Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Form Approved: OMB No. 3209-000)

U.S. Office of Government Ethics				
Dive of Appointment, Candidacy, Election or Nomination (Month Day, Year)	Reporting Status Calendar Year (Check Incumbent Covered by Report	New Entrept, Nominee. Termination	Tamination Date (If Appli- cable) (Month, Day, Year)	Any individual who is required to
di Arcaminator (interna propi terre)		or Candidate File		file this report and does so more than
	Last Name	Pint Name and Middle Office		30 days after the date the report is required to be filed, or, if an extension
Reporting Individual's Name	Giles	Cynthia J.		is granted, more than 30 days after the
	Tille of Position	Department or Agency (If Applicable)		shall be subject to a \$200 fee.
Position for Which Filing	Assistant Administrator, Office of Enforcement and	Environmental Protection Agency		
	Compliance Assurance Address (Number, Street, City, State, and ZIP Code)	Telephone No. (In.	clude Area Code)	Reporting Periods Incumbents: The reporting period is
Location of Present Office		(401) 351-1102		the preceding calendar year except
(or forwarding address)	55 Dorrance Streel, Providence, RI 02903	(401) 351-110.		Part II of Schedule C and Part I of Schedule D where you must also
Position(s) Held with the Federal	Title of Position(s) and Date(s) Hold			include the filing year up to the date
Government During the Proceding	himm		•	you file. Part II of Schedulo D is not
12 Months (if Not Same as Above)	None			applicable.
				Termination Filers: The reporting
Presidential Numbrees Subject to	Name of Congressional Committee Considering Nomination	Do You Intend to Create a Qualified Diversi	fied Trut?	period begins at the end of the period
Senate Confirmation	Environment and Public Works	Yes X No		covered by your previous filing and ends
				of Schedule D is not applicable.
Certification	Signature of Reporting individual	Ditte (Month, Day,	(ear)	
I CERTIFY that the statements I have made on this form and all attached	Cynthia J. Giles	17	-100	Nominees, New Entrants and Candidates for President and Vice
schedules are true, complete and correct in the best of my knowledge.	INNULAR	11100 1 13	0109	President:
in me best or my knowleake.	CONTRACTOR O	1	10	Schedule A-The reporting period for
	Signature of Other Reviewer	Date (Edanth, Day,	Tear)	income (BLOCK C) is the preceding calendar year and the current calendar
Other Review		. /	1.0	year up to the date of filing. Value
(If desired by agency)	1 Bleen on	3/2	4109	seacts as of any date you choose that is within 31 days of the date of filing.
	Signature of Designated Agency Ethics Official/Reviewing Officia	Description of the second	<u> </u>	
Agency Ethics Official's Opinion On this basis of information contained	Signature of Designated Agency Emits Official/Reviewing Official	Date (Month, Day,	Pear 1	Scheduse B—Not applicable.
in this report, I conclude that the filer is	1 1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1	()		Schedule C, Part I (Liabilities)-
in compliance with applicable laws and regulations (subject to any comments	Vita & Alle	13/2	W1.4G	The reporting period is the preceding calendar year and the current calendar
in the box below).	1 myans 1-17. our	7/0	1101	year up to any date you choose that is
Office of Government Ethics	Signature	Date (bfonth, Day,	Year)	within 31 days of the date of filing.
Use Only	Tell / Canh	3/26	109	Schedule C. Part II (Agreements of
Comments of Regissing Officials World's	ional space is required, use the reverse ride of this sheet)	1 2/20	/ • •	Arrangements) - Show any agreements or arrangements as of the date of
				filing.
	(Check box if fi	ling extension granted & indicate number of a	lays	
				Schedule DThe reporting period is the preceding two calendar years and
				the current calendar year up to the
				date of filing. Agency Use Only
,	*			
	• • •			DGE lise Only
	·	(Check box if comments are continued on	the reverse side)	MAR 2 4 2009
				MAR 2 4 2009

SF278 (Rev. 03/2000) 5 C.F.R Part 2634

U.S. Office of Government Ethics Page Number Reporting Individual's Name **SCHEDULE A** 2 of 8 Cynthia J. Giles Income: type and amount. If "None (or less than \$201)" is checked, no Assets and Income Valuation of Assets other entry is needed in Block C for that item. at close of reporting period BLOCK A BLOCK B BLOCK C Amount For you, your spouse, and dependent children, Type 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-Other Date ing period, or which generated more than \$200 (Mo., Day. Income in income during the reporting period, together \$5,000,001 - \$25,000,000 (Specify with such income. Yr.) Type & Only if For yourself, also report the source and actual Actual amount of earned income exceeding \$200 (other - \$15,000 Amount) Honoraria Over \$5,000,000 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 \$1,001 actual acount of any honoraria over \$200 of your spouse). None Central Airlines Common Examples Doe Jones & Smith, Hometown, State Kempstone Equity Fund IRA: Heartland 500 Index Fund Fidelity Inherited IRA: Vanguard Wellington Fund Fidelity Cash Reserves Salary \$105,630 2 Conservation Law Foundation 3 Massachusetts Deferred Comp. Plan SMART Path 2020 Retirement Fund KLD 400 Social Index Series 4 Fidelity Retirement Savings: Fidelity Mid-Cap Stock Fund Fidelity Balanced Fund IRA Sentinel Intl Equity Fund 6 IRA Green Century Balanced Fund 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.

SF278 (Rev. 03/2000) 5 C.F.R Part 2634 U.S. Office of Government

	oorting Individual's Name nthia J. Giles								S	C	4 .		LE nly		1 1 1		ied										Page Number 3 of 8	3
	Assets and Income BLOCK A					at c	lose	eriod	ts	Fremen		Distal	Face		er en	try is			nount in Bl	ock (C for	that KC	item)1)"	is checked, no	
Many Commence of the control of the	None	The second of the state of the second of the	\$1,001 - \$15,000	850.0	\$50,001 - \$100,000	\$100.001 -5250.000 mm = 100.000	1 133	. Over 31,000,000 *	45	\$255,000,001 \$50,000,000 (c)	Over \$50,000,000	A THE DESCRIPTION OF THE PRINCIPLE OF TH	and the state of t	Dividends	FRENTANII ROYA I DESIGNATION DE LA COMPANION D			The same strangers and the same strains and the same strains and the same strains are same s	\$1,001, \$2,500	SS2501- V51000 H WWW.		\$100,000	21,000,000	Over-\$1,000,000*	\$\$1000000 B-S\$-0000000 B-1-1-1-1	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo. Day. Yr.) Only if Honoraria
1	IRA Green Century Equity Fund		x								-	X					X											
2	IRA Schwab Money Market				X						a no-consideration	X						X						1 1				
3	(J) Bank of America Savings Account				X			- 1-14/12			S CONTRACTOR OF STATE					X	×											
4	(J) Bank of America Checking			X	·						WHO SHOWS					X	×											
5	(J) Schwab Municipal Money Fund			X							i kali kali kali kali kali kali kali kal							×									,	
6	(J) Van Kampen Trust for Insured Municipals Closed end fund		×		27.7%							X						X										•
. 7	(J) Van Kampen Trust for Investment Grade Municipals Closed end fund		х		SERVICE SANS				100000000000000000000000000000000000000		G S S S S S S S S S S S S S S S S S S S	X							Х			National design				·		
8	(S) Roger Williams University School of Law				110000000000000000000000000000000000000															製造部		J(No. 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,					spousal salary	
9	(S) IRA Ariel Appreciation Mutual Fund			X ·			spou					X								X								

Prior Editions Cannot be Used.

SF278 (Rev. 03/2000) 5 C.F.R Part 2634

U.S. Office of Government Ethics Reporting Individual's Name Cynthia J. Giles		SCHEDULE (Use only i			Page Number 4 of 8	
Assets and Income BLOCK A	Valuation of at close reporting p	of period	other entry is ne	nd amount. If "None (or less teded in Block C for that item. BLOCK C	han \$201) ^v is checked, no	
None	None (ontex thin's 100 thin's 1100 to \$1100 to \$15,000. \$15,001 \$50,000. \$100,001 \$100,000. \$250,001 \$500,000.	Over \$1,000,000 * \$1,000,001 \$ 5,000,000 \$5,000,001 \$ \$2,000,000 \$2,25,000,001 \$ \$5,000,000 Over \$50,000,000 Excepted Trust Outlificant is:		S201 65 0000 \$1,001 - \$2,500 \$1,001 - \$1,500 \$5,001 - \$15,000 \$5,001 - \$100,000 \$5,001 - \$100,000	Other Income (Specify Type & Actual Amount)	Date (Mo. Day. Yr) Only if Hongraria
1 (S) IRA Credit Suisse Mid-Cap	X			×		
2 (S) IRA Domini Social Equity Inv				X		
3 (S) IRA Dreyfus Appreciation	X. (1.1)					
4 (S) IRA Loomis Sayles Bond Insti				.x		
5. (S) IRA Pax World Balanced				X III		
6 (S) IRA Schwab Money Market	×					
7 (S) IRA Schwab Deposit Account (Cash Account)				×		
8 (S) IRA US Treas STRIP				×		
9 (S) IRA CREF Growth TIAA-CREF Variable Annuity	×			X III		i i
* This category applies only if the asset/income mark the other higher categories of value, as appr		use or dependent children. If the as	sset/income is eithe	er that of the filer or jointly held by	the filer with the spouse or deper	ndent children

SF278 (Rev. 03/2000) 5 C.F.R Part 2634 U.S. Office of Government Ethics

Reporting Individual's Name Cynthia J. Giles		DULE A continued Use only if needed)	Page Number 5 of 8
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)" other entry is needed in Block C for that item. BLOCK C	" is checked, no
None ☐ 1 (S) IRA CREF Global Equities	S15001 - \$15,000 \$15,001 - \$15,000 \$15,001 - \$15,000 \$25,001 - \$100,000 \$25,001 - \$100,000 \$25,000,001 - \$100,000 \$25,000,001 - \$25,000,000 \$25,000,001 - \$25,000,000 \$25,000,001 - \$25,000,000 \$25,000,001 - \$25,000,000 \$25,000,001 - \$25,000,000 \$25,000,001 - \$25,000,000	Dividends Divi	Other Date. Income (Mo., Day, (Specify Yr.) Type & Actual Only if Amount) Honoraria
TIAA-CREF Variable Annuity 2 (S) IRA CREF Social Choice TIAA-CREF Variable Annuity			
(S) IRA TIAA Real Estate TIAA-CREF Variable Annuity (S) University of Michigan Press		X	\$125 8/7/08 \$125 9/11/08
5 (S) Bloomsbury Press (Value unascertainable)			Honoraria Book Advance
7			
9			
* This category applies only if the asset/income is mark the other higher categories of value, as approp		ren. If the asset/income is either that of the filer or jointly held by the filer wi	th the spouse or dependent children

SF	278	(Rev.	03/2000)	
		0-4	2/24	

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

U.S. Office of Government Ethics Reporting Individual's Name				· · · · · · · · · · · · · · · · · · ·	Programme	N 25 2	,		327	Page Nur	nber		
SCHEDULE	3										60	f 8	
Part I: Transactions					None								
Report any purchase, sale, or exchange by you, your spouse, or dependent children during the reporting period of any rea		ansacti Type (x			1			Amount	of Trans	action (x)		21.2	
property, stocks, bonds, commodify futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Do not certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from QGE.	Purchase		Exchange	Date (Mo., Day, Yr.)	\$15,001	\$15,001 - \$50,000 \$50,001 -	\$100,000	0,000	\$500,001 -	S1,000,000* S1,000,001	\$5,000,000 \$5,000,001. \$25,000,000	\$25,000,001 . \$50,000,000 Över	SSO,000,000 Certificate of livesting
Identification of Assets		Sale	Ex		\$ 515	\$15 \$50	\$10	\$25 \$25 \$50	\$50	\$1,00 \$1,00	\$5.0	\$25	Cert So
Example: Central Airlines Common	X			2/1/99	(0.1 mg)	[## [##]	X	12.70					
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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 a personal friend, agency approval under 5 U.S.C. § 4111 or other statutory authority, etc. For travel-related gifts and reimbursements, include travel iting rank.	the trece inde the cotal for co	ived f pende lonor! value ther e	from ent of s resi e from exclu	nment, giv relatives, r f (heir relat idence. Al n one sour stons.	eceive ionshi so, for ce, ex	d by you by to you burness	r spot or pros s of ag	ise or d ovided gregat	epende as pers	nt child onal ho s to det	I totally spitality a ermine th instruction	ıl -	
Examples: Nat'l Assn. of Rock Collectors, NY, NY Airline ticket, hotel room & meals incident to national conference 6/1												\$50	0
Frank Jones, San Francisco, CA Leather briefcase (personal friend).						1071	4.715		.)- <u>;</u>	·	- 2.22	\$30	0
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						The College Of Ale	 		<u> </u>					1 1	}				
	Liabilities		A PART OF THE PART						<u> </u>						i. D. 11.		<u> </u>	J	
Report lia	ibilities over \$10,000 owed to	any one creditor at	4.	ce unless it is rented out; loans			No	ne x				Catego	ory of	Amount	or Va	ue (x)			
or depend	during the reporting period by lent children. Check the highe e reporting period. Exclude a	st amount owed	liabilities owed to	household furniture or appliance o certain relatives listed in instite for revolving charge accounts.		Date	Interest	Term if			Ī.	1.) , g	ė	- 00		525,000,0001 -	7
						Incurred	Rate	appli-	\$10,001	\$15,001	\$50,001.	\$100,001	\$250,001	\$500,001	_ 00	88	\$5,000,001	000	
	Creditors (Name and	Address)		Type of Liability			Arg.	Cable	\$10,001	\$15,	\$50,	\$100	\$250	\$1.0	0 6 2 6	\$1.0	\$5,0	\$25	
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Examples	John Jones, 123 J St., Washing	ton, DC	Promissory note		1,1/1	1999	10%	on demand					×	86.14	10,200				
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	spouse or dependent children,				. Is that of t	ne mer or a	a joint nat	offity of the	mei										
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Report y employe	I: Agreements or a our agreements or arrangement e benefit plan (e.g. 401k, de by a former employer (incl.	ents for: continuing ferred compensation	g participation in an on; (2) continuation					l) future en								ie rep	porting	3 .	9
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			any Agreement or Arrang			Trades Cas.	••••		· · · · · · · · · · · · · · · · · · ·	: .		Partie		Patrick)				Da	_
		ment will receive lumr	p sum payment of capital	account & partnership share			*	Doe	Jones	& Smit	h, Hon	netown	, State			:: ·		7/	3:
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1 I will but n	retain the Fidelity Retirement either I nor CLF will make c	ned through 1/00. It Savings Account ontributions to that	I had while working account once I stop					Bos	ton,	MA				ensati	F			2/	

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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 8 of 8 Cynthia J. Giles 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) Type of Organization Position Held From (Mo., Yr.) To (Mo., Yr.) Nat'l Assn. of Rock Collectors, NY, NY President . 6/92 Non-profit education . Present Examples: Partner Doe Jones & Smith, Hometown, State Law firm 7/85 17/00 Conservation Law Foundation, Boston, MA Non-profit environmental advocacy Vice President & 05/05 present Director, RI Advocacy Center 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 if you are an incumbent, corporation, firm, partnership, or other business enterprise, or any other non-profit 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

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F. 31	Source (Name and Address).			7	Brief Description of	Duties	
	Doe Jones & Smith, Hometown, State		11/2	Legal services			
Exa	Metro University (client of Doe Jones & Sr	nith), Moneytown, State		Legal services Legal services in connection with universely	ersity construction		
1	Conservation Law Foundation			Environmental Advocacy Issues			
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