Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Form Approved: OMB No. 3209 - 0001

SF 278 (Rev. 03/2000) 5 C.F.R. Part 2634 U.S. Office of Government Ethics Date of Appointment, Candidacy, Election Termination Termination Date (If Appli-Calendar Year Reporting Incumbent New Entrant, Fee for Late Filing or Nomination (Month, Day, Year) Nominee, or X Covered by Report cable) (Month, Day, Year) Status Filer Any individual who is required to file (Check Appropriate Candidate this report and does so more than 30 days Boxes) after the date the report is required to be Last Name First Name and Middle Initial filed, or, if an extension is granted, more Reporting than 30 days after the last day of the Individual's Name Kerr T. (Thomas) Michael filing extension period, shall be subject to a \$200 fee. Title of Position Department or Agency (If Applicable) Position for Which Assistant Secretary for Administration and Management US Department of Labor Reporting Periods Filing Incumbents: The reporting period is the preceding calendar year except Part Address (Number, Street, City, State, and ZIP Code) Telephone No. (Include Area Code) Location of II of Schedule C and Part I of Schedule D Present Office where you must also include the filing c/o SEIU, 1800 Massachusetts Ave. NW. Washington, DC 20036 202-730-7339 (or forwarding address) year up to the date you file. Part II of Schedule D is not applicable. Title of Position(s) and Date(s) Held Position(s) Held with the Federal Government During the Preceding Termination Filers: The reporting 12 Months (If Not Same as Above) period begins at the end of the period covered by your previous filing and ends at the date of termination. Part II of Name of Congressional Committee Considering Nomination | Do You Intend to Create a Qualified Diversified Trust? Schedule D is not applicable. Presidential Nominees Subject to Senate Confirmation X No Committee on Health, Education, Labor and Pensions Yes Nominees. New Entrants and Candidates for President and Vice President: Certification Signature of Reporting Individual Date (Month, Day, Year) I CERTIFY that the statements I have Schedule A-The reporting period made on this form and all attached for income (BLOCK C) is the preceding schedules are true, complete and correct calendar year and the current calendar to the best of my knowledge. year up to the date of filing. Value assets as of any date you choose that is within Signature of Other Reviewer, Date (Month, Day, Year) Other Review 31 days of the date of filing. (If desired by agency) Schedule B-Not applicable. Schedule C, Part I (Liabilities)-The Agency Ethics Official's Opinion Signature of Designated Agency Ethics Official/Reviewing Official Date (Month, Day, Year) reporting period is the preceding calendar year and the current calendar year up to On the basis of information contained in this any date you choose that is within 31 days report, I conclude that the filer is in compliance 3/31/09 of the date of filing. with applicable laws and regulations (subject to any comments in the box below). Schedule C, Part II (Agreements or Date (Month, Day, Year) Signature Office of Government Ethics Arrangements)-Show any agreements or arrangements as of the date of filing. Use Only Schedule D-The reporting period is the preceding two calendar years and Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheet) the current calendar year up to the date of filing. (Check box if filing extension granted & indicate number of days -Agency Use Only OGE Use Only

(Check box if comments are continued on the reverse side)

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9 .		g Individual's Name homas) Michael				147							S	CF	IE	D	UI	LE	A													Pa	age Number 2 of	8	
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va in in w	roductional recommendation in comments in	our spouse, and dependent children ch asset held for investment or the n of income which had a fair market leading \$1,000 at the close of the report, or which generated more than \$200 during the reporting period, together income.	ian \$1,001)	4	\$50,000	\$100,000	20,000	\$500,000	000,000	*00	5,000,000	\$25,000,000	\$50,000,000	000	tment Fund				Ty	pe		han \$201)		0	0	00		0	000,000		000,000	00	Other Income (Specify Type &	Date (Mo., D Yr.)	ay,
in ac yo	port the	rearned income exceeding \$200 (other the U.S. Government). For your spouse a source but not the amount of earned more than \$1,000 (except report the iount of any honoraria over \$200 of ise).	1	\$1,001 - \$15,000		\$50,001 - \$100	\$100,001 - \$250,000	\$250,001 - \$50	\$500,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$	\$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-\$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*	\$-100,000,15	Over \$5,000,000	Actual Amount)	Only i Honora	
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1 S	\$	REF; TIAA Traditional Annuity						×												×						×	- New York Carlotte								
2		E Employees' Pension Plan (defined (value not readily ascertainable)																															eligible for \$1,148 per month at age 65		
3		nd Teachers & State Employees mental Retirement Plans ("MSRP"):							2000									. :																	
4	M	SRP 457(b) (Investment Contract Pool)		×					feet on green to				2000		×								×								1				
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	* This o	category applies only if the asset/income e filer with the spouse or dependent ch	e is so	olely n, m	tha ark	t of	the othe	filer r hi	's sp gher	cate	e or egor	dep	end of va	lent llue,	chil as a	drer	n. If	the	ass	et/i	ncon	ne i	eiti	her	that	of th	he f	iler	or jo	ointl	ly he	eld			

Reporting Individual's Name Kerr, T. (Thomas) Michael	SCHEDULE A continued (Use only if needed)													aleston and a final state of the state of th		ge Number 3 of	8																
Assets and Income	Valuation of Assets at close of reporting period BLOCK B BLOCK C Type Amount													or l	ess k C	than \$20 for that)1)" is item.																
		\$1,001)	-)		. 00	000	00000		pun				Ту	pe		01)					A	m c		nt 	00		Other	Date
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Pension Plan for Employees of SEIU (define benefit) (value not readily ascertainable)	ed																															eligible for \$1,742/mo at age 65	
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	Reporting Individual's Name err, T. (Thomas) Michael	SCHEDULE A continued (Use only if needed) Valuation of Assets Income: type and amount. If "None (or														Pag	ge Number 4 of	8 .															
	Assets and Income		a	V it cl	alu	uat e of	ior	oor	f As	sse g pe	ts erio	d					Ir	nec	kec	e: t	ype o o	e ar	nd a	ntr	y is	ne	f "l	Noned i	ne (or l	ess k C	than \$20 for that	1)" is tem.
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		None (or less than \$1:001)	1-\$15,000			-	\$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		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	000005\$	\$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
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	* This category applies only if the asset/income by the filer with the spouse or dependent chi	is s	olely	tha ark	at of the	the	file:	r's sy	oous	e or	dep	encof v	lent alue,	chil as a	dren	. If	the ate.	asse	et/ir	ncon	ne is	eith	ner t	hat	of t	he fi	iler (or jo	ointl	y he	ld		

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

Reporting Individual's Name Kerr, T. (Thomas) Michael SCHEDULE B Page Number 5 of 8																
Part I: Transactions																
Part I: Transactions Report any purchase, sale, or exchange by you, your spouse, or dependent	Do not report a transaction involving property used solely as your personal	None														
children during the reporting period of	any residence, or a transaction solely between	Tra	nsact	tion					Amoun	t of T	ransa	ction	(x)			
real property, stocks, bonds, commodit futures, and other securities when the amount of the transaction exceeded \$1 Include transactions that resulted in a l	Check the "Certificate of divestiture" block to indicate sales made pursuant to a	Purchase		Exchange	Date (Mo., Day, Yr.)	\$1,001	5,001 -	00,000	\$250,000	\$500,001 -	Over \$1,000,000*	.000,000,	\$25,000,001	\$25,000,001 -	\$50,000,000	Certificate of divestiture
Identi	ification of Assets		Sale	್ಷಹ		2.2	\$1	3 S S	\$22	\$3	85	\$5	\$2	\$2.	86	34
Example Central Airlines Common		- X		201	2/1/99	426		X	902				2014		\$2.00°	
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	the spouse or dependent children, use the other higher cate		f valu	ie, as	appropriate											
For you, your spouse and dependent ch tion, and the value of: (1) gifts (such as food, or entertainment) received from of (2) travel-related cash reimbursements than \$260. For conflicts analysis, it is has as personal friend, agency approval und authority, etc. For travel-related gifts an	tangible items, transportation, lodging, one source totaling more than \$260, and received from one source totaling more the deelpful to indicate a basis for receipt, such total visits and total visits.	S. Gove ed from endent mor's i	n re of t resid	heir i lence one s	given to your served relationship. Also, for cource, excl	by y p to y purp	our s	pouse or pro	e or de vided gregati	as pendeng	ient ersor fts to	child nal h	i tota ospit ermi instr	ally ality ne th	at ne	
Source (Name and Address)	· · · · · · · · · · · · · · · · · · ·	Br	ief D	escrip	tion									Va	lue	
Examples Nat'l Assn. of Rock Collectors, NY, NY	Airline ticket, hotel room & meals incident to nation	al confe	rence	6/15	/99 (personal	activi	ty unr	elated	to duty		-	-		\$5	00.	
Frank Jones, San Francisco, CA	Leather briefcase (personal friend)											-		\$3	00.	
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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 C Kerr, T. (Thomas) Michael 6 of 8 Part I: Liabilities None X a mortgage on your personal residence unless it is rented out; loans secured by Report liabilities over \$10,000 owed Category of Amount or Value (x) to any one creditor at any time automobiles, household furniture during the reporting period by you, or appliances; and liabilities owed to your spouse, or dependent children. certain relatives listed in instructions. Over \$1,000,000* \$1,000,001-\$50,001 -Check the highest amount owed \$250,001 See instructions for revolving charge \$100,001 during the reporting period. Exclude accounts. Date Interest Term if applicable Creditors (Name and Address) Type of Liability Incurred Rate 1991 First District Bank, Washington, DC Mortgage on rental property, Delaware 8% 25 yrs. X. Examples 1999 John Jones, 123 JSt., Washington, DC Promissory note 10% on demand 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: (1) continuing participation in an of absence; and (4) future employment. See instructions regarding the reportemployee benefit plan (e.g. pension, 401k, deferred compensation); (2) continuaing of negotiations for any of these arrangements or benefits. None tion of payment by a former employer (including severance payments); (3) leaves Status and Terms of any Agreement or Arrangement **Parties** Date Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share Doe Jones & Smith, Hometown, State Example 7/85 calculated on service performed through 1/00. I will keep my 401(k) plan at SEIU. Neither SEIU nor myself will make any further contributions to this plan. SEIU, Washington, DC 09/02 SEIU, Washington, DC I will remain in the SEIU defined benefit pension plan. I am currently eligible for \$1,742/mo at age 65... 1/08 I will remain in the AFSCME defined benefit pension plan. I am currently eligible for \$1,148/mo at age 65. AFSCME, Washington, DC 2/84

I will keep my 457(b), 401(k) and 401(a) Maryland Teachers & State Supplemental Retirement Plans ("MSRP").

Neither the State of Maryland nor myself will make any further contributions to these plans.

11/01

MSRP (Nationwide), Columbus, OH

	porting Individual's Name err, T. (Thomas) Michael		SCHEDULE D		Page Number 7 of	8 .
-						
Re sa	art I: Positions Held port any positions held during the ap ted or not. Positions include but are a ustee, general partner, proprietor, rep ay corporation, firm, partnership, or o	pplicable reporting period, whethe not limited to those of an officer, d presentative, employee, or consulta	r compen- organization or educationa lirector, social, fraternal, or politica ant of nature.	l institution. Exclude positions I entities and those solely of an	honorary	one
	. Organization (Name		Type of Organization	Position Held .	From (Mo., Yr.)	
	Nat'l Assn. of Rock Collectors, NY, NY		Non-profit education .	President	6/92	Present
Exa	Doe Jones & Smith, Hometown, State		Law firm	Partner	7/85	1/00
1	SEIU, Washington, DC		labor union	Asst.to the Secretary-Treasurer	09/2002	present ·
2	*SEIU, Pension Plan for Employees, Wash	sington, DC	pension fund	Trustee	06/2004	present
3	*SEIU, Health and Welfare Fund, Washing	iton, DC	heatih and welfare fund	Trustee	11/2006	present
4	*SEIU, 1800 Massachusetts Bidg. Corp., V	Vashington, DC	DC non stock, not for profit corporation	Member, Board of Directors	12/2003	present
5	*SEIU Service Corp., Washington, DC		DC non stock, not for profit corporation	Member, Board of Directors,		
6				Secretary and Treasuer	06/2006	present
Re bi	eport sources of more than \$5,000 cousiness affiliation for services provide reporting period. This includes the orporation, firm, partnership, or other	ompensation received by you or yo ed directly by you during any one names of clients and customers of	year of you directly provided the services generating a fee or	nen Presidential or Presi r payment of more than \$5,000.	tion Filer, or dential Cand You	Vice
	Source (Name an	nd Address)	Bı	rief Description of Duties		
Fv	amples Doe Jones & Smith, Hometown, State		Legal services .			
	Metro University (client of Doe Jones & S	Smith), Moneytown, State	Legal services in connection with university cons	truction		
1	SEIU, Washington, DC		Assistant to the Secretary Treasurer - for Final	nce and Administration		
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4				:		
5						****
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D				Page Number	
Reporting Individual's Name		SCHEDULE D			
Kerr, T. (Thomas) Michael	• • •			8 of	8
Part I: Positions Held Report any positions held during the approach or not. Positions include but are a trustee, general partner, proprietor, rejany corporation, firm, partnership, or compared to the properties of the partnership, or compared to the partnership.	pplicable reporting period, whether not limited to those of an officer, of presentative, employee, or consult	organization or educational social, fraternal, or political nature.	institution. Exclude positions entities and those solely of an	honorary	one 🔲
Organization (Name	and Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo.,Yr.)
Nat'l Assn. of Rock Collectors, NY, NY		Non-profit education	President	6/92	Present
Examples Doe Jones & Smith, Hometown, State		Law firm	Partner	7/85	1/00
1 *Institute for Change foundation, Washinto	n DC	501(c)(3)	Treasurer	08/2006	present
*SEIU, 1313 L Street Building Corp., Wash	lington DC	DC non stock, not for profit corporation	Member, Board of Directors	12/2005	present
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*These positions are uncompensated.					
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Part II: Compensation Report sources of more than \$5,000 co business affiliation for services provide the reporting period. This includes the corporation, firm, partnership, or othe	empensation received by you or you ad directly by you during any one names of clients and customers o	year of you directly provided the f any services generating a fee or	payment of more than \$5,000.	ion Filer, or dential Cand You	Vice
Source (Name an	d Address)	Brie	ef Description of Duties		
Examples Doe Jones & Smith, Hometown, State		Legalservices			***************************************
Metro University (client of Doe Jones & S	mith), Moneytown, State	Legal services in connection with university constr	uction		
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