U.S. - Je of Government Ethics Date of Appointment, Candidacy, Election

or Nomination (Month, Day, Year)

Reporting Status

appropriate boxes)

(Check

Executive Branch Personnel PUBLIC FINANCIAL DI

or Candidate

New Entrant, Nominee,

Calendar Year

Covered by Report

Incumbent

		Form Approved:
SCLOS	SURE REPORT	OMB No. 3209-0001
	Termination Date (If Appli- cable) (Month, Day, Year)	Fee for Late Filing
Termination Filer	tuble) (Monin, Day, Tear)	file this report and does so more than
		OMB No. 3209-00 Fee for Late Filing Any individual who is required to
licable)		
		Reporting Periods
ohone No. (In	clude Area Code)	
-456-1904		Part II of Schedule C and Part I of
		12
alified Divers	ified Trust?	
Intica Divers	ilica irust:	Theritod begins at the end of the period

					<u> </u>	30 days after the date the report is
Reporting Individual's Name	Last Name	First Name and Middle	Initial		required to be filed, or, if an extension is granted, more than 30 days after the	
Reporting marvidual's Name	Shaw		Katherine A.		last day of the filing extension period	
	Title of Position		Department or Agency (If Applicable)		shall be subject to a \$200 fee.
Position for Which Filing	Associate Counsel to the Preside	nt	White House Office	e		Reporting Periods
	Address (Number, Street, City, State, and	ZIP Code)		Telephone No. (Inc	lude Area Code)	Incumbents: The reporting period is
Location of Present Office (or forwarding address)	Eisenhower Executive Office Buil	ding		202-456-1904		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					include the filing year up to the date
Government During the Preceding 12 Months (If Not Same as Above)	Law Clerk, Supreme Court of the	United States				you file. Part II of Schedule D is not applicable.
Presidential Nominees Subject to	Name of Congressional Committee Consideration	dering Nomination	Do You Intend to Create	e a Qualified Diversi	fied Trust?	Termination Filers: The reporting period begins at the end of the period
Senate Confirmation			Yes	No		covered by your previous filing and ends at the date of termination. Part II
Certification	Signature of Reporting Individual			Date (Month, Day,	Year)	of Schedule D is not applicable.
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.	Lether Sa			2/18/		Nominees, New Entrants and Candidates for President and Vice President:
	Signature of Other Reviewer			Date (Month, Day,		Schedule A—The reporting period for income (BLOCK C) is the preceding
Other Review (If desired by agency)	11entulf		2/1	9/09	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.	
Agency Ethics Official's Opinion	Signature/of Designated Agency Ethics O	fficial/Reviewing Official		Date (Month, Day,	Year)	Schedule B-Not applicable.
On the basis of information contained in this report, I conclude that the filer is a compliance with applicable laws and egulations (subject to any comments in the box below).	Ky A. Cont			2/19/09		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
Office of Government Ethics	Signature '			Date (Month, Dav.	Year)	within 31 days of the date of filing.
Use Only						Schedule C. Part II (Agreements or Arrangements)— Show any agreements
omments of Reviewing Officials (If addit	ional space is required, use the reverse side	of this sheet)				or arrangements as of the date of
		(Check box if file	ing extension granted &	indicate number of a	lays)	filing.
	Schedule D—The reporting period is the preceding two calendar years and the current calendar year up to the date of filing.					
						Agency Use Only
			(Check box if comme	onte are continued an	the reverse side	OGE Use Only

U.S. Office of Government Et	thics
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0.3 Office of Government Educa		
Reporting Individual's Name	SCHEDULE A	age Number
Assets and Income	Valuation of Assets at close of other entry is needed in Block C for that item. PLOCK P.	s checked, no
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. For yourself, also report the source and actual amount of earned income exceeding \$200 (other than from the U.S. Government). For your spour report the source but not the amount of earned income of more than \$1,000 (except report the actual acount of any honoraria over \$200 of your spouse).	1,000 000 000 0,000 000 4 0,000 000 4 5,000,000 25,000,000 25,000,000 25,000,000 25,000,000 25,000,000 25,000,000 25,000,000 25,000,000 25,000,000 25,000 000 25,000,000 25,000 25,000 25,000,000 25,00	Other Income (Mo., Day, (Specify Yr.) Type & Actual Amount) Only if Honoraria
Central Airlines Common Examples Doe Jones & Smith, Hometown, State Kempstone Equity Fund IRA: Hearland 500 Index Fund 1 Obama-Biden Transition Project Pennsylvania Campaign for Change Charles Schwab & Co. Roth Contributo 2 Fifth Third Bank Certificate of Deposit Bank of America Savings Account		\$11,361.00 \$296.00
(S) Vanguard dymkt ROTH IRA (S) The Nation Magazine (S) The New America Foundation (S) The New Republic (S) The New York Times (S) Barnesandnoble.com (S) Al Jazeera International		salary salary income Income Income Income
This category applies only if the asset/incom	te is solely that of the filer's spowse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the	he spouse or dependent children

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k the other higher categories of value, as appropriate.

SF 278 (Rev. 03/2000) 5 C.P.R Part 2634 U.S. Office of Government Ethics	Do not Complete Schedule B if you are a new entrant,	nominee	, Vic	e Pr	esio	dential o	r Pre	side	ntia	Car	ndid	ate						
Reporting Individual's Name	SCHEI	DULE B											Page 1	Number				
Part I: Transaction	1S						None	:										
Report any purchase, sale, or ex or dependent children during the			1	insacti						Ar	nount o	of Trans	saction	(x)				
property, stocks, bonds, commo securities when the amount of the \$1,000. Include transactions tha	veen you, Certificate of ant to a	hase		Type (x) Date (Mo., Day, Yr.)	\$1,001 - \$15,000	5,001 -	- 100.00	\$100,001 -	. 100'00	- 100,000,	,000,000	\$1,000,001 -	\$5,000,001 -	\$25,000,001 -	Over \$50,000,000	Certificate of divestiture		
Example: Central Airlines Co	Identification of Assets		X	S	E	2/1/99	2 2	2 23	X S	\$ 55	\$ \$2	\$ \$	Ó 54	2 8	\$ \$	\$ \$2	0 %	<u>မီ</u>
1						2/1/75												
2																		
3												-						
4							-	-	-		-	-	-	-				-
5								-		<u> </u>								
* This category applies only if	the underlying asset is solely that of the filer's spouse or dependent children. If the	ne underlyin	asset	is eit	her h	eld							-					
by the filer or jointly held by th	ne filer with the spouse or dependent children, use the other higher categories of v	alue, as appi	opriat	e														
Part II: Gifts, Rein	nbursements, and Travel Expenses																	
ion, and the value of: (1) gif food, or entertainment) recei 2) travel-related cash reimb han \$260. For conflicts anal 5 personal friend, agency ar uthority, etc. For travel-rela	pendent children, report the source, a brief descrip- fts (such as tangible items, transportation, lodging, ived from one source totaling more than \$260; and ursements received from one source totaling more lysis, it is helpful to indicate a basis for receipt, such oproval under 5 U.S.C. § 4111 or other statutory ated gifts and reimbursements, include travel itinerary, enses provided. Exclude anything given to you by		recei inder the d total	ved for the second of the seco	rom ent of s res e from	nment; giv relatives; r f their relati idence. Al- n one sour sions.	eceive ionsh so, for	ed by ip to y purp	your s you; o oses o	pouser prov f agg	e or d vided regati	epend as per ng gif	ent cl sona its to	hild to I hosp detern	otally itality nine the structi	at he]
Source (Na	ime and Address)		Bri	of Dec	crinti	n.											Value	

	Source (Name and Address)	Brief Description					
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)	\$500				
	Frank Jones, San Francisco, CA	Leather briefcase (personal friend)	\$300				
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SF 278 (Rev. 03/2000) 5 C.F.R Part 2634 U.S. Office of Government Ethics																		
Reporting Individual's Name		SCHEDU	LE C								Page Number							
Part I: Liabilities																		
Report liabilities over \$10,000 owed to any		personal residence unless it is rented out; loans secured		No	ne				Categ	ory of A	Amount	or Val	ue (x)					
any time during the reporting period by you or dependent children. Check the highest a		by automobiles, household furniture or appliances; and liabilities owed to certain relatives listed in instructions.																
during the reporting period. Exclude a mo	ortgage on your	See instructions for revolving charge accounts.	Date Incurred	Interest Rate	Term i appli- cable	\$10,001 -	5,001 -	0,001 -	50,000	\$250,001 -	- 100,000	Over \$1,000,000*	\$1,000,001	,000,000	\$25,000,001	Over \$50,000,000		
Creditors (Name and A		Type of Liability			ļ	\$ 15	55. 53		\$71	\$50	₹ %	ð ₩	55	\$2.55	\$ 52	\$ 5		
Examples: First District Bank, Washington, J John Jones, 123 J St., Washington	DC n. DC	Mortgage on rental property, Delaware Promissory note	1991	8%	25 yrs. on dema		 -	×	 -		 					 		
CitiBank Student Loans		Student Loan	2003	3.75%	25 yrs		X	1		1								
CitiBank Student Loans		Student Loan	2003	3.75%	25 yrs		X	↓	-	 	ļ				—	-		
CitiBank Student Loans CitiBank Student Loans		Student Loan Student Loan	2003 2003	3.75% 4.5%	25 yrs 25 yrs		X	1	1		1	1	1					
3 CitiBank Student Loans		Student Loan	2003	4.5%	25 yrs		Î	\top										
4						1		\dagger	1				1					
5							1	\top	1	1				-	1	1		
* This category applies only if the liability with the spouse or dependent children, many		ler's spouse or dependent children. If the liability is that of tegories, as appropriate.	f the filer or a	joint liab	ility of the	filer				·	·	·						
Part II: Agreements or A Report your agreements or arrangeme employee benefit plan (e.g. 401k, defe payment by a former employer (include	nts for: continuing perred compensation;	(2) continuation			4) future or any of							ling th	he rep		g			
	Status and Terms of any	Agreement or Arrangement							Partie	s					D	ate		
	ent, will receive lump sur	n payment of capital account & partnership share			Ι	oe Jones	& Smit	th, Hon	netown	, State					7.	/85		
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Repor	ting Individual's Name	Page Number						
Repo	ensated or not. Positions include	ide U.S. Government pplicable reporting period, whether but are not limited to those of an officer, ietor, representative, employee, or	non-profit organization or educations	partnership, or other business enterprise or an all institution. Exclude positions with religious and those solely of an honorary nature.				
	Organi	Position Held	From (Mo., Yr.)	To (Mo., Yr.)				
1	nples: Nat'l Assn. of Rock Collectors, Doe Jones & Smith, Hometown	n, State	Non-profit education Law firm	President Partner	- <u>6/92</u>	Present 1/00		
1 (Dbama-Biden Transition Project	tt	Presidential transition	Associate Counsel	8/08	1/09		
2								
3								
4								
5								
6								
Repo busir	ort sources of more than \$5,000 coness affiliation for services provide	Excess Of \$5,000 Paid by One Someone Source of	urce corporation, firm, partnership, or oth organization when you directly provi of more than \$5,000. You need not a	Do not complete this part if you are an Incumbent, Termination Filer, or Vice Presidential or Presidential Candidate				
	Source (Name and Address)			Brief Description of Duties				
Exam	Metro University (client of Do	be Jones & Smith), Moneytown, State	Legal services Legal services in connection with univ					
1	Obama-Biden Transition Project		Associate Counsel, Office of Gen	neral Counsel				
2			T					
3			1					
4								
5								
6								
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