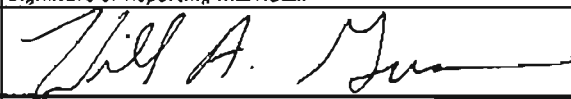

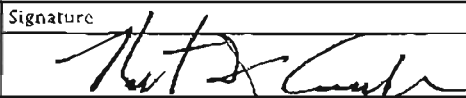


## Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Date of Appointment, Candidacy, Election, or Nomination (Month, Day, Year) <b>4/20/2009</b>	Reporting Status (Check Appropriate Boxes)	Incumbent <input type="checkbox"/>	Calendar Year Covered by Report	New Entrant, Nominee, or Candidate <input checked="" type="checkbox"/>	Termination Filer <input type="checkbox"/>	Termination Date (If Applicable) (Month, Day, Year)	<b>Fee for Late Filing</b> 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 Individual's Name	Last Name <b>Gunn</b>		First Name and Middle Initial <b>Willie A</b>				
Position for Which Filing	Title of Position <b>General Counsel</b>		Department or Agency (If Applicable) <b>Veterans Affairs</b>				
Location of Present Office (or forwarding address)	Address (Number, Street, City, State, and ZIP Code) <b>901 North Pitt Street, Suite 320 Alexandria, VA 22314</b>				Telephone No. (Include Area Code) <b>(703)549-7233</b>		
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 <b>None.</b>						
Presidential Nominees Subject to Senate Confirmation	Name of Congressional Committee Considering Nomination <b>Committee on Veterans' Affairs</b>			Do You Intend to Create a Qualified Diversified Trust?			
				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>Certification</b>	Signature of Reporting Individual 				Date (Month, Day, Year) <b>April 20, 2009</b>		
Other Review (If desired by agency)	Signature of Other Reviewer				Date (Month, Day, Year)		
Agency Ethics Official's Opinion	Signature of Designated Agency Ethics Official/Reviewing Official 				Date (Month, Day, Year) <b>April 21, 2009</b>		
Office of Government Ethics Use Only	Signature 				Date (Month, Day, Year) <b>4/21/09</b>		
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"/>							
							<b>Agency Use Only</b>
							<b>APR 20 2009</b>
							<b>OGE Use Only</b>
							<b>APR 21 2009</b>

**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 agreements 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.



Gunn, Willie A

**SCHEDULE A continued**  
 (Use only if needed)

3 of 11

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	Amount																				
	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 Franklin Equity Income A Fund		x											x					x			x											
2 Franklin High Income A		x											x							x												
3 Franklin Growth A		x											x							x												
4 Franklin Utilities A		x											x							x												
5 American GR FD OF America A		x											x							x												
6 Templeton World Fund A		x											x							x												
7 Templeton Global BD FD A		x											x							x												
8 MS Spectrum Strategic		x											x							x												
9 MS Spectrum Tech		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.





Reporting Individual's Name  
**Gunn, Willie A**

**SCHEDULE A continued**  
(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	Amount																
	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*	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 Fidelity Equity Income Fund		<input checked="" type="checkbox"/>							<input checked="" type="checkbox"/>												
2 Fidelity Freedom 2025 Fund		<input checked="" type="checkbox"/>							<input checked="" type="checkbox"/>												
3 Fidelity Freedom 2030 Fund		<input checked="" type="checkbox"/>							<input checked="" type="checkbox"/>												
4 PIMCO Total Return Adm		<input checked="" type="checkbox"/>							<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>											
5 U.S. Savings Bonds		<input checked="" type="checkbox"/>							<input checked="" type="checkbox"/>												
6 Franklin Templeton Mod Targ A	<input checked="" type="checkbox"/>								<input checked="" type="checkbox"/>												
7																					
8																					
9																					

\* 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, or Vice Presidential or Presidential Candidate

Reporting Individual's Name <b>Gunn, Willie A</b>	<b>SCHEDULE B</b>	Page Number <b>7 of 11</b>
--	-------------------	-------------------------------

**Part I: Transactions**

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.

None

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*	\$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	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
1			
2			
3			
4			
5			

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

Reporting Individual's Name <b>Gunn, Willie A</b>	<b>SCHEDULE B continued</b> (Use only if needed)	Page Number <b>8 of 11</b>
--	---	-------------------------------

**Part I: Transactions**

	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
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	
13																	
14																	
15																	
16																	

\*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.



Reporting Individual's Name <b>Gunn, Willie A</b>	<b>SCHEDULE C</b>	Page Number <b>9 of 11</b>
--	-------------------	-------------------------------

<b>Part I: Liabilities</b>		Category of Amount or Value (x)														
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.														
Creditors (Name and Address)		Type of Liability	Date Incurred	Interest Rate	Term If applicable	\$10,001 - \$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
Examples	First District Bank, Washington, DC John Jones, 123 J St., Washington, DC	Mortgage on rental property, Delaware Promissory note	1993 1999	8% 10%	25 yrs. on demand			x		x						
1	National City Mortgage Company	Mortgage on Rental Property	2003	6.1%	30 yrs.				x							
2	USAA	Charge Account	2007	7.75%	Revolving	x										
3																
4																
5																
6																

\*This category applies only if the liability is solely that of the filer's spouse or dependent children. If the liability is that of the filer or a joint liability of the filer with the spouse or dependent children, mark the other higher categories, as appropriate.

<b>Part II: Agreements or Arrangements</b>		None <input type="checkbox"/>	
Report your agreements or arrangements for: (1) continuing participation in an employee benefit plan (e.g. pension, 401k, deferred compensation); (2) continuation of 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.	
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.	Doc Jones & Smith, Hometown, State	7/85	
1 Boys and Girls Clubs of America Pension Trust Plan consisting of five Fidelity funds included on Schedule A. I continue to participate in this plan but neither I nor Boys and Girls Clubs will make any further payments.	Boys and Girls Clubs of Greater Washington	10/05	
2			
3			
4			
5			
6			

Reporting Individual's Name Gunn, Willie A	<b>SCHEDULE D</b>	Page Number 10 of 11
---	-------------------	-------------------------

**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	Non-profit education	President	6/92	Present
	Doe Jones & Smith, Hometown, State	Law firm	Partner	7/85	1/00
1	American Bar Association (ABA)	Professional Non-profit	Chairman, Youth at Risk Commission	08/2007	Present
2	Christian Service Charities	Non-profit	Director	01/2004	Present
3	Way of Life Alumni Group	Non-profit	Director	08/2003	Present
4	The Gunn Law Firm	Law Firm	Owner	08/2008	Present
5	ABA/Natl Inst. of Mil Justice Commission on Military Justice	Professional Non-profit	Commission Member	01/2009	Present
6	Boys and Girls Clubs of Greater Washington	Non-profit	President and CEO	10/2005	3/2008

**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	Legal services
	Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services in connection with university construction
1	Boys and Girls Clubs of Greater Washington-Silver Spring, MD	Service as President and CEO
2	Charles B. Barbee, Stafford, VA (Client of Gunn Law Firm)	Legal Services
3	Richard Christfan, Ellicott City, MD (Client of Gunn Law Firm)	Legal Services
4	The Gunn Law Firm (Sole Proprietor)	Legal Services
5		
6		

Reporting Individual's Name Gunn, Willie A	<b>SCHEDULE D</b>	Page Number 11 of 11
---	-------------------	-------------------------

**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	Non-profit education	President	6/92	Present
	Doe Jones & Smith, Hometown, State	Law firm	Partner	7/85	1/00
1	The Constitution Project	Non-profit	Member, Liberty and Security Comm	12/2008	Present
2	Harvard Legal Aid Bureau	Non-profit education	Member, Alumni Advisory Board	01/2008	Present
3					
4					
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

	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		
2		
3		
4		
5		
6		