

Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Form Approved:
OMB No. 3209-0001

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)
Reporting Individual's Name	Last Name DEPASS		First Name and Middle Initial MICHELLE J			
Position for Which Filing	Title of Position Assistant Administrator for International Affairs		Department or Agency (If Applicable) Environmental Protection Agency			
Location of Present Office (or forwarding address)	Address (Number, Street, City, State, and ZIP Code) The Ford Foundation, 320 E. 43rd St., New York, NY 10017			Telephone No. (Include Area Code) 212-573-4641		
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					
Presidential Nominees Subject to Senate Confirmation	Name of Congressional Committee Considering Nomination Committee on Environment and Public Works			Do You Intend to Create a Qualified Diversified Trust? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Certification	Signature of Reporting Individual <i>Michelle Depass</i>			Date (Month, Day, Year) 03/23/09		
Other Review (If desired by agency)	Signature of Other Reviewer <i>[Signature]</i>			Date (Month, Day, Year) 3/24/09		
Agency Ethics Official's Opinion	Signature of Designated Agency Ethics Official/Reviewing Official <i>Patricia Hoffman</i>			Date (Month, Day, Year) 3/24/09		
Office of Government Ethics Use Only	Signature <i>Patricia Hoffman</i>			Date (Month, Day, Year) 3/26/09		
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"/>						
Agency Use Only						
OGE Use Only						
MAR 24 2009						

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 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 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.

SCHEDULE A

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[illegible]

* 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 DEPASS, MICHELLE J		SCHEDULE A continued (Use only if needed)															Page Number 4 of 13																
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*	\$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										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	Other Income (Specify Type & Actual Amount)	
1	SPOUSE: Roth IRA: Cash	X																			X												
2	SPOUSE: The Legal Aid Society, New York, NY																															Spouse Salary	
3	SPOUSE: All remaining Schedule A assets below attributable to Spouse's limited partner...																																
4	...Interest in Paulson Financial Associates Limited Liability Limited Family Partnership...																																
5	...(Port Ludlow, WA), hereinafter designated by "SPOUSE: Paulson Financial Assoc.:"...																																
6	...with the valuation and income for each asset as attributable to spouse as a limited partner.																																
7	SPOUSE: Paulson Financial Assoc.: Broomfield Colorado Sales & Use Tax Revenue Bond	X																			X												
8	SPOUSE: Paulson Financial Assoc.: American States Water Co. Common	X																			X												
9	SPOUSE: Paulson Financial Assoc.: Annaly Capital Management Inc. Common	X																			X												

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Reporting Individual's Name DEPASS, MICHELLE J		SCHEDULE A continued (Use only if needed)															Page Number 5 of 13																	
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																						
		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										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	Other Income (Specify Type & Actual Amount)		
1	SPOUSE: Paulson Financial Assoc.: AT&T Common		X																	X														
2	Ford Foundation Severance Paymt. Receivable				X															X														
3	SPOUSE: Paulson Financial Assoc.: Bristol-Myers Squibb Co. Common		X																	X														
4	SPOUSE: Paulson Financial Assoc.: Duke Energy Corp. Common		X																	X														
5	SPOUSE: Paulson Financial Assoc.: Glaxosmithkline PLC ADR Common		X																	X														
6	SPOUSE: Paulson Financial Assoc.: H.J. Heinz Co. Common		X																	X														
7	SPOUSE: Paulson Financial Assoc.: Kimberly Clark Corp. Common		X																	X														
8	SPOUSE: Paulson Financial Assoc.: Nicor Inc. Common		X																	X														
9	SPOUSE: Paulson Financial Assoc.: Northwest Natural Gas Co. Common		X																	X														

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SCHEDULE A continued
(Use only if needed)

Page Number

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Reporting Individual's Name DEPASS, MICHELLE J		SCHEDULE A continued (Use only if needed)															Page Number 7 of 13																	
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																						
		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										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		Other Income (Specify Type & Actual Amount)	
1	SPOUSE: Paulson Financial Assoc.: XCEL Energy Common		X																		X													
2	(This line intentionally left blank)																																	
3	SPOUSE: Paulson Financial Assoc.: Terra Nitrogen Common		X																		X													
4	SPOUSE: Paulson Financial Assoc.: Amerigas Partners Common		X																		X													
5	SPOUSE: Paulson Financial Assoc.: money market account (Edward Jones)		X																		X													
6	SPOUSE: Paulson Financial Assoc.: Private residential mortgage (Custer County, CO)		X																		X													
7	SPOUSE: Paulson Financial Assoc.: Private residential mortgage (Denver, CO)		X																		X													
8	SPOUSE: Paulson Financial Assoc.: Private residential mortgage (Phoenix, AZ)		X																		X													
9	SPOUSE: Paulson Financial Assoc.: Private commercial mortgage (Corvallis, OR)		X																		X													

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Reporting Individual's Name DEPASS, MICHELLE J		SCHEDULE A continued (Use only if needed)												Page Number 8 of 13																			
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																			
														Type	Amount	Date (Mo., Day, Yr.) Only if Honoraria																	
		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	SPOUSE: Paulson Financial Assoc.: Private residential mortgage (Port Ludlow, WA)		X																	X													
2	(This line intentionally left blank)																																
3	SPOUSE: Paulson Financial Assoc.: Private loan		X																	X													
4	SPOUSE: Paulson Financial Assoc.: Ltd. Partner in McKinley & Assoc. Limited...		X																	X													
5	...Partnership (Ann Arbor, MI): Ohio Office Building Ltd. (Akron, OH) (real estate)		X																	X													
6	SPOUSE: Paulson Financial Assoc.: CMK Ltd. Partnership (Chicago, IL) (real estate)		X																	X													
7	SPOUSE: Paul. Fin. Assoc.: Vacant Lot, Sunrise Cove at Mats Mats Bay (Jefferson County, WA)		X																	X													
8	SPOUSE: Paulson Financial Assoc.: 95oz metals (gold, silver)		X																	X													
9	Mt. Sinai International Fellowship: Review of candidates																													\$1500			

* 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 DEPASS, MICHELLE J	<h2 style="margin: 0;">SCHEDULE B</h2>	Page Number 9 of 13
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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 ☐

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.

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)										Certificate of divestiture	
		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
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 DEPASS, MICHELLE J		SCHEDULE B continued (Use only if needed)					Page Number 10 of 13										
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																	
<p>* 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.</p>																	

Reporting Individual's Name DEPASS, MICHELLE J	<h2 style="margin: 0;">SCHEDULE C</h2>	Page Number 11 of 13
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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 ☐

Creditors (Name and Address)		Type of Liability	Date Incurred	Interest Rate	Term if applicable	Category of Amount or Value (x)									
						\$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	Over \$25,000,000
Examples	First District Bank, Washington, DC	Mortgage on rental property, Delaware	1991	8%	25 yrs.										
	John Jones, 123 J St., Washington, DC	Promissory note	1999	10%	on demand										
1	SLC Student Loan Trust, Sioux Falls, SD	Student Loan	1996	9%	30 yrs			X							
2	The Student Loan People, Louisville, KY	SPOUSE'S Student Loan	2002	3.9%	20 yrs		X								
3	The Student Loan People, Louisville, KY	SPOUSE'S Student Loan	2003	4.5%	20 yrs		X								
4	The Student Loan People, Louisville, KY	SPOUSE'S Student Loan	2004	3.9%	20 yrs		X								
5	The Student Loan People, Louisville, KY	SPOUSE'S Student Loan	2005	1.9%	30 yrs		X								

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Part II: Agreements or Arrangements

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.

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	Agreed to perform review of international fellowship candidates for Mt. Sinai International Fellowship in Feb. 2009...	Mt. Sinai International Fellowship, New York, NY	01/09
2	...(cont.) for an honorarium. Work was completed by February 4, 2009; payment is expected in March 2009.		
3	Ford Foundation Pension Plan: Neither I nor the Ford Foundation will be making additional contributions to this plan...	The Ford Foundation, New York, NY	10/03
4	...(cont.) once my employment at the Ford Foundation is terminated.		
5	Ford Foundation: Severance of up to 6-months salary (\$67,468) under the 2007 Program Division Staff Severance...	The Ford Foundation, New York, NY	1/07
6	...(cont.) Pay Plan		

Reporting Individual's Name DEPASS, MICHELLE J	SCHEDULE C	Page Number 12 of 13
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Part I: Liabilities

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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 ☐

Creditors (Name and Address)		Type of Liability	Date Incurred	Interest Rate	Term if applicable	Category of Amount or Value (x)									
						\$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	Over \$25,000,000
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	The Student Loan People (Louisville, KY)	SPOUSE'S Student Loan	2005	1.9%	30 yrs		X								
2															
3															
4															
5															

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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			
2			
3			
4			
5			
6			

Reporting Individual's Name DEPASS, MICHELLE J	SCHEDULE D	Page Number 13 of 13
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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	Non-profit education	President	6/92	Present
	Doe Jones & Smith, Hometown, State	Law firm	Partner	7/85	1/00
1	The Ford Foundation, New York, NY	Philanthropic Foundation	Program Officer	08/2003	Present
2	Grist.org, Seattle, WA	Non-profit environmental news	Board Member	10/2004	Present
3	Center for Constitutional Rights	Non-profit legal advocacy	Board Member	12/2004	Present
4	Environmental Grantmakers Association	Non-profit environmental professional assoc.	Board Member	12/2004	Present
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	The Ford Foundation, New York, NY	Develop, manage and execute a \$6 million annual grantmaking portfolio
2		
3		
4		
5		
6		