

## Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Date of Appointment, Candidacy, Election or Nomination (Month, Day, Year)	Reporting Status (Check appropriate boxes)	Calendar Year Covered by Report	New Entrant, Nominee, or Candidate <input checked="" 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	First Name and Middle Initial	Termination Filer <input type="checkbox"/>		
Position for Which Filing	Munoz	Cecilia	Director, Intergovernmental Affairs	White House	<b>Reporting Periods</b> <b>Incumbents:</b> 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.
Location of Present Office (or forwarding address)	Address (Number, Street, City, State, and ZIP Code)	Telephone No. (include Area Code)	1600 Pennsylvania Ave. NW	202-456-1414	
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		None		<b>Termination Filers:</b> 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.
Presidential Nominee Subject to Senate Confirmation	Name of Congressional Committee Considering Nomination	Do You Intend to Create a Qualified Diversified Trust?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>Certification</b> 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	Date (Month, Day, Year)	Signature of Other Reviewer Date (Month, Day, Year)		<b>Nominees, New Entrants and Candidates for President and Vice President:</b> <b>Schedule A--</b> The reporting period for income (BLOCK C) is the preceding 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. <b>Schedule B--</b> Not applicable. <b>Schedule C, Part I (Liabilities)--</b> 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. <b>Schedule C, Part II (Agreements or Arrangements)--</b> Show any agreements or arrangements as of the date of filing.
	Other Review (If desired by agency)	Signature of Designated Agency Ethics Official/Reviewing Official	Date (Month, Day, Year)		
	Agency Ethics 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).	Signature	Date (Month, Day, Year)		
Office of Government Ethics Use Only					<b>Schedule D--</b> The reporting period is the preceding two calendar years and the current calendar year up to the date of filing. <b>Agency Use Only</b> <b>OGE Use Only</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"/>					

## SCHEDULE A

Cecilia Munoz

Assets and Income		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.		
BLOCK A		BLOCK B		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 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 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 (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						
		Type	Amount			
		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			
None <input type="checkbox"/>						
Examples						
Central Airlines Common						
Doe Jones & Smith, Hometown, State						
Kempstone Equity Fund						
IRA, Heartland 500 Index Fund						

Self

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	
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**Cecilia Munoz**

(Use only if needed)

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<b>Assets and Income</b>		<b>Valuation of Assets</b> at close of reporting period	<b>Income:</b> type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.				
<b>BLOCK A</b>		<b>BLOCK B</b>		<b>BLOCK C</b>			
					<b>None (or less than \$1,001)</b>	<b>Type</b>	
					<b>\$1,001 - \$15,000</b>		
					<b>\$15,001 - \$50,000</b>		
					<b>\$50,001 - \$100,000</b>		
					<b>\$100,001 - \$250,000</b>		
					<b>\$250,001 - \$500,000</b>		
					<b>\$500,001 - \$1,000,000</b>		
					<b>Over \$1,000,000 *</b>		
					<b>\$1,000,001 - \$ 5,000,000</b>		
					<b>\$5,000,001 - \$25,000,000</b>		
					<b>\$25,000,001 - \$50,000,000</b>		
					<b>Over \$50,000,000</b>		
					<b>Excepted Investment Fund</b>		<b>Amount</b>
					<b>Excepted Trust</b>		
					<b>Qualified Trust</b>		
<b>Dividends</b>							
<b>Rent and Royalties</b>							
<b>Interest</b>							
<b>Capital Gains</b>							
<b>None (or less than \$201)</b>							
<b>\$201 - \$1,000</b>							
<b>\$1,001 - \$2,500</b>							
<b>\$2,501 - \$5,000</b>							
<b>\$5,001 - \$15,000</b>							
<b>\$15,001 - \$50,000</b>							
<b>\$50,001 - \$100,000</b>							
<b>\$100,001 - \$1,000,000</b>							
<b>Over \$1,000,000*</b>							
<b>\$1,000,001 - \$5,000,000</b>							
<b>Over \$5,000,000</b>							
		Other Income (Specify Type & Actual Amount)					
		Date (Mo., Day, Yr.)  Only if Honoraria					

None ☐

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.

## SCHEDULE A continued

(Use only if needed)

Cecilia Munoz

## Assets and Income

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.

## BLOCK A

## BLOCK B

## Type

## BLOCK C

## Amount

Date  
(Mo., Day,  
Yr.)  
Only if  
HonorariaOther  
Income  
(Specify  
Type &  
Actual  
Amount)None ☐

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

Spouse

1 Henry L. Stimson Center

2 Freedom House

3 Unity Resources Group

4 Apartment, London

5 TIAA-CREF

CREF Stock

CREF Growth

CREF Equity Index

CREF Global Equities

CREF Bond Market

TIAA Traditional

CREF Intl Linked Bond

CREF Money Market

CREF Social Choice

7 Diversified Investment Advisors: OSI

Dvfd Aggressive Equity

Dvfd Balanced

Dvfd Special Equity

\* 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.



# SCHEDULE A continued

Cecilia Munoz

(Use only if needed)

## Assets and Income

## 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.

BLOCK A

BLOCK B

Type

Amount

Date  
(Mo., Day, Yr.)  
Only if  
Honoraria

Other  
Income  
(Specify  
Type &  
Amount)

None ☐

8 Management Systems Intl 401K

Opp Global Fnd Class A

Opphmtr Smmdcap Val Fund A

American Balanced Classr5

Wash Mutual Investors R5

NW S&P 500 Indx Sc

T Rowe Pr Eq Inc Fnd R Shs

Pimco Titretn Fnd Cls A

Children's Investments

1 Vanguard 500 Index Fund

2 T Rowe Price Science and Tech

3 Vanguard Wellington Fund

4 Vanguard 500 Index Fund

5 Vanguard US Growth Investor

6 WP Congressional FCU CDs

7 WP Congressional FCU savings

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

\* 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.

SCHEDULE C

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.

Creditors (Name and Address)		Type of Liability	None <input type="checkbox"/> Category of Amount or Value (x)													
Examples:			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
First District Bank, Washington, DC John Jones, 123 J St., Washington, DC		Mortgage on rental property, Delaware Promissory note	1991 1999	8% 10%	25 yrs. on demand			X		X						
1	Wachovia Bank of Delaware	co-signed student loan for Alejandra Davila	2005	6.17%	20 yrs	X										
2	Mortgage Express	mortgage on London Apartment (owed by spouse)	2007	7%	3 years				X							
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: 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

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	Upon resignation (1/19/09) continuing participation in retirement plans: no further contributions	National Council of La Raza	9/88
2	Lincoln Financial Group		
3	AXA Equitable Equi-Vest		
4	Life of Southwest		
5	Lincoln Financial Group		
6			

Reporting Individual's Name  
 Cecilia Munoz

## SCHEDULE D

### 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 Doe Jones & Smith, Hometown, State	Non-profit education Law firm	President Partner	6/92 7/85	Present 1/00
1	National Council of La Raza	Non profit civil rights Charitable Foundation	Senior Vice President Board of Directors	9/88 6/08	1/19/09 1/1/09
2	Atlantic Philanthropies	Charitable Foundation	US Programs Board	3/08	1/1/09
3	Open Society Institute	Non profit community organizing	Chair, Board of Directors	member 6/05 chair 2/08	12/18/08 12/18/08
4	Center for Community Change	non profit arts	Board of Directors	6/06	1/1/09
5	National Philharmonic Chorus and Orchestra	non profit endowment fund	Board of Directors	9/00	1/19/09
6	Strategic Investment Fund of La Raza	non profit civic engagement	Board of Directors	10/07	1/19/09
	Democracia USA				

### 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 Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services Legal services in connection with university construction
1	Atlantic Philanthropies	Board of Directors (payment was made to National Council of La Raza)
2	National Council of La Raza salary	Senior Vice President, Office of Research, Advocacy and Legislation
3		
4		
5		
6		