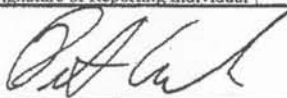


## Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Date of Appointment, Candidacy, Election or Nomination (Month, Day, Year)	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.
TBD							
Reporting Individual's Name	Last Name Appel		First Name and Middle Initial Peter H.				
Position for Which Filing	Title of Position Administrator, Research & Innovative Technology Admin		Department or Agency (If Applicable) U.S. Department of Transportation				
Location of Present Office (or forwarding address)	Address (Number, Street, City, State, and ZIP Code) 1200 New Jersey Ave, SE, Washington, DC 20590				Telephone No. (Include Area Code) 202-366-1000		
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						
Presidential Nominees Subject to Senate Confirmation	Name of Congressional Committee Considering Nomination Senate Ctte on Commerce, Science, & Transp.		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)				
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.			3-20-09				
<b>Other Review</b> (If desired by agency)	Signature of Other Reviewer 4/16/09		Date (Month, Day, Year) 4-17-09				
<b>Agency Ethics Official's Opinion</b> 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 of Designated Agency Ethics Official/Reviewing Official Rosalind A. Keys		Date (Month, Day, Year) 4/17/09				
<b>Office of Government Ethics Use Only</b>	Signature Thyrt L. Lank		Date (Month, Day, Year) 4/20/09				
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>OGE Use Only</b> APR 17 2009							



Reporting Individual's Name  Peter H. Appel	<b>SCHEDULE A continued</b> (Use only if needed)	Page Number  3
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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.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																											
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BLOCK A		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										Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.)  Only if Honoraria																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
																	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																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
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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.



**Prior Editions Cannot be Used.**

Reporting Individual's Name

Peter H. Appel

## SCHEDULE A continued

(Use only if needed)

Page Number

5

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.																						
	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								Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.)  Only if Honoraria				
																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	
1. Mass Mutual Wells/Galliard Fund (AMG 401K -- Spouse)		x											x						x														
2. Mass Mutual PIMCO Fund (AMG 401K -- Spouse)		x											x						x														
3. Citibank Insured Money Market Fund					x														x														
4. ATK Holdings -- A.T. Kearney Chicago, IL (2nd installment of CY2008 bonus)				x															x														
5. ATK Holdings -- A.T. Kearney Chicago, IL Accrued Annual Leave		x																	x														
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.

Prior Editions Cannot be Used.

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

Reporting Individual's Name	<b>SCHEDULE B</b>	Page Number 5a
Peter H. Appel		

**Part I: Transactions**None ☐

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.

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
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			

Reporting Individual's Name Peter H. Appel	<b>SCHEDULE C</b>	Page Number 6
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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 ☐

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 <input type="checkbox"/>		Category of Amount or Value (x)													
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		1991 1999	8% 10%	25 yrs. on demand			x		x									
1	SunTrust Mortgage Baltimore, MD	Mortgage on Rental Property 1 Alexandria, VA		2004	5.6%	30 yrs.				x										
2	SunTrust Mortgage Baltimore, MD	Mortgage on Rental Property 2 Alexandria, VA		2005	6.1%	30 yrs.					x									
3	SunTrust Mortgage Baltimore, MD	Mortgage on Rental Property 3 Alexandria, VA		2005	6.0%	30 yrs.					x									
4	SunTrust Mortgage Baltimore, MD	Mortgage on Rental Property 4 Alexandria, VA		2006	6.8%	30 yrs.					x									
5	CitiMortgage Gaithersburg, MD	Mortgage on Rental Property 5 Alexandria, VA		2006	6.8%	30 yrs.					x									

\* 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

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	Pursuant to shareholders agreement with A.T. Kearney, I will execute sale of all company shares owned upon departure from firm and will receive payment for these shares in three annual installments starting 1 year from the end of the quarter in which I depart	ATK Holdings / A.T. Kearney, Chicago, IL	9/2006
2			
3	A.T. Kearney 401K -- fully vested; will continue to be maintained by external agent, T.Rowe Price, following my departure from A.T. Kearney, Inc.; all assets are listed in schedule A; A.T. Kearney and I will not contribute to the plan after my departure.	A.T. Kearney, Chicago, IL; T. Rowe Price	1997
4			
5	A.T. Kearney Executive Retirement and Deferral Plan -- fully vested; will continue to be maintained by external agent, T.Rowe Price, following my departure from A.T. Kearney, Inc.; all assets are listed in schedule A; A.T. Kearney and I will not contribute to the	A.T. Kearney, Chicago, IL; T. Rowe Price	1997
6	the plan after my departure		



Reporting Individual's Name  Peter H. Appel	<b>SCHEDULE C.</b>	Page Number  7
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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 ☐

Category of Amount or Value (x)

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	Mortgage on rental property, Delaware	1991	8%	25 yrs.			x								
	John Jones, 123 J St., Washington, DC	Promissory note	1999	10%	on demand				x							
1	CitiMortgage Gaithersburg, MD	Mortgage on Rental Property 6 Alexandria, VA	2006	6.8%	30 yrs					x						
2	Boston Investors Group, Inc 2665 SW 37th Ave, Miami, FL 33133	Mortgage on Investment Property 7(Paid off 1/22/09) Woodbridge, VA	2009	5.5%	1 yr.				x							
3	ACS Phoenix, AZ	Student Loan (for Spouse)	2006	4.75%	26 yrs		x									
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

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	A.T. Kearney Supplemental Executive Retirement Plan -- fully vested; will continue to be maintained by external agent, T. Rowe Price, following my departure from A.T. Kearney, Inc.; all assets are listed in schedule A; A.T. Kearney and I will not contribute to the plan after my departure.	A.T. Kearney, Chicago, IL; T. Rowe Price	1997
2			
3	Amtrak 401K -- Former employer does not make any further contributions; asset in plan listed in Schedule A.	Amtrak, Washington, DC	1989
4			
5	A.T. Kearney -- lump sum payment for accrued annual leave. Upon my departure, I will be paid a lump sum payment for any accrued annual leave, in conjunction with firm policy to pay departing employees for accrued annual leave.	A.T. Kearney, Chicago, IL; T. Rowe Price	1997
6	I have accrued 120 hours of annual leave, for which I will be paid \$13,000 in a lump sum payment.		



Reporting Individual's Name  Peter H. Appel	<b>SCHEDULE C</b>	Page Number  8
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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 ☐

Category of Amount or Value (x)

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			by automobiles, household furniture or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.			Date incurred	Interest Rate	Term if appli- cable	\$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
Creditors (Name and Address)			Type of Liability																
Examples:	First District Bank, Washington, DC	Mortgage on rental property, Delaware	1991	8%	25 yrs.						x								
	John Jones, 123 J St., Washington, DC	Promissory note	1999	10%	on demand							x							
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: 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	AT Kearney -- 2008 bonus payment. I will receive the second and final installment of my 2008 bonus payment in the second quarter of CY2009.	A.T. Kearney, Chicago, IL; T. Rowe Price	1997
2			
3			
4			
5			
6			

Reporting Individual's Name  Peter H. Appel	<b>SCHEDULE D</b>	Page Number  9
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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:	Nat'l 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	A.T. Kearney, Inc. 222 W Adams, Chicago, IL 60606	Management Consulting Firm	Principal	4/97	Present
2					
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 Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services Legal services in connection with university construction
1	A.T. Kearney, Inc.	Management consulting services
2	CenterPoint Properties (client of A.T. Kearney), Oak Brook, IL	Management consulting services in connection with investment in intermodal facilities
3	Credit Suisse (client of A.T. Kearney), Chicago, IL	Management consulting services in connection with airport public-private partnership
4	Brookfield Asset Management (client of A.T. Kearney) Toronto, Canada	Management consulting services in connection with acquisition strategy
5	Goldman Sachs (client of A.T. Kearney) New York, NY	Management consulting services in connection with acquisition strategy
6	Morgan Stanley (client of A.T. Kearney) New York, NY	Management consulting services in connection with acquisition strategy

Reporting Individual's Name Peter H. Appel	<b>SCHEDULE D</b>	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:	Nat'l 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					
2					
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 Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services Legal services in connection with university construction
1	Eclipse Aviation, Albuquerque, NM (client of A.T. Kearney)	Management consulting services in connection with business operations
2	Landrum and Brown, Cincinnati, Ohio (client of A.T. Kearney)	Management consulting services in connection with airport operations
3	City of Chicago, Illinois (client of A.T. Kearney)	Management consulting services in connection with airport operations
4		
5		
6		