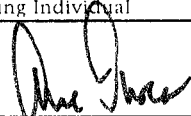

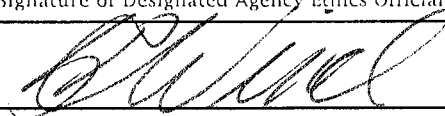


EXECUTIVE BRANCH PERSONNEL PUBLIC FINANCIAL DISCLOSURE REPORT

Date of Appointment, Candidacy, Election, or Nomination (Month, Day, Year)		Reporting Status (Check Appropriate Boxes)	Incumbent <input checked="" type="checkbox"/>	Calendar Year Covered by Report	New Entrant, Nominee, or Candidate <input type="checkbox"/>	Termination Filer <input type="checkbox"/>	Termination Date (If Applicable) (Month, Day, Year)	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.
01/20/2009				2009				
Reporting Individual's Name		Last Name			First Name and Middle Initial			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.
		DUNCAN			Arne			
Position for Which Filing		Title of Position			Department or Agency (If Applicable)			
		Secretary			Education			
Location of Present Office (or forwarding address)		Address (Number, Street, City, State, and ZIP Code)				Telephone No. (Include Area Code)		
		400 Maryland Avenue, SW; Washington, D.C. 20202				202-401-3006		
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			Do You Intend to Create a Qualified Diversified Trust?			
		Not Applicable			<input type="checkbox"/> Yes <input type="checkbox"/> No			
Certification		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.						5/17/10		
Other Review (If desired by agency)		Signature of Other Reviewer				Date (Month, Day, Year)		
						6/9/10		
Agency Ethics Official's Opinion		Signature of Designated Agency Ethics Official/Reviewing Official				Date (Month, Day, Year)		
On the basis of information contained in this report, I conclude that the filer is in compliance with applicable laws and regulations (subject to my comments in the box below).						6/9/10		
Office of Government Ethics Use Only		Signature				Date (Month, Day, Year)		
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								
MAY 17 2010								
OGE Use Only								

SCHEDULE A

Reporting Individual's Name DUNCAN, Arne		SCHEDULE A										Page Number 2 of 1 ^{mca} 7-7-10																					
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.																					
For you, your spouse, and dependent children, 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 reporting period, or which generated more than \$200 in income during the reporting period, together with such income. For yourself, also report the source and actual amount of earned income exceeding \$200 (other 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 actual amount of any honoraria over \$200 of your spouse). None <input type="checkbox"/>		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)
Examples														x																			
Central Airlines Common														x																			
Doe Jones & Smith, Hometown, State														x											Law Partnership Income \$130,000								
Kempstone Equity Fund														x																			
IRA: Heartland 500 Index Fund														x																			
1	TIAA CREF Stock Account Variable Annuity													x																			
2	Bright Start College Savings 529 Plan Index based 0-6 Yrs Portfolio (Smith Barney)													x																			
3	Bright Start College Savings 529 Plan Index based 7-9 Yrs Portfolio (Smith Barney)													x																			
4	AIG Stock Index Fund (Roth IRA) also known as Valic Company Stock Index Fund	x												x																			
5	Chicago Public Schools 457 Deferred Comp. AIG Stock Index Fund													x																			
6	Chicago Public Schools 403(b) Plan AIG Stock Index Fund													x																			

* 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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7-7-10*

Reporting Individual's Name DUNCAN, Arne		SCHEDULE A continued (Use only if needed)											Page Number 3 of 11																									
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	TIAA CREF University of Chicago (S) TIAA Traditional Guar. Annuity		X																X	X																		
2	TIAA CREF University of Chicago (S) CREF Money Market		X												X						X																	
3	TIAA CREF University of Chicago (S) CREF Social Choice		X												X						X																	
4	TIAA CREF University of Chicago (S) CREF Global Equities		X												X						X																	
5	Hyde Park Bank Checking Account (J)				X																X																	
6	Chase Bank Checking (J)			X																	X																	
7	Ariel Fund (IRA)		X												X						X																	
8	Ariel Fund (J)				X										X						X																	
9	Ariel Appreciation Fund (J)					X									X						X																	

* 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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7-7-10

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																					
																	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	Ariel Focus Fund (J)				X										X																											
2	Ariel Fund (IRA) (S)	X													X																											
3	TIAA Traditional Guar. Annuity				X																	X																				
4	Ariel Capital Management, Inc. Chicago, IL (Common Stock)							X																																	S Corp Inc. \$0 (Est.)	
5	Chicago Public Schools																																								Salary \$61,362	
6	Guardian Whole Life Policy				X													X																								
7	Ariel Capital 401(k)/Profit Sharing Longleaf Partners Fund			X											X																											
8	Ariel Capital 401(k)/Profit Sharing Master Select Value Fund	X													X																											
9	Ariel Capital 401(k)/Profit Sharing Ariel Focus Fund			X											X																											

* 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)

Reporting Individual's Name DUNCAN, Arne		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										
Line No.	Asset/Income Description	Valuation of Assets							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*	None (or less than \$201)	Dividends	Rent and Royalties	Interest	Capital Gains	\$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	Ariel Capital 401(k)/Profit Sharing Ariel Appreciation Fund			X					X					X																				
2	Ariel Capital 401(k)/Profit Sharing Master Select Equity Fund			X					X					X																				
3	Ariel Capital 401(k)/Profit Sharing Ariel Fund			X					X					X																				
4	Ariel Capital 401(k)/Profit Sharing Master Select Smaller Co.		X						X					X																				
5	Ariel Capital 401(k)/Profit Sharing T. Rowe Price International Stock Fund		X						X					X																				
6	Ariel Capital 401(k)/Profit Sharing Master Select International Fund			X					X					X																				
7	Ariel Capital 401(k)/Profit Sharing - Neuberger (f/k/a Lehman Brothers) Core Bond Fund		X						X					X																				
8	Vanguard Investments 403(b)(S) Vanguard US Growth		X						X					X																				
9	Vanguard Investments 403(b)(S) Vanguard Wellington Fund		X						X					X																				

* 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)

Reporting Individual's Name
 DUNCAN, Arne

Page Number

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BLOCK A	BLOCK B											BLOCK C																					
	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.																					
	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	Vanguard Investments 403(b)(S) Vanguard Windsor Fund	X										X							X														
2	Chevy Chase Bank (checking account) (J)		X																X														
3																																	
4																																	
5																																	
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.

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

Reporting Individual's Name DUNCAN, Arne	SCHEDULE B	Page Number 7 of 11 <i>MCD 7-7-10</i>
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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

	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	CREF STOCK *		X		2/09			X									
2	TIAA Traditional		X		2/09		X										
3	Ariel Fund	X			10/16/09		X										
4	Ariel Appreciation Fund	X			10/16/09		X										
5	Ariel Focus Fund	X			10/16/09		X										

*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	Fight for Children	Attendance at Annual Gala held 5/15/09.	\$350
2	John Rogers, Chicago, IL	Airline ticket and hotel in connection with Hoop It Up trip to Chicago 5/29/09 - 5/31/09 (personal activity unrelated to duty)	\$1,515
3	John Rogers, Chicago, IL	Airline ticket and hotel in connection with Hoop It Up trip to Louisville, KY 7/24/09-7/26/09 (personal activity unrelated to duty)	\$656
4			
5			

SCHEDULE C

Page Number

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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	\$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.															
	John Jones, 123 JSt., Washington, DC	Promissory note	1999	10%	on demand			x				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: (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	Ariel Profit Sharing and 401(k) Plan. Defined Contribution Plan (No further contributions will be made by employer)	Ariel Investments, Inc., Chicago, IL	01/93
2	Chicago Public Schools 403(b) Plan. Defined Contribution Plan (No further contributions will be made by employer)	Chicago Public Schools, Chicago, IL	2/98
3	Chicago Public Schools 457(b) Plan. Defined Contribution Plan (No further contributions will be made by employer)	Chicago Public Schools, Chicago, IL	9/04
4			
5			
6			

Reporting Individual's Name DUNCAN, Arne	SCHEDULE D	Page Number 9 of 10 ^{MLA} 7-7-10
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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	Chicago Public Schools Chicago, IL	School District	Chief Executive Officer	06/2001	01/2009
2	Ariel Education Initiative Chicago, IL	Non Profit	Board Member	09/1995	01/2009
3	Chicago Cares Chicago, IL	Non Profit	Board Member	06/2001	01/2009
4	Children First Fund Chicago, IL	Non Profit	Board Member	06/2001	01/2009
5	Harvard University Board of Overseers Cambridge, MA	Educational Institution	Board Member	06/2006	01/2009
6	Illinois Council Against Handgun Violence Chicago, IL	Non Profit	Board Member	01/1997	01/2009

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. 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		
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6		

Reporting Individual's Name DUNCAN, Arne	SCHEDULE D	Page Number 10 of 18 <i>MCB 7-7-10</i>
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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	Jobs for America's Graduates Alexandria, VA	Non Profit	Board Member	10/2003	01/2009
2	Junior Achievement of Chicago Chicago, IL	Non Profit	Board Member	01/2002	01/2009
3	National Association of Basketball Coaches Kansas City, MO	Non Profit	Consultant	03/2002	01/2009
4	Scholarship Chicago Advisory Committee Chicago, IL	Non-Profit	Advisory Board Member	06/1998	01/2009
5	South Side YMCA Chicago, IL	Non Profit	Board Member	06/2001	01/2009
6	The Broad Center for the Management of School Systems Los Angeles, CA	Non Profit	Board Member	06/2008	1/2009

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. 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		

Reporting Individual's Name DUNCAN, Arne	SCHEDULE D	Page Number 11 of 11 <i>Med 7-7-10</i>
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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 Children's Center Chicago, IL	Non Profit	Board Member	01/1995	01/2009
2	The Golden Apple Foundation Chicago, IL	Non Profit	Board Member	11/2001	01/2009
3	The Renaissance Schools Fund Chicago, IL	Non Profit	Board Member	09/2004	01/2009
4	The Dean's Advisory Board of the Kellogg School of Management Chicago, IL	Non Profit	Advisory Board Member	10/2004	01/2009
5	Visiting Committee for Harvard University's Grad. School of Education Cambridge, MA	Educational Instiution	Visiting Committee Member	10/2006	01/2009
6	University of Chicago's School of Social Science Admiistration Chicago, IL	Educational Institution	Advisory Board Member	07/2001	01/2009

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		
2		
3		
4		
5		
6		