Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

OMB No. 3209-0001

5 C.F.R Part 2634 U.S. Office of Government Ethics	Executive Branch Personnel PUBLI	IC FINANCIAI	L DISCLOSURE REPORT	OMB No. 3209-00
Date of Appointment, Candidacy, Election- or Nomination (Month; Day, Year)	Reporting Status (Check Incumbent Covered by Report appropriate boxes)	New Entrant, Nominee.	Termination Date (If Applicable) (Month, Day, Year) Filer	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
Reporting Individual's Name	East Name Rivkin	First Name and Middle Robert S.		required to be filed, or, if an extension is granted, more than 30 days after the last day of the filing extension period
Position for Which Filing	Title of Position General Counsel	U.S. Department of	f Transportation	shall be subject to a \$200 fee. Reporting Periods
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	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
Position(s) Held with the Federal Government During the Preceding 12 Months (If Not Same as Above)	Title of Position(s) and Date(s) Hold			include the filing year up to the date you file. Part II of Schedule D is not applicable.
Presidential Nominees Subject to Senate Confirmation	Name of Congressional Committee Considering Nomination Commerce, Science & Transportation	Do You Intend to Create	c 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 of Schedule D is not applicable.
Certification 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 Reporting Individual	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	March 27, 2009	Nominess, New Entrants and Candidates for President and Vice President;
Other Review (If desired by agency)	Signature of Other Reviewer Work Repro-Ten C	Junt De	Date (Month: Day, Year) 2 4-14-09	Schedule AThe 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.
Agency Ethles 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). Office of Government Ethics	Signature of Designated Agency Ethics Official/Reviewing Official Signature Signature	al V	Date (Month, Day, Year) Date (Month, Day, Year)	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.
Use Only	Titional space is required, use the reverse side of this sheet)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4/20/09	Schedule C. Part II (Agreements or Arrangements). Show any agreements or arrangements as of the date of filing.
	(Check box if f	filing extension granted &		Schedule DThe reporting period is the preceding two calendar years and the current calendar year up to the date of filing. Agency Use Only OGE Use Only
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U.S. Office of Government Ethics Reporting Individual's Name Page Number SCHEDULE A continued 4 Rivkin, Robert (Use only if needed) Assets and Income Valuation of Assets Income: type and amount. If "None (or less than \$201)" is checked, no at close of other entry is needed in Block C for that item. reporting period BLOCKB BLOCK A BLOCK C Amount Type Other Date Excepted Investment Fund (Mo., Day, \$25,000,001 - \$50,000,000 Income \$5,000,001 - \$25,000,000 \$1,000,001 - \$5,000,000 \$1,000,001 - \$5,000,000 Yr.) (Specify \$500,001 - \$1,000,000 \$100,001 - \$1,000,000 Type & \$100,001 - \$250,000 \$250,001 - \$500,000 Rent and Royalties \$50,001 - \$100,000 Over \$1,000,000 * Only if \$50,001 - \$100,000 Actual \$15,001 - \$50,000 Over \$50,000,000 None (or less than \$15,001-\$50,000 Over \$1,000,000* Qualified Trust \$1,001 - \$15,000 Excepted Trust Over \$5,000,000 \$5,001 - \$15,000 Amount) Honoraria \$2,501 - \$5,000 Capital Gains \$1,001 - \$2,500 \$201-\$1,000 Interest None AMERICAN CAPITAL WORLD X (mutual fund) (CWGIX) X JP MORGAN INTL (mutual fund) Х **JFEAX** X VAN KAMPEN EQUITY (mutual fund) Χ 4 PUERTO RICO COMWLTH PUBLIC IMPROVEMENT BOND Municipal Bond, G.O. Ensured ONEOK PARTNERS LP ABB LTD SPON ADR Х ALLERGAN INC хI ALTERA CORP COM Х AMDOCS LIMITED Х This estegory 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.

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5 C.F.R Part 2634 U.S. Office of Government Ethics Reporting Individual's Name Page Number SCHEDULE A continued 5 Rivkin, Robert (Use only if needed) Assets and Income Valuation of Assets Income: type and amount. If "None (or less than \$201)" is checked, no at close of other entry is needed in Block C for that item. reporting period BLOCK A BLOCK B BLOCK C Type Amount Офсг Date Excepted Investment Fund \$25,000,001 - \$50,000,000 Income (Mo., Dav. \$5,000,001 - \$25,000,000 \$1,000,001 - \$ 5,000,000 \$1,000,001 - \$5,000,000 Yr.(Specify \$500,001 - \$1,000,000 \$100,001 - \$1,000,000 Type & \$100,001 - \$250,000 \$250,001 - \$500,000 Rent and Royalties \$50,001 - \$100,000 Over \$1,000,000 * None (or less than \$50,001 - \$100,000 Actual Only if Over \$50,000,000 \$15,001 - \$50,000 Over \$1,000,000* \$1,001 - \$15,000 Qualified Trust Excepted Trust \$5,001 - \$15,000 Over \$5,000,000 Honoraria Amount) \$2,501 - \$5,000 \$201-\$1,000 \$1,001 - \$2,500 Capital Gains Dividends Interest None AMERICA MOVIL SAB DE VO Х APACHE CORP X AVON PROD INC Х BROADCOM CORP CALIF CL A Х CHESAPEAKE ENERGY OKLA Х CVS CAREMARK CORP Х DANAHER CORP DEL COM Х X DEVON ENERGY CORP NEW Х

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* 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.

5 C.F.R Part 2634 U.S. Office of Government Ethics Reporting Individual's Name Page Number SCHEDULE A continued 10 Rivkin, Robert (Use only if needed) Valuation of Assets Income: type and amount. If "None (or less than \$201)" is checked, no Assets and Income at close of other entry is needed in Block C for that item. reporting period BLOCK B BLOCK A BLOCK C Amount Type Other. Date Excepted Investment Fund Income (Mo., Day. \$25,000,001 - \$50,000,000 \$5,000,001 - \$25,000,000 \$1,000,001 - \$ 5,000,000 None (or less than \$201) (Specify Yr.) \$1,000,001 - \$5,000,000 \$500,001 - \$1,000,000 \$100,001 - \$1,000,001 Туро & \$100,001 - \$250,000 Rent and Royalties \$1,001 - \$15,000 \$15,001 - \$50,000 Actual Only if Over \$1,000,000 * \$50,001 - \$100,000 Over \$50,000,000 \$15,001 - \$50,000 Over \$1,000,000* Over \$5,000,000 Amount) Honoraria **Excepted Trust** \$5,001 - \$15,000 \$2,501 - \$5,000 \$201 - \$1,000 PPL CORPORATION PROCTOR & GAMBLE CO Х SAP AKGSLTT SPONSORD ADR X SCHLUMBERGER LTD SMITH-NEHW PLC SPADR NEW X (SNN) STARWOOD HOTELS & RESORTS Х TIME WARNER INC NEW Χ TORCHMARK CORP COM X UNITED TECHS CORP COM Ticker: UTX 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

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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

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children, mark the other higher categories of value, as appropriate.

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^{*} This category applies only if the assertingome is solely that of the filer's spouse or dependent children. If the assertingome 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.

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U.S. Office of Government Ethics Reporting Individual's Name Page Number SCHEDULE A continued 18 Rivkin, Robert (Use only if needed) Assets and Income Valuation of Assets Income: type and amount. If "None (or less than \$201)" is checked, no at close of other entry is needed in Block C for that item. reporting period BLOCK A BLOCK B BLOCK C Amount Type Other Date Excepted Investment Fund (Mo., Day. Income None (or less than \$1,001) \$25,000,001 - \$50,000,000 \$1,000,001 - \$ 5,000,000 None (or less than \$201) Yr.j (Specify \$1,000,001 - \$5,000,000 \$500,001 - \$1,000,000 \$250,001 - \$250,000 - \$250,000 -\$100,001 - \$1,000,000 Type & Rent and Royalties Over \$1,000,000 * Actual Only if \$50,001 - \$100,058 Over \$50,000,000 Over \$1,000,000* Excepted Trust Qualified Trust Over \$5,000,000 Amount) Honoraria Capital Gains \$201-\$1,000 None UTS SPDR TRUST SERIES 1 Ticker: SPY Х ISRAEL STATE BOND X X STUD LOAN MKTG ASSN ZERO COUPD 5 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 shouse 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

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Rivkin, Robert		SCHEDULE :	В		e giri						(- h	day.	1550	· dikoc	1:	9		
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property, stocks, bonds, con securities when the amount	nmodity futures, and other of the transaction exceeded that resulted in a loss. Do not	your spouse, or dependent child. Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.	Porchase	Sale	Exchange	Date (Mo. Day, Yr.)	\$1,001 -	\$15,001	\$50,001 -	\$250,000	\$250,001	\$500,001	Over \$1,000,000	\$1,000,001 -	\$5,000,001	\$25,000,001 -	Over \$50,000,000	rtificate of
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Reporting Individual's Name Rivkin, Robert		SCHEDU	LE C									Page N	radina,	20		
Part I: Liabilities					S149 6.14			والمرازع المسا	i iya kiya	esilin.	4000	15.	:			
Report liabilities over \$10,000 ower	production of the second secon	personal residence unless it is rented out; loans secured by automobiles, household furniture or appliances; and		No	one X	100			Categ	ory of A	Amount	or Val	હ ૯ (x)			
or dependent children. Check the h during the reporting period. Exclud	ighest amount owed	liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.	Date Incurred	Interest Rate	Tenn if applicable	\$10,001	\$15,001-	\$50,001 -	\$100,001-	\$250,001	51,000,000	Over \$1,000,000*	51,000,0001-	55,000,001 -	\$25,000,001	000 000
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* This category applies only if the le with the spouse or dependent child		er's spouse or dependent children. If the liability is that of the	e filor or a jo	oint liabilit	y of the lile	;										
Part II: Agreements			a Sundan	1,196						; i / i i	- 3 H/C		5.55	19		
Report your agreements or arran employee benefit plan (e.g. 401 payment by a former employer.	ngements for: continuing pk, deferred compensation;	participation in an (2) continuation			4) future e or any of th							ling th	е гер	orting		
	Status and Terms of any	Agreement or Arrangement.	na china anno sera anno anno anno sera	U L IV				.	Partie	SERVE SERVE	12/42	(1402) (1402)	STOR	75250 75250	D	ate
Example: Pursuant to partnership calculated on service of	agreement, will receive lump su	um payment of capital account & partnership share			Do	e Jones	& Smit	b. Hon	netown	State			0765 555			/85
Upon my resignation from A options.	on, I will exercise my veste	ed stock options within 90 days of departure, and I will f	orteit my un	ivested sl	lock A	n Cor	ooratio	n. Ch	ാള	, !L					3/	/04
No further contributions will	be made to my Aon Retire	ment Savings Plan (401K).			Ad	n Com	ooratio	n, Ch	nicago	, n L					2/	/04
3 I will not receive a severance Aon.	e package upon terminatio	on of Aon employment. Also, I will not receive a bonus	for my 2009	employn	nent at											
4																
5			Spensor Exercis							-						
6																
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SF 278 (Rev. 03/2000) 5 C.F.R Part 2634 U.S. Office of Government Ethics Page Number Reporting Individual's Name SCHEDULE D 21 Rivkin, Robert Part I: Positions Held Outside U.S. Government Report any positions held during the applicable reporting period, whether consultant of any corporation, firm, partnership, or other business enterprise or any compensated or not. Positions include but are not limited to those of an officer, non-profit organization or educational institution. Exclude positions with religious. director, trustee, general partner, proprietor, representative, employee, or social, fraternal, or political entities and those solely of an honorary nature. None Organization. (Name and Address) From (Mo., Yr.) Type of Organization Position Held To (Mo., Yr.) Nat'l Assn. of Rock Collectors, NY, NY 6/92 7/85 Non-profit education President Present Examples: Doe Jones & Smith, Hometown, State Law firm Partner 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 Present Director 2007 3 Illinois Chamber of Commerce Present Business Association Director 2005 4 Leadership Greater Chicago Non-profit clvic 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 Do not complete this part Report sources of more than \$5,000 compensation received by you or your corporation, firm, partnership, or other business enterprise, or any other non-profit if you are an incumbent. business affiliation for services provided directly by you during any one year of organization when you directly provided the services generating a fee or payment Termination Filer, or the reporting period. This includes the names of clients and customers of any of more than \$5,000. You need not report the U.S. Government as a source. Vice Presidential or Presidential Candidate None .

AKT SAME	Source (Name and Address)	Brief Description of Duties
Examples;	Doe Jones & Smith, Hometown, State	Legal services Legal services in connection with university construction
1 Aon	Corporation, Chicago, IL	Legal Executive
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3	-	
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