

**Supersedes Prior Editions, Which Cannot Be Used.**

## SCHEDULE A

[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.

**SCHEDULE A continued**

(Use only if needed)

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None ☐

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**Prior Editions Cannot be Used.**



Reporting Individual's Name

Perez, Thomas E.

# SCHEDULE A continued

(Use only if needed)

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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										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	Type	Amount	Other Income (Specify Type & Actual Amount)
																	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	Aim Real Estate Fund		x											x			x												
2	Accessor Growth Allocation C Class		x											x			x												
3	Oppenheimer Quest Balanced Fund Class B		x											x			x												
4	TIAA Traditional Annuity			x													x												
5	CREF Variable Annuity: Stock Fund		x											x			x												
6	CREF Variable Annuity: Money Market Fund		x											x			x												
7	CREF Variable Annuity: Social Choice		x											x			x												
8	CREF Variable Annuity: Global Equities		x											x			x												
9	TIAA Traditional Annuity			x													x												

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Prior Editions Cannot be Used.



Reporting Individual's Name

Perez, Thomas E.

# SCHEDULE A continued

(Use only if needed)

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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										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	Type					Amount					Other Income (Specify Type & Actual 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
1	TIAA Variable Annuity: Real Estate			x									x								x																
2	CREF Variable Annuity: Stock Fund			x									x								x																
3	CREF Variable Annuity: Bond Market			x									x								x																
4	College Savings Plan of Maryland DC T. Rowe Price Portfolio 2015			x									x								x																
5	College Savings Plan of Maryland DC T. Rowe Price Portfolio 2015			x									x								x																
6	College Savings Plan of Maryland DC T. Rowe Price Portfolio 2021			x									x								x																
7	Kaiser Commission on Medicaid and the Uninsured																																Honoraria \$2000	03/08 06/08			
8	M & T Bank (savings)		x																		x																
9	Maryland Dept of Labor, Licensing and Regulation Baltimore, MD																																Salary \$139,004				

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Perez, Thomas E.

# **SCHEDULE A continued**

(Use only if needed)

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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										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 *	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
1	Europacific Growth Fund A		x								x						x													
2	T. Rowe Price 2025 Retirement Fund		X								x						x													
3	George Washington School of Public Health																											Salary		
4	Community Catalysts, Inc. Boston, MA																											\$12,375 Honorarium	03/08	
5	S Hartford Capital Appreciation Fd A		x								x						x													
6	Washington Legal Clinic for the Homeless Washington, DC																											Spouse salary		
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.

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

Reporting Individual's Name

Perez, Thomas E.

**SCHEDULE B**

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**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.

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.		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
Identification of Assets																			
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

Perez, Thomas E.

## SCHEDULE C

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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)

			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
Creditors (Name and Address)			Type of Liability													
Examples:	First District Bank, Washington, DC John Jones, 123 J St., Washington, DC		Mortgage on rental property, Delaware Promissory note													
1								x		x						
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	Continued participation in the University System Maryland TIAA CREF 401k plan No further contributions will be made to the plan.	University of Maryland	01/01
2	Continued participation in the State of Maryland Defined Compensation Retirement Plan No further contributions will be made to the plan.	State of Maryland	01/07
3			
4			
5			
6			

Reporting Individual's Name  Perez, Thomas E.	<b>SCHEDULE D</b>	Page Number  09 of 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	Non-profit education	President	6/92	Present
	Doe Jones & Smith, Hometown, State	Law firm	Partner	7/85	1/00
1	Maryland Department of Labor, Licensing & Regulation Baltimore, MD	State Government	State Cabinet Secretary	01/07	present
2	George Washington School of Public Health Washington, DC	Non-profit education	Part-time professor	08/07	present
3	Center for American Progress Action Fund Washington, DC	Think and action tank	Board Member	07/04	present
4	Action Aid USA Washington, DC	Non-profit NGO	Board Member	06/07	present
5	Kaiser Commission on Medicaid and the Uninsured Washington, DC	Non-profit	Commissioner	03/02	present
6	University of Maryland School of Law Baltimore, MD	Non-profit education	Assistant professor	04/01	06/07

**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	Maryland Department of Labor, Licensing & Regulation Baltimore, MD	State Cabinet Secretary
2	George Washington School of Public Health Washington, DC	Part-time professor
3	University of Maryland School of Law Baltimore, MD	Assistant professor
4	The California Endowment Woodland Hills, CA	Consultant
5		
6		

Reporting Individual's Name  Perez, Thomas E.	<b>SCHEDULE D</b>	Page Number  10 of 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	Non-profit education	President	6/92	Present
	Doe Jones & Smith, Hometown, State	Law firm	Partner	7/85	1/00
1	The California Endowment Woodland Hills, CA	State Health Foundation	Consultant	01/01	01/07
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.

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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		
2		
3		
4		
5		
6		