

Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Date of Appointment, Candidacy, Election or Nomination (Month, Day, Year)		Reporting Status (Check appropriate box)	Incumbent <input type="checkbox"/>	Calendar Year Covered By Report	New Entrant, Nominee or Candidate <input checked="" type="checkbox"/>	Termination Date (If Applicable) (Month, Day, Year)	Termination Date <input type="checkbox"/>	Rec'd or Date of Filing
Reporting Individual's Name		Last Name		First Name and Middle Initial				Any individual who is required to file this report and does so more than 30 days after the date the reports are 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.
Position for Which Filing		Title of Position		Department or Agency (If Applicable)				
Location of Present Office (or forwarding address)		Address (Number, Street, City, State and ZIP Code)			Telephone No. (Include Area Code)			Reporting Periods Incumbents: The reporting period is the preceding calendar year except Part II or Schedule C and Part I or Schedule D where you must also include the filing year up to the date you file. Part III or Schedule D is not applicable.
Position(s) Held with the Federal Government During the Preceding 2 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		Do You Intend to Create a Qualified Diversified Trust?				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 or Schedule D is not applicable.
Certification		Signature of Reporting Individual			Date (Month, Day, Year)			
Other Review (if desired by agency)		Signature of Other Reviewer			Date (Month, Day, Year)			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.
Agency Ethics Official's Opinion		Signature of Designated Agency Ethics Official/Reviewing Official			Date (Month, Day, Year)			
Office of Government Ethics Use Only		Signature			Date (Month, Day, Year)			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.
Comments of Reviewing Officials (if additional spaces required, use the reverse side of this sheet)								
(Check box if filing extension granted & indicate number of days _____) <input type="checkbox"/>								AGENCY USE ONLY OGE USE ONLY MAR 16 2009
(Check box if comments are continued on the reverse side) <input type="checkbox"/>								

Reporting Individual's Name Richard G. Kerlikowski	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 \$200)" is checked, no other entry is needed in Block C for that item. BLOCK C																									
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 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). 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	\$1,000,000 - \$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.)			
	Dividends	Rent and Royalties	Interest	Capital Gains	None (or less than \$200)	\$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																			
Examples: Central Airlines Common																																		
Doe Jones & Smith, Hometown, State			x																														Law Partnership Income \$130,000	
Kempstone Equity Fund					x																													
IRA: Heartland 500 Index Fund							x																											
1 City of Seattle F Chief of Police																																	\$216,515.00	
2 Seattle University F Adjunct Professor																																\$3,700.00		
3 Rosenkrantz Foundation F Guest Debater																															\$1,000.00	Oct. 28, 2008		
4 Maryland Police Chiefs' Association F Guest Speaker																															\$1,500.00	Sept. 10, 2008		
5 Washington State Dept. of Retirement Systems: LEOFF Plan 2 Defined Benefit Plan, value not readily ascertainable F																															\$2,500.00 per month upon retirement			
6 City of St. Petersburg (FL) F Defined Benefit Plan Value not ascertainable																															\$10,095.00	Pension Income		

* 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.

Prior Editions Cannot be Used.

Reporting Individual's Name
 Richard G.Kerlikowske

SCHEDULE A continued
 (Use only if needed)

Assets and Income BLOCK A		Valuation of Assets at close of reporting period BLOCK B										Income: type and amount. If "None (or less than \$200)" is checked, no other entry is needed in Block C for this item. BLOCK C																					
		None (or less than \$1,000)	\$1,000 - \$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 \$200)	\$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	Circle Solutions, Inc. 401K(American Funds																																
S	INVESCO Stable Value (Collective Trust																																
2	Fund Option-Cash Equivalent																																
S	EuroPacific Growth Fund(R3)		X																														
	Growth Fund of America (R3)				X																												
3	Amerc. Funds New World Fund(R3)		X																														
S	Columbia Mid Cap Index Fund Z					X																											
	Columbia Small Cap Value I Fund Z		X																														
4	Amer. Funds Capital World Gr&Inc R3		X																														
S	Amer. Funds Fundamental Inv R3		X																														
	Amer. Funds Washington Mutual Fund R3		X																														
5	Amer. Funds Capital Income Builder R3		X																														
S	Amer. Funds Bond Fund R3		X																														
	Amer. Funds High Income Trust R3		X																														
6	Circle Solutions, Inc. Stock Ownership					X																											
S	Circle is an Employee-Owned Firm																																
7	Bank of America Checking Account		X																														
J	Bank of America CD																X							X									
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.

Reporting Individual's Name
 Richard G. Kerlikowske

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.																	
											Type										Other Income (Specify Type & Actual Amount)	Date (Mo, Day, Yr) Only if Honoraria						
											Dividends	Rents and Royalties	Interest	Capital Gains	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	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$49,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000	\$1,000,001 - \$5,000,000	Over \$5,000,000		
1 S Circle Solutions, Inc. McLean, Virginia Salary																												
2 F City of Seattle Deferred Comp. Prudential. Pimco Total Rtn Instl Fd Dodge & Cox Stock Fund		X											X															
3 F American Funds Growth Fd Amer R4 Managers AMG Sm/Mic Cp Gr A Hotchkins & Wiley Sml-Cap Val 1		X											X															
4 F American Funds EuroPac Gr R4 Stable Value Fund-a bank collective fund trustee by Wells Fargo Bank		X											X															
5 F IRA (managed by D.A. Davidson & Co.) Fundamental Investors Inc Cl A (ANCFX) Growth Fund of America CL A (AGTHX)													X															
6 J Investment Portfolio D.A. Davidson Cash in Investment Account Bank of America		X																X										
7 J Boeing Corning, Inc. Costco Wholesale Corp		X																X										
8 J Expeditors Intl Wash Inc. General Electric Johnson and ohnson		X																X										
9 J Microsoft Corp Nyse Euronet Starbucks Corp		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

Richard G. Kerlikowske

SCHEDULE A continued

(Use only if needed)

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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*	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	Texas Instruments Corp		X													X															
	3M Company		X													X															
J	Weyerhaeuser		X													X															
2																															
J	GMAC Bank of New York: Certificates of Deposit			X														X													
3																															
F	Hebrew University of Jerusalem																											\$300.00 Consulting Fee	Jan. 1, 2008		
4																															
5																															
6																															
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.

Richard G. Kerlikowske

SCHEDULE A continued
 (Use only if needed)

Assets and Income BLOCK A		Valuation of Assets at close of reporting period BLOCK B								Income: type and amount. If "None (or less than \$200)" is checked, no other entry is needed in Block C for that item. BLOCK C																							
		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	Over \$500,000*	\$1,000,001 - \$3,000,000	\$3,000,001 - \$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 \$200)	\$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	<input type="checkbox"/> None																																
2																																	
3																																	
4																																	
5																																	
6																																	
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, Vice Presidential or Presidential Candidate

Reporting Individual's Name Richard G. Kerlikowski	SCHEDULE B	Page Number 7
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Part I: Transactions None

1	2	3	4	5	Identification of Assets	Transaction Type (x)	Date (Mo., Day, Yr.)	Amount of Transaction (x)													
								\$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		2/1/99														

* 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

<p>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. § 4114, 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</p>	<p>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.</p>
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1	2	3	4	5	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

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

Reporting Individual's Name

Richard G. Kerlikowske

SCHEDULE B continued
 (Use only if needed)

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Part I: Transactions

	Identification of Assets	Transaction Type (x)			Date (Mo., Day, Yr.)	Amount of Transaction (\$)												
		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													
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 Richard G. Kerlikowske	SCHEDULE C	Page Number 9
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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. None

Creditor (Name and Address)	Type of Liability	Date Incurred	Interest Rate	Term if applicable	Category of Amount or Value (%)																		
					\$10,001	\$15,001	\$25,001	\$50,001	\$100,001	\$250,001	\$500,001	\$1,000,000	Over	\$1,000,001	\$5,000,000	\$25,000,000	\$25,000,001	\$50,000,000	Over				
Examples: First District Bank, Washington, DC John Jones, 123 Main St., Washington, DC	Mortgage on rental property, Delaware	1991	8%	25 yrs.				X															
	Promissory note	1999	10%	on demand																			
1																							
2																							
3																							
4																							
5																							

* 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.

Part II: Agreements or Arrangements

Report your agreements or arrangements for: (1) continuing participation in an employee benefit plan (e.g., 401k, deferred compensations); (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 City of Seattle Deferred Compensation. I will continue to participate in my deferred compensation plan. F Neither I nor the City will continue to contribute to the plan.	Filer and City of Seattle	3/07
2 Washington State Dept. of Retirement Systems-LEOFF Plan 2. This is a defined benefit. Plan. I and the City of Seattle contribute to the Plan. I cannot chose the investment options. Upon retirement I will receive a monthly benefit of \$ 2,500.	Filer and State of Washington	9/00
3 F City of St. Petersburg (FL) Defined Benefit Plan. I receive \$841.25 monthly beginning at age 55.	Filer and City of St. Petersburg Feb. 1972	
4		
5		
6		

Reporting Individual's Name Richard G. Kerlikowske	SCHEDULE D	Page Number 10
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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:	Natl. Assn. of Rock Collectors, NY, NY	Non-profit educational	President	6/92	Present
	Doe Jones & Smith, Hometown, State	Law firm	Partner	7/85	1/00
1	Northwest HIDTA, Seattle, WA Seattle Police Department, Seattle, WA	Public Agency Public Agency	Board Member Chief of Police	Jan. 2006 Aug. 2000	present present
2	Fight Crime, Invest in Kids, Washington DC Major Cities' Chiefs Association, Washington DC	Private Non-Profit Advocacy Private Non-Profit, Prof. Association	Chairman, National Board President	Feb. 98 April 08	present present
3	Salvation Army, Seattle, WA	Non-Profit Charitable	Advisory Board Member	Jan. 02	present
4	United Way of King County, Seattle, WA Seattle University, Seattle, WA	Non-Profit Charitable Institution of Higher Education	Seattle Advisory Board Member Adjunct Professor	March 03 Jan. 02	12/2008 present
5	Hebrew University of Jerusalem, Jerusalem, Israel	Institution of Higher Education	Consultant Reviewer of Academic Report	Jan. 2008	1/2008
6	CSR, Inc, Arlington, VA	DOJ Contractor	Consultant Reviewer	1983	present

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	City of Seattle	Salary as Chief of Police for the City of Seattle
2		
3		
4		
5		
6		