
5	PPG INDUSTRIES INC	X																X											
6	PEABODY ENERGY CORP COM	X																X											
7	PRECISION CASTPARTS	X																X											
8	PRINCIPAL FINANCIAL INC	X																X											
9	TYCO INTL LTD, BERMUDA	X																X											

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Reporting Individual's Name
 Rivkin, Robert

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 (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 \$25,000,001 - \$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	AMERICAN CAPITAL WORLD (mutual fund) (CWGIX)			X									X								X													
2	JP MORGAN INTL (mutual fund) JFEAX		X										X								X													
3	VAN KAMPEN EQUITY (mutual fund) ACEIX		X										X								X													
4	PUERTO RICO COMWLTH PUBLIC IMPROVEMENT BOND Municipal Bond, G.O. Ensured			X													X				X													
5	ONEOK PARTNERS LP			X											X						X													
6	ABB LTD SPON ADR		X																		X													
7	ALLERGAN INC		X																		X													
8	ALTERA CORP COM		X																		X													
9	AMDOCS LIMITED		X																		X													

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Reporting Individual's Name
 Rivkin, Robert

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 (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*	\$1,000,001 - \$5,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
1	AMERICA MOVIL SAB-DE VC		X																	X													
2	APACHE CORP			X																X													
3	AVON PROD INC		X													X					X												
4	BROADCOM CORP CALIF CL A		X																	X													
5	CHESAPEAKE ENERGY OKLA		X																	X													
6	CVS CAREMARK CORP		X																	X													
7	DANAHER CORP DEL COM		X																	X													
8	DEVON ENERGY COHP NEW		X																	X													
9	DIGITAL RLTY TR INC (DLR)		X											X							X												

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Reporting Individual's Name
 Rivkin, Robert

SCHEDULE A continued

Page Number
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(Use only if needed)

BLOCK A	BLOCK B								BLOCK C																
	Valuation of Assets at close of reporting period								Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.																
BLOCK A	BLOCK B								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 *	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		X										X													
2		X										X													
3		X										X													
4		X										X													
5		X										X													
6		X										X													
7		X										X													
8		X										X													
9		X										X													

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Reporting Individual's Name
 Rivkin, Robert

SCHEDULE A continued
 (Use only if needed)

Page Number
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BLOCK A Assets and Income	BLOCK B Valuation of Assets at close of reporting period										BLOCK C Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.																												
											Type	Amount										Date (Mo., Day, Yr.) Only if Honoraria																	
											Dividends	None (or less than \$201)											Other Income (Specify Type & Actual Amount)																
										None <input type="checkbox"/>	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	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	NASDAQ OMX GRP INC										X													X															
2	ORACLE CORP \$0.01 DEL										X													X															
3	PETSMART INC										X													X															
4	QUEST DIAGNOSTICS INC										X													X															
5	SALESFORCE.COM INC										X													X															
6																																							
7	SMITH-NPHW PLC SPADR NEW										X													X															
8	STARWOOD HOTELS & RESORTS										X													X															
9	THERMO FISHER SCIENTIFIC										X													X															

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SCHEDULE A continued

Rivkin, Robert

(Use only if needed)

BLOCK A Assets and Income	BLOCK B Valuation of Assets at close of reporting period										BLOCK C Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.																								
	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	Type				Amount						Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria								
																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			
None <input type="checkbox"/>																																			
1 URS CORP NEW COM		X																		X															
2 ACE LIMITED		X																		X															
3																																			
4 BANK NEW YORK MELLON CORP		X														X							X												
5 BAXTER INTERNATIONAL INC		X																		X															
6																																			
7 DU PONT E I DE NEMOURS		X														X							X												
8 ENBRIDGE INC COM		X																		X															
9 FPL GROUP INC		X																		X															

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SCHEDULE A continued

Rivkin, Robert

(Use only if needed)

BLOCK A	BLOCK B										BLOCK C										Date (Mo., Day, Yr.) Only if Honoraria														
	Valuation of Assets at close of reporting period										Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.																								
											Type																								
None <input type="checkbox"/>	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*	\$1,000,001 - \$5,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)				
1	GENERAL MILLS	X													X					X															
2	HALLIBURTON COMPANY	X																		X															
3	HEWLETT PACKARD CO DEL	X																		X															
4	HONEYWELL INTL INC DEL	X													X					X															
5	INTL BUSINESS MACHINES	X																		X															
6	MCDONALD'S CORP COM	X													X					X															
7																																			
8	NOKIA CORP SPON ADR	X													X					X															
9	PEPSICO INC	X																		X															

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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 \$20)" 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 B											BLOCK C								
	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			Excluded Investment Fund	Excepted Trust	Qualified Trust	Type	Amount
		Dividends	Rent and Royalties	Interest	Capital Gains	None (or less than \$20)	\$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 PPL CORPORATION	X															X				
2 PROCTOR & GAMBLE CO	X															X				
3 SAP AKGSLTT SPONSORD ADR	X															X				
4 SCHLUMBERGER LTD	X															X				
5 SMITH-NORHW PLC SPADR NEW (SNN)	X															X				
6 STARWOOD HOTELS & RESORTS	X															X				
7 TIME WARNER INC NEW	X															X				
8 TORCHMARK CORP COM	X															X				
9 UNITED TECHS CORP COM Ticker: UTX	X															X				

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Reporting Individual's Name
 Rivkin, Robert

SCHEDULE A continued

Page Number
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(Use only if needed)

BLOCK A Assets and Income	BLOCK B Valuation of Assets at close of reporting period									BLOCK C Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.														
	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 *	None (or less than \$201)	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*	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
None <input type="checkbox"/>																								
1 VODAFONE GROUP PLC NEW		X								X					X									
2 WADDELL & REED FINL A		X								X					X									
3 WASTE MANAGEMENT INC NEW		X								X					X									
4 WYETH		X								X					X									
MERRILL LYNCH BANK USA RASP (Cash Only)					X										X									
AMERICAN NEW PERSPECTIVE Mutual Fund ANWPX		X								X					X									
DAVIS NEW YORK VENTURE FUND		X								X					X									
JOHN HANCOCK LARGE CAP FUND JLVIX		X								X					X									

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Reporting Individual's Name
 Rivkin, Robert

SCHEDULE A continued
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BLOCK A Assets and Income	BLOCK B Valuation of Assets at close of reporting period											BLOCK C Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.				Date (Mo., Day, Yr.) Only if Honoraria																		
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																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)			
<input type="checkbox"/> None																																		
Aon Corp vested stock options 2,686 shares at \$27.1550 expire 3/18/2014			X																	X														
Aon Corp vested stock options 5,462 shares at \$41.1950 expire 3/16/2012																				X														
Aon Corp vested stock options 3,692 shares at \$27.1550 expire 3/18/2014			X																	X														
Aon Corp vested stock options 1,223 shares at \$40.9100 expire 3/13/2008																				X														
Aon Corp unvested stock options 10,400 shares at \$25.5100 expire 7/14/2016					X															X														
Aon Corp unvested stock options 2,444 shares at \$40.9100 expire 3/13/2014																				X														
Aon Corporation				X											X					X														
Aon Corporation																																	2008 salary + 2007 bonus \$610,856	
																																	2009 salary & 2008 bonus \$213,950	

* 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
 Rivkin, Robert

SCHEDULE A continued
 (Use only if needed)

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BLOCK A Assets and Income	BLOCK B Valuation of Assets at close of reporting period							BLOCK C 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																	
	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*	Over \$5,000,000	Over \$25,000,000			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 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	Over \$5,000,000				
1 PENNSYLVANIA MUTUAL FUND PENN X		X									X				X														
2 LASALLE BANK CD		X										X			X														
3 GENL MOTORS ACCEPT CORP BOND		X										X			X														
4 INTL LEASE FINANCE CORP BOND		X										X			X														
5 BLACKROCK BASIC MUT FUND MCBAX		X									X			X															
6 BLACKROCK FUNDAMENTAL MUT FU MCFGX		X									X			X															
7 BLACKROCK GLOBAL MUT FUND MCLOX				X							X					X													
8 BLACKROCK HIGH INCOME MUT FU MFHIX		X									X			X															
9 BLACKROCK INTNT'L MUT FUND MCIVX		X									X			X															

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BLOCK A Assets and Income	BLOCK B Valuation of Assets at close of reporting period									BLOCK C 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												
	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*	\$1,000,001 - \$5,000,000	Over \$5,000,000		
1 BLACKROCK LARGE CAP MUT FUND MCLR	X											X							X															
2 BLACKROCK SHORT TERM MUT FUN	X											X							X															
3 BLACKROCK TOTAL RETURN MUT FU			X									X							X															
4 ALLIANZ NF J DIVIDEND MUT FUND			X									X								X														
5 PIMCO TOTAL RETURN FUND (Aon Savings Plan)			X									X							X															
6 DODGE & COX STOCK FUND (Aon Savings Plan)			X									X							X															
7 WELLS FARGO SMALL CAP VALUE (Aon Savings Plan) SSMVX			X									X							X															
8 AMERICAN EUROPACIFIC GROWTH (Aon Savings Plan)			X									X							X															
9																																		

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Reporting Individual's Name
 Rivkin, Robert

SCHEDULE A continued

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(Use only if needed)

BLOCK A Assets and Income	BLOCK B Valuation of Assets at close of reporting period										BLOCK C Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.																						
	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*	\$1,000,001 - \$5,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria	
None <input type="checkbox"/>																																	
Pritzker-Traubert Family Foundation																																spousal income fees	
2 Bright Start College Accts 529, IL Equity Portfolio				X								X							X														
4 IL Bright Start College Account 529, 15-17 Years Age Based Portfolio		X										X							X														
4 IL Bright Start College Accounts 529, 12-14 Years Age Based Portfolio		X										X							X														
4 IL Bright Start College Accounts 529, 10-11 Years Age Based Portfolio		X										X							X														
6 Wachovia Account (Cash Only)				X													X	X															
7 Bank of New York (Cash Only)			X														X	X															
8 Citibank Accounts (Cash Only)				X													X	X		X													
9 Chase Checking Account (Cash Only)	X															X	X																

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Reporting Individual's Name Rivkin, Robert	SCHEDULE A continued (Use only if needed)	Page Number 16
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Assets and Income <small>BLOCK A</small>	Valuation of Assets at close of reporting period <small>BLOCK B</small>									Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item. <small>BLOCK C</small>																		
	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 *	Excepted Investment Fund	Excepted Trust	Qualified Trust	Type				Amount						Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria					
												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
None <input type="checkbox"/>																												
GENERAL MOTORS CORP	X											X							X									
EMERSON ELEC CO	X											X							X									
³ CISCO SYS INC		X										X				X												
⁴ CITIGROUP INC		X														X												
⁵ COMCAST		X														X												
⁶ DEERE		X										X							X									
⁷ GENERAL ELECTRIC			X									X								X								
⁸ GOLDMAN SACHS		X										X							X									
⁹ INTEL CORP		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.

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

Reporting Individual's Name Rivkin, Robert	SCHEDULE B	Page Number 19
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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			

Reporting Individual's Name Rivkin, Robert	SCHEDULE D	Page Number 21
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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	Aon Corporation, Chicago, IL	Insurance Brokerage and Consulting	Vice President & Deputy GC	2/04	Present
2	City Year Chicago	Non-profit youth development	Director	2007	Present
3	Illinois Chamber of Commerce	Business Association	Director	2005	Present
4	Leadership Greater Chicago	Non-profit civic association	Director	10/05	Present
5	Metropolitan Planning Council, Chicago	Non-profit civic association	Board of Governors	09/08	Present
6	Harvard Club of Chicago	Non-profit education/promotion	Director	1992	2008

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

Report sources of more than \$5,000 compensation received by you or your business affiliation for services provided directly by you during any one year of the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any other non-profit organization when you directly provided the services generating a fee or payment of more than \$5,000. You need not report the U.S. Government as a source.

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

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	Aon Corporation, Chicago, IL	Legal Executive
2		
3		
4		
5		
6		