## Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Form Approved: OMB No. 3209 - 0001

Supersedes Prior Editions.

* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate	6 Goldman Sachs 401k - Genesis Emerging Markets (GSS)	S Goldman Sachs 401k - Centersquare Real Estate Equity Investment Option	4 Goldman Sachs 401k - Blackrock Lrg Cap Value Equity (MRLVX)	3 Goldman Sachs 401k - Money Market GSAM	<sup>2</sup> Citibank Ulitmate Savings Account	1 Citibank Checking	IRA: Heartland 500 Index Fund	Kempstone Equity Fund	Examples Doe Jones & Smith, Hometown, State	Central Airlines Common	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	BLOCK A	Assets and Income	-	Reporting Individual's Name CANEGALLO, KRISTIE A
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									Law Partnership Income \$130,000		Other Income (M (Specify Type & Actual Amount)		than \$201)" for that iten		Page Number 2 of 5
								   			Date (Mo., Day, Yr.) Only if Honoraria		'is n.		

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

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Reporting Individual's Name CANEGALLO, KRISTIE A	SCHEDULE	OLE B							Page	Page Number 3	aber 3 of	5		-
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 X												
children during the reporting period of any	residence, or a transaction solely between	.Transaction Type (x)	n			Þ	mour	Amount of Transaction (x)	ransa	ction	(x)			
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.	you, your spouse, or dependent child. Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.	irchase	change Date (Mo., Day, Yr.)	,001 - 5,000	5,001 - 0,000	0,001 - 00,000 00,001 - 50,000	50,000 50,001 - 00,000	00,001 - ,000,000	er ,000,000*	,000,001 - ,000,000	,000,001 5,000,000	5,000,001 - 0,000,000	0,000,000	rtificate of vestiture
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Part II: Gifts, Reimbursements,	ments, and Travel Expenses	S												
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 \$350 and (2) travel-related cash reimbursements received from one source totaling more than \$350. 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 of For travel-related office and reimbursements include travel integers.	ip- d d d d d d	the U.S. Government; greceived from relatives independent of their relative donor's residence. / total value from one so for other exclusions.	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 \$140 or less. See instructions for other exclusions.	given to your agency in connection with official travel; received by your spouse or dependent child totally lationship to you; or provided as personal hospitality at also, for purposes of aggregating gifts to determine the urce, exclude items worth \$140 or less. See instruction	gency our sp u; or I ses of a	in con ouse o orovida aggreg orth \$	mecti or dep ed as gating (140	on wi bended perso gifts or les	ith of nt chi nt chi nal h nal h to de s. See s.	ficial Ild to lospit sterm e inst	l trav tally tality tality ine t	el; at he ons		
authority, etc. For travel-related girts and relimbursements, include travel itinerary, dates, and the nature of expenses provided. <b>Exclude</b> anything given to you by	clude anything given to you by										×	None [	X	<u> </u>
Source (Name and Address)		Brief De					-					\ \{\partial}	Value	
Examples Raria Can Brancisco CA	Airline ticket, hotel room & meals incident to national conference 6/15/	conference		99 (personal activity unrelated to duty)	ity unr	elated t	o duty	"			 	<b>1</b> \$5	\$500	j
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							GS 401k - no further contributions made by form	Example Pursuant to partnership agreement calculated on service performed t	Status and	Part II: Agreements of Report your agreements or arrangements or arrangements of arrangements of a pension, 40 tion of payment by a former employer	This category applies only if the liability in the spouse or dependent children, m							Examples First District Bank, Washington, DC	Creditors (Name and Address)	during the reporting period by you, your spouse, or dependent children. Check the highest amount owed during the reporting period. Exclude	keport habilities over \$10,000 owed to any one creditor at any time	Part I: Liabilities	Reporting Individual's Name CANEGALLO, KRISTIE A	Yan distribution Name of the Name of the State o
							GS 401k - no further contributions made by former employer. All underlying holdings disclosed consistent with Schedule A	Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through 1/00.	Status and Terms of any Agreement or Arrangement	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	*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 with the spouse or dependent children, mark the other higher categories, as appropriate.						Promissory note	Mortgage on rental property, Delaware	Type of Liability		unless it is rented out; loans secured by automobiles, household furniture	a mortgage on your personal residence	S	
							n Schedule A.	artnership share		of absence; and (4) future employment. See instructions regarding the reporting of negotiations for any of these arrangements or benefits.  Non	lren. If the liability is						1999 10%	1991 8%	incurred Rate			None X	SCHEDULE C	
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U.S. Office of Government Ethics					
Reporting Individual's Name CANEGALLO, KRISTIE A		SCHEDULE D		Page Number 5 of	Ωī
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Part I: Positions Held Outside U.S. Government	side U.S. Govern			tions with molinious	
sated or not. Positions include but are not limited to those of an officer, director, trustee, general partner, proprietor, representative, employee, or consultant of	ted to those of an officer, dire ative, employee, or consultant	ector, social, fraternal, or political entities and those solely of an honorary tof nature.	ntities and those solely o	ely of an honorary	} <b></b>
any corporation, mill, partitersing, or other business effect prise or any non-produc	dsiness enterprise or any non-			4	֓֞֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓
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Part II: Compensation in Excess of \$5,000 Paid by One Source	Excess of \$5,000	uid by One Sourc	Do not complete this part if you are an Incumbent, Termination Filer, or Vice	this part if you a	ure an Vice
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	ation received by you or your tly by you during any one ye of clients and customers of a ess enterprise, or any other	non-profit organization of the control of the contr		residential Candida 000. You None	date. ne 🔲
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	neytown, State	Legal services in connection with university construction	tion ·		
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