,	
SF278 (Rev.	03/2000)

5 C.F.R Part 2634

Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

U.S. Office of Government Ethics									
Date of Appointment, Candidacy, Election or Nomination (Month Day, Year)	Reporting Status (Check	Incumbent	Calendar Year Covered by Report		New Entrant, Nominee,		Termination	Termination Date (If Appli- cable) (Month, Day, Year)	Fee for Late Filing Any individual who is required to
	appropriate boxes)			X	or Candidate		Filer		file this report and does so more than
	Last Name			L	First Name and Middle	Initi	al		30 days after the date the report is required to be filed, or, if an extension
Reporting Individual's Name	Suh				Rhea S.				is granted, more than 30 days after the last day of the filing extension period
	Title of Position				Department or Agency	(If A	pplicable)		shall be subject to a \$200 fee.
Position for Which Filing	Budget		Management and		Department of the	_			Reporting Periods
Location of Present Office		Street, City, State				<u> </u> −Te	lephone No. (Incl	ude Area Code)	Incumbents: The reporting period is the preceding calendar year except
(or forwarding address)	Los Altos, CA		Foundation, 300 S	econ	9 SL,	6	50 948 7658		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)	None						_		you file. Part II of Schedule D is not applicable.
Presidential Nominees Subject to	Name of Congress	ional Committee Co	onsidering Nomination		Do You Intend to Creat		Jualified Diversifi	erd Trust?	Termination Filers: The reporting period begins at the end of the period
Senate Confirmation									covered by your previous filing and ends
	Senate Energy	and Natural Re	sources		Yes .		X NO		at the date of termination. Part II
Certification	Signature of Repor	ting Individual					ite (Month, Day,	(ear)	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.	AA	lanh					4/20,	109	Nominees. New Entrants and Candidates for President and Vice President:
	Signature of Other	Reviewer	* * · · · · · · · · · · · · · · · · · ·			Da	ate (Month, Day,	Year)	Schedule A_The reporting period for income (BLOCK C) is the proceeding
Other Review (If desired by sgency)									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 Desig	nated Agency Ethic	S Official/Reviewing O	fficial		D	ate (Month. Day.	(ear)	Schedule R Not annlicable
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).	Meli	ind f	Lott	 		ł	fouri	21,2009	Schedule C. Part I /I inhibition 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	4-1	e			D:	te (Month Day	(ear)	within 31 days of the date of filing.
Use Only	14	TAC.	mh				4/24	109	Schedule (' Part II (Agreements or Arrangements) Show any agreements
Comments of Reviewing Officials Alf addition	ional space is requir	ed. use the reverse	side of this sheet)						or arrangements as of the date of filing.
			(Check be	ox if fil	ing extension granted &	indi	cate number of da	rys) 🗖	11111 <u>5</u> ,
									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 bax if comme	ents d	are continued on t	he reverse side)	APR 2 2 2009
Supersedes Drive Editions Which Corner D					70		D D	simod in Minute & Eurol 2000	NIEN 7540 01 070 8444

J.S. Office of Government Ethics Reporting Individual's Name							_														 				Page Number	
Rhea S. Suh										S	CH	ED	UL	EA							 _				2	
Assets and Income BLOCK A				ерог	close	of Derio				·				er enti						C fo	t iter		un \$2	2011	" is checked. no	
For you, your spouse, and dependent children, eport each asset held for investment or the production of income which had a fair market value exceeding \$1,000 at the close of the report ing 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 mount of earned income exceeding \$200 (othe han from the U.S. Government). For your spoi eport the source but not the amount of earned income of more than \$1,000 (except report the ctual acount of any honoraria over \$200 of your spouse).	(I \$1,001)	000°CTC - T00'STS	· \$50,001 - \$100,000		000/00/50 - 100/00/50		\$1,000,001 - \$ 5.000,000	\$5,000,001 - \$25,000,000	\$25,000,001 \$50,000,000	Over S50,000,000	bacepted Lavestment Pund	Excepted 1 rust Qualified Trust	Dividends	Rent and Royalties	Caint	None (or less than \$201)	S201 - S1,908	\$1,001 - \$2,500	S2.501 - S5.000	A	Int	Over \$1,000,000*	51.040.041 - \$5.000.000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Dav. Yr.) Only if Honorariz
Exemples Doe Jones & Smith, Hometown, State Kempstone Equity Fund IRA: Heartland 500 Index Fund			- ×							· · · ·			×								 				Law Partnership Jocome \$130,000	
Ing Savings Account (Cash Acct)			x	-	_										<u>د</u>			x			 					
Checking and Savings Accounts Packard Foundation 403B: Fidelity Freedom 2035 Fund		< x							-		×				-	×					 _					
4 Packard Foundation 401A: Fidelity Freedom 2035 Fund		×									x					x										
5 Hewlett Foundation Fidelity Freedom 2030 Fund				x							×_					x										
 American Conservatory Theater 403B TIAA-CREF (Spouse) TIAA Traditional Annuity 																Y										

Prior Editions Cannot be Used.

•	orting Individual's Name										sc	H	ED	UI	E	A	cor	nti	nu	ed									Page Number 3	
₹he	ea S. Suh									_		(Use	on	ly i	fn	eed	ed)									•			
	Assets and Income					a	tion clos	ie of	5	ets														one or th			\$2	01)"	is checked. no	
	BLOCK A			1000000	ر ه	-	SLOC	-	104					s r	1000000									OCK						
	None	None for less than 31.004)		515,061 - 550,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	Steel - S1, 000, 000	Over S1,000.000 *	51.000,001 - 3.5.000,000 66.600,001 - 676.000,000	\$25.000.001 - \$51.000.000	Over \$50,000,000	Excepted Investment Fund	Excepted Trust	Qualified Trust	Dividends	l Royalties	Interest	Capital Gains	None (or less than \$201)	S201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	Amo 000'85'5' 100'81'8	\$108,081 - \$1,080,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Dat (Mo., 1 Yr., Only Honor
1	CREF Stock		x										x							x										
2	CREF Bond Market		x										X							x										1
	The David and Lucile Packard Foundation Los Altos, CA																												Salary \$150,000	
4	Academy of Art University (Spouse) San Francisco CA																												Salary	
	Electronic Arts (Spouse) Redwood City, CA																												Salary	
	UC Berkeley (Spouse) Berkeley, CA						20 3500 1000																						Salary	
7																														
8																														
9																														

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

	Office of Government Ethics		······································	-,																
·	orting Individual's Name ea S. Suh		SCHEDULE	B										Page 1	Numbe	r	4		`	
P	art I: Transactions			•				None	5]									
	port any purchase, sale, or exchang dependent children during the repo		report a transaction involving property used solely as your personal residence, or a transaction solely between you,		ansacti Type (x						A	mount	of Tran	saction	(x)					
pro sec	perty, stocks, bonds, commodity fi urities when the amount of the tran 000. Include transactions that resul	utures, and other isaction exceeded	your spouse, or dependent child. Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.	Purchase	-	Exchange	Date (Mo. Day, Yr.)		\$15,001 - \$50,000	\$50,001 - \$100,000	00,001 - 50,000	50,001 - 00,000	\$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	er),000,000	Certificate of	cstitute
			cation of Assets	Ъп	Sale	Ĕ	j	\$1,	\$15 \$50	\$50 \$10	\$10 \$25	\$25 \$56	\$5C	Over \$1.00	\$1. \$5	\$5. \$2	\$25	Over \$50,(Cer	đĩ
	Example: Central Airlines Common			х			2/1/99			x				L						
1	· · · · · ·																			
2																				
3																				
4	-																			
5			· · · ·										-							-
* T	This category applies only if the un	nderlying asset is solely (hat of the filer's spouse or dependent children. If the underlyi	ng asse	t is ei	ther	held					-								
by	the filer or jointly held by the file	r with the spouse or depe	endent children, use the other higher categories of value, as ap	propria	te.															_
P	art II: Gifts, Reimbu	rsements, and I	Travel Expenses																	
tio foc (2) tha	r you, your spouse and dependen, n, and the value of: (1) gifts (su od, or entertainment) received f travel-related cash reimbursen an \$260. For conflicts analysis, personal friend, agency approv	uch as tangible items, the from one source totalin nents received from on- it is helpful to indicate	ransportation, lodging, g more than \$260; and e source totaling more a basis for receipt, such	rece: inde the c total	ived f pende lonor value	from ent o 's re e fro	emment; gi a relatives; : of their rela sidence. Al om one sou usions.	receive tionsh lso, foi	ed by ip to y purp	your s you; o oses o	spous r pro of age	e or c vided regat	lepend as per ing gif	ent cl sonal ts to (hosp hosp detern	tally itality nine f	y at the			
au	thority, etc. For travel-related g tes. and the nature of expenses	ifts and reimbursement	ts, include travel itinerary,	101 0		CACH											None		l	
	. Source (Name and	d Address)		Br	ief Des	script	tion											Value		
	Examples: Nat'l Assn. of Rock Colle Frank Jones, San Francisc		Airline ticket, hotel room & meals incident to national conference 6/ Leather briefcase (personal friend)	1 <u>5/99</u> (p	ersona	l acti	vity unrelated	to duty	2								<u> </u>	\$500 \$300		
1				•														-		
2																		-		
3																				
4																	-			
5																	1			-

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IS Office of Covernment E	÷.

U.S. Office	of Governme	nt Ethics
Reporting	Individual's	Name

Rhea S. Suh

SCHEDULE C

None X

Page Number

Category of Amount or Value (x)

5

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Part I: Liabilities

Report liabilities over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent children. Check the highest amount owed during the reporting period. Exclude a mortgage on your

personal residence unless it is rented out; loans secured by automobiles, household furniture or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.

	reporting period. Exclude a mortgage on your	See instructions for revolving charge accounts.	Date Incurred	Interest Rate	Term if . appli- cable	\$10,001 - \$15,000	- 100'	,000 - 100,	000 00	00,001 - 50,000	50,001 - 00,000	00,001 -		000'000	000,000	000,001	,000,001	
	Creditors (Name and Address)	Type of Liability				\$10	\$15	\$20	\$10	\$10	\$25 \$50	\$50	ۍ م	5	\$5,	\$5, \$25	\$25, \$50,	No P
Examples:	First District Bank, Washington, DC	Mortgage on rental property, Delaware	1991	8%	25 yrs.)										
Examples.	John Jones, 123 J St., Washington, DC	Promissory note	1999	10%	on demand				<u> </u>		x		- [-					[
1																		
2																		
3																		
4																		
5																		
	gory applies only if the liability is solely that of the pouse or dependent children, mark the other higher of	filer's spouse or dependent children. If the liability is that of the ategories, as appropriate.	e filer or a	joint liabi	ility of the fi	ler												

Part II: Agreements or Arrangements

Report your agreements or arrangements for: continuing participation in an employee benefit plan (e.g. 401k, deferred compensation; (2) continuation payment by a former employer (including severance payments); (3) leaves

of absence; and (4) future employment. See instructions regarding the reporting of negotiations for any of these arrangements or benefits

	None	
Status and Terms of any Agreement or Arrangement	Parties	Date
Example: Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through 1/00,	Doe Jones & Smith, Hometown, State	7/85
1 I will retain my 403B account; however, neither I nor the Packard Foundation will make any further contributions to this account.	Packard Foundation, Los Altos CA	10/07
2 I will retain my 401A account; however, neither I nor the Packard Foundation will make any further contributions to this account.	Packard Foundation, Los Altos CA	10/07
3 I will retain my my 403B account; however, neither I nor the Hewlett Foundation will make any further contributions to this account.	Hewlett Foundation, Menlo Park CA	8/1998
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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.

			1.0116	
Organization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)
Examples: Nat'l Assn. of Rock Collectors, NY, NY	Non-profit education	President	6/92	Present
Doe Jones & Smith, Hometown, State	Law firm	Partner	7/85	1/00
1 The David and Lucile Packard Foundation				
300 Second St., Los Altos CA, 94022	Charitiable Foundation	Program Officer, Manager	10/07	Present
2 Consultative Group for Biological Diversity				
Presidio Group 1016, San Francisco Ca 94129	Non-profit Association	Board Member	11/05	Present
3 Environmental Justice Initiative, School of Natural Resources and				
Environment, Univ of Michigan, Ann Arbor MI	Academic Association	Advisory Board Member	2002	Present
4 Hewlett Foundation				
Menlo Park, CA	Charitiable Foundation	Program Officer	8/1998	10/2007
5				
6				

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 **Г**

None ·

Source (Name and Address)		Brief Description of Duties		
Examples: Doe Jones & Smith, Hometown, State		Legal services		
Metro University (client of Doe Jones & Smith), Moneytown, State		Legal services in connection with university construction		
1	The David and Lucile Packard Foundation			
	300 Second St., Los Altos CA 94022	Services as Program Officer, Manager		
2	Hewlett Foundation			
	Menlo Park, CA	Services as Program Officer		
3				
4				
5				
6				