OGE Form 278 (Rev. 12/2011) 5 C.F.R. Part 2634

## Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Form Approved: OMB No. 3209 - 0001

U.S. Office of Government Ethics

| Data of Association of Control of the   |   |                                    |   |   |
|---|---|------------------------------------|---|---|
| Date of Appointment, Candidacy, Election, or Nomination (Month, Day, Year)  August 7, 2016 (1996)   | Status<br>(Check Appropriate Boxes)  Covered by Report Nor Can  | v Entrant,<br>ninee, or<br>ididate | Termination Termination Date (If Appli-<br>Filer Termination Date (If Appli-<br>cable) (Month, Day, Year) | Any individual who is required to file this report and does so more than 30 days  |
| Reporting   | Last Name   | First Name and M                   | iddle Initial   | after the date the report is required to be filed, or, if an extension is granted, more   |
| Individual's Name   | Segal-Knowles   | Christina                          | M   | than 30 days after the last day of the filing extension period, shall be subject  |
|   | Title of Position   | Department or Ag                   | gency (If Applicable)   | to a \$200 fee.   |
| Position for Which<br>Filing  | Special Assistant to the President for International Economic   |                                    |   | Reporting Periods Incumbents: The reporting period is   |
| Location of   | Address (Number, Street, City, State, and ZIP Code)   |                                    | Telephone No. (Include Area Code)   | the preceding calendar year except Part<br>II of Schedule C and Part I of Schedule D  |
| Present Office (or forwarding address)  | 605 8th St NE, Washington, DC 20002   |                                    | 2024565131  | where you must also include the filing year up to the date you file. Part II of   |
| Position(s) Held with the Federal   | Title of Position(s) and Date(s) Held   |                                    |   | Schedule D is not applicable.   |
| Government During the Preceding<br>12 Months (If Not Same as Above)   | Director for International Economics, National Security Counces Senior Director for Global Economics and fi | il staff Jan. 2<br>wance, NSC      | 014 - Feb. 2016 (CS 40.00<br>staff, feb. 2016 - present<br>(CSS 40.20.10                                  | period begins at the end of the period<br>covered by your previous filing and ends  |
|   | Name of Congressional Committee Considering Nomination  | Do You Intend to C                 | reate a Qualified Diversified Trust?  | at the date of termination. Part II of Schedule D is not applicable.  |
| Presidential Nominees Subject<br>to Senate Confirmation   | Not Applicable  |                                    |   | schedule D is not applicable.   |
|   | Not Applicable  | Yes                                | ∑ No  | Nominees, New Entrants and  |
|   | T   |                                    |   | Candidates for President and<br>Vice President:   |
| Certification  I CERTIFY that the statements I have   | Signature of Reporting Individual   |                                    | Date (Month, Day, Year)   | V100 1100100111.  |
| made on this form and all attached schedules are true, complete and correct to the best of my knowledge.  |   |                                    | 10/14/16  | Schedule A-The reporting period<br>for income (BLOCK C) is the preceding<br>calendar year and the current calendar<br>year up to the date of filing. Value assets |
| Other Review  | Signature of Other Reviewer   |                                    | Date (Month, Day, Year)   | as of any date you choose that is within  |
| (If desired by agency)  |   |                                    |   | 31 days of the date of filing.  Schedule B—Not applicable.  |
| Agency Ethics Official's Opinion  | Signature of Designated Agency Ethics Official/Reviewing Of   | ficial                             | Date (Month, Day, Year)   | Schedule C, Part I (Liabilities)—The reporting period is the preceding calendar   |
| On the basis of information contained in this report, I conclude that the filer is in compliance with applicable laws and regulations (subject to any comments in the box below). | 1000  |                                    | 11/4/16   | year and the current calendar year up to<br>any date you choose that is within 31 days<br>of the date of filing.  |
| any comments in the box below).   | Signature   |                                    | Date (Month, Day, Year)   | Schedule C, Part II (Agreements or  |
| Office of Government Ethics   | S. S  |                                    | Date (Montal, Day, Teal)  | Arrangements)-Show any agreements or  |
| Use Only  |   |                                    | 1   | arrangements as of the date of filing.  |
|   |   |                                    | 1   | Schedule D The reporting period is  |
| Comments of Reviewing Officials (I  | If additional space is required, use the reverse side of this she   | eet)                               |   | the preceding <b>two</b> calendar years and<br>the current calendar year up to the date   |
|   | (Check box if filing exten  | sion granted & indic               | cate number of days)  | of filing.  |
|   |   |                                    |   | Agency Use Only   |
|   |   |                                    |   | 10/14/16 CTS  |
|   |   |                                    |   | OGE Use Only  |
|   | (Check b  | oox if comments are                | continued on the reverse side)  | -   |

| Reportin   | ng Individual's Name   |  |  |   |       |               |                |                |               |      |  | C  | Cŀ           | TE            | ורו          |            | C                         | ٨              |       |      |       |      |      |     |       |          |       |       |        |      | Pa | ige Number                          |              |
|--|--|--|--|---|-------|---------------|----------------|----------------|---------------|------|--|--|--------------|---------------|--------------|------------|---------------------------|----------------|-------|------|-------|------|------|-----|-------|----------|-------|-------|--------|------|----|-------------------------------------|--------------|
| Segal-Kno  | owles, Christina M   |  |  |   |       |               |                |                |               |      |  | 3  | Cr           | 1C            | יעו          | UL         | .C                        | A              |       |      |       |      |      |     |       |          |       |       |        |      |    | 2 of                                | 6            |
|  | Assets and Income  |  | Valuation of Assets at close of reporting period  Income: type and amount. If "None (or leaded in Blocked), no other entry is needed in Blocked. |   |       |               |                |                |               |      |  |  |              |               |              | ess<br>k C | than \$20.<br>for that it | 1)" is<br>tem. |       |      |       |      |      |     |       |          |       |       |        |      |    |                                     |              |
|  | BLOCK A  |  |  |   |       | В             | LOC            | K B            |               |      |  |  |              |               |              |            |                           |                |       |      |       |      |      | BL  | OCK   | <u>C</u> |       |       |        |      |    |                                     |              |
| report ea<br>production<br>value exce-<br>ing period<br>in income<br>with such<br>For yours<br>amount of<br>than from<br>report the<br>income of | self, also report the source and act fearned income exceeding \$200 (on the U.S. Government). For your spoe source but not the amount of ear f more than \$1,000 (except report than \$1,0 | Occopy and a composition of the parameter of the paramete |  |   |       |               |                |                |               |      | Other<br>Income<br>(Specify<br>Type &<br>Actual<br>Amount)   | Date<br>(Mo., Day,<br>Yr.)<br>Only if<br>Honoraria |              |               |              |            |                           |                |       |      |       |      |      |     |       |          |       |       |        |      |    |                                     |              |
|  | Central Airlines Common  | $\Box$   |  | ]_                                      | х     |               |                |                | Γ.            |      |  |  |              |               |              |            | х                         |                |       |      |       |      | х    |     |       |          |       |       |        |      |    |                                     |              |
| Examples   | Doe Jones & Smith, Hometown, State   | ]  |  | ,                                       |       |               | L              |                | L.            |      | $oxedsymbol{ox{oxed}}}}}}$ |  |              |               | _[_          |            |                           |                |       |      |       |      |      |     | _     |          | L     |       | Ĺ      |      |    | Law Partnership<br>Income \$130,000 | <u>↓</u> '   |
| 1  | Kempstone Equity Fund  IRA: Heartland 500 Index Fund   |  | 4.   | -                                       | -     | x             | ├              | ×              | -             |      | -  | -  | $\dashv$     | x<br>x        | -            |            |                           |                | -     |      |       | 4    | -    | ×   |       |          |       |       |        |      | -  |                                     | <del> </del> |
| 1 Bank o   | f America, Checking Account  |  | :  | ×                                       |       | E STATE OF    |                |                |               |      | Г  |  |              | 18 S.         |              |            |                           |                |       |      | ×     |      |      |     |       |          |       |       |        |      |    |                                     |              |
| <sup>2</sup> Bank o'   | f America, Checking Account  |  | ;  | ×                                       |       |               |                |                |               |      |  |  |              |               |              |            |                           |                |       |      | ×     |      |      |     |       |          |       |       |        |      |    |                                     |              |
| 3 Bank of  | f America, Savings Account   |  | :  | ×                                       |       |               |                |                |               |      |  |  |              |               |              |            |                           |                |       | 182  | ×     |      |      |     |       |          |       |       |        |      |    |                                     |              |
| Bank of  | of America, Savings Account  |  |  | >                                       | <     |               |                |                |               |      |  |  |              |               |              |            |                           |                |       |      | ×     |      |      |     |       |          |       |       |        |      |    |                                     |              |
| 5 Bank of  | of America Checking Account  |  | ;  | ×                                       |       |               |                |                |               |      |  |  |              |               |              |            |                           |                |       |      | ×     |      |      |     |       |          |       |       |        |      |    |                                     |              |
| 6 Internat   | tional Monetary Fund   |  |  | 360000000000000000000000000000000000000 |       |               |                |                |               |      |  |  |              |               |              | 12/12/13   |                           |                |       |      |       |      |      |     |       |          |       |       |        |      |    | Salary                              |              |
| * This by the  | category applies only if the asset/in-<br>ne filer with the spouse or dependen   | come is  | sole   | ly th                                   | at of | f the<br>othe | file:<br>er hi | r's sp<br>gher | pous<br>r cat | egor | dep  | end  | ent<br>ilue, | chile<br>as a | dren<br>appr | ı, If      | the                       | asso           | et/ir | ıcon | ne is | eith | er t | hat | of th | ne fi    | ler c | or jo | ointly | y he | ld |                                     |              |

| F      | Reporting Individual's Name  |                             |               |            |                      |                       |                       |                         |                   | 20                        | ועוי                       | CT                          | \T                | TT 1                     | C              | Λ.              | <u></u>   | mí                 | -in       | ue                   | A                         |                 |                   |                   |                    |                     |                      |                         |                   |                           | Pa               | ge Number  |                    |   |
|--------|--|-----------------------------|---------------|------------|----------------------|-----------------------|-----------------------|-------------------------|-------------------|---------------------------|----------------------------|-----------------------------|-------------------|--------------------------|----------------|-----------------|-----------|--------------------|-----------|----------------------|---------------------------|-----------------|-------------------|-------------------|--------------------|---------------------|----------------------|-------------------------|-------------------|---------------------------|------------------|--|--------------------|---|
| Se     | egal-Knowles, Christina M  |                             |               |            |                      |                       |                       |                         |                   | <b>3</b> C                |                            |                             |                   |                          |                | f n             |           |                    |           | ue                   | :u                        |                 |                   |                   |                    |                     |                      |                         |                   |                           |                  | 3 of   | 6                  |   |
| Г      |  |                             |               |            |                      |                       |                       |                         |                   |                           |                            |                             |                   |                          |                |                 |           |                    |           |                      |                           |                 |                   |                   |                    |                     |                      |                         |                   |                           |                  |  |                    | ·   |
|        | Assets and Income  |                             | a             | V:<br>t cl | alu<br>ose           | ati<br>of             | ion<br>rep            | of<br>ort               | As                | se<br>pe                  | ts<br>rio                  | d                           |                   |                          |                |                 | I         | n c<br>he          | on<br>cke | 1 <b>e:</b><br>:d, 1 | typ<br>no (               | e a             | nd<br>er e        | am<br>ntr         | our<br>y is        | it. l<br>i n∈       | f "l<br>ede          | Nor<br>ed i             | ne (<br>in B      | or l                      | ess<br>k C       | than \$2<br>for that                                       | 01)<br>ite         | " is<br>m.  |
|        | BLOCK A  |                             | BLOCK C       |            |                      |                       |                       |                         |                   |                           |                            |                             |                   |                          |                |                 |           |                    |           |                      |                           |                 |                   |                   |                    |                     |                      |                         |                   |                           |                  |  |                    |   |
|        |  | 13                          | Type Amount   |            |                      |                       |                       |                         |                   |                           |                            |                             |                   |                          |                |                 |           |                    |           |                      |                           |                 |                   |                   |                    |                     |                      |                         |                   |                           |                  |  |                    |   |
|        |  | None (or less than \$1.001) |               |            | \$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 | 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<br>Income<br>(Specify<br>Type &<br>Actual<br>Amount) |                    | Date<br>Mo., Day,<br>Yr.)<br>Only if<br>conoraria |
| 1<br>S | International Monetary Fund Staff Retiremental Plan, defined benefit plan (value not readily | nt                          |               |            |                      |                       |                       |                         |                   | 34411                     |                            |                             |                   |                          |                |                 |           |                    |           |                      | ×                         |                 |                   |                   |                    |                     |                      |                         |                   |                           |                  |  |                    |   |
| 2      | ascertainable)   |                             |               |            |                      |                       |                       |                         |                   |                           |                            |                             |                   |                          |                |                 |           |                    |           |                      |                           |                 |                   |                   |                    |                     |                      |                         |                   |                           |                  |  |                    |   |
| 3<br>S | UK Civil Service Pensions, definied benefit (value not readily ascertainable)                | olan                        |               | 13.2       |                      |                       |                       |                         |                   |                           |                            |                             |                   | A CONTRACT               |                |                 |           |                    |           |                      | ×                         |                 |                   |                   |                    |                     |                      |                         |                   |                           |                  |  |                    |   |
| 4      |  |                             |               |            |                      |                       |                       |                         |                   |                           |                            |                             |                   |                          |                |                 |           |                    |           |                      |                           | ALC: N          |                   |                   |                    |                     |                      |                         |                   | Sea of                    |                  |  |                    |   |
| 5      |  |                             |               |            |                      | 18.50                 |                       |                         |                   |                           |                            |                             |                   |                          |                |                 |           |                    |           |                      |                           |                 |                   |                   |                    |                     |                      |                         |                   |                           |                  |  |                    |   |
| 6      | 1  |                             |               |            |                      | 83.011.               |                       |                         |                   |                           |                            |                             |                   |                          |                |                 |           |                    |           | 1001001              |                           |                 |                   |                   |                    |                     |                      | 107-111                 |                   |                           |                  |  | $oxed{\mathbb{I}}$ |   |
| 7      |  |                             |               |            |                      |                       |                       | W. M.                   |                   |                           |                            |                             |                   |                          |                | 100             |           |                    |           |                      |                           |                 |                   |                   |                    |                     |                      |                         |                   |                           |                  |  |                    |   |
| 8      |  |                             |               |            |                      | 1                     |                       |                         |                   |                           |                            |                             |                   |                          |                |                 |           |                    |           |                      |                           |                 |                   |                   |                    |                     |                      |                         |                   |                           |                  |  |                    |   |
| 9      |  |                             |               |            | П                    |                       |                       |                         |                   |                           | Г                          |                             |                   |                          | Γ              |                 |           |                    |           |                      |                           |                 |                   |                   |                    |                     |                      |                         |                   |                           |                  |  | T                  | -   |
|        | * This category applies only if the asset/in-<br>by the filer with the spouse or dependen    | come is s<br>t childre      | olely<br>n, m | tha        | t of                 | the<br>othe           | filer<br>r hig        | 's sp<br>gher           | ous               | e or                      | dep                        | end<br>of va                | ient<br>alue      | chi<br>, as              | ldre<br>app    | n. I            | f th      | e as               | set/      | inco                 | me                        | is ei           | her               | that              | of t               | he f                | iler                 | or jo                   | ointl             | y he                      | ld               |  |                    | ·   |

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

| Reporting Individual's Name<br>Segal-Knowles, Christina M   | SCHED  | UL                              | E B                              | 3                                 |   |                           |                                      |                          |                            |                         | Page                    | e Num                        | ber<br>4 o                          | f 6         |           |                            |
|---|--|---------------------------------|----------------------------------|-----------------------------------|---|---------------------------|--------------------------------------|--------------------------|----------------------------|-------------------------|-------------------------|------------------------------|-------------------------------------|-------------|-----------|----------------------------|
| 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                            | ion                               |   | Ī                         |                                      |                          | Amour                      | t of T                  | ransa                   | ction                        | (x)                                 |             |           |                            |
| real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,0 Include transactions that resulted in a lo  | Check the "Certificate of divestiture" block 000. to indicate sales made pursuant to a   | Purchase                        | ype ()                           | Exchange                          | Date<br>(Mo.,<br>Day, Yr.)  | \$1,001 -<br>\$15,000     | \$15,001 -<br>\$50,000<br>\$50,001 - | 00,000                   | 50,000                     | 00,001 -                | er<br>,000,000*         | \$1,000,001 -<br>\$5,000,000 | ,000,001 -<br>5,000,000             | 5,000,001 - | o,000,000 | Certificate of divestiture |
| Identif   | fication of Assets   | P                               | Sale                             | ŭ                                 |   | SI                        | -                                    | _                        | \$22                       | 8.58                    | \$10                    | \$1                          | \$22                                | \$2<br>\$5  | ્રું      | ਹੈਵਿੰ                      |
| Example Central Airlines Common   |  | х                               |                                  | 160                               | 2/1/99  |                           |                                      | х                        | -                          |                         | 4.11                    |                              |                                     |             |           |                            |
| 1   |  |                                 |                                  |                                   |   |                           |                                      |                          |                            |                         |                         |                              | _ =                                 |             |           |                            |
| 2   |  | 3.41                            |                                  |                                   |   |                           |                                      |                          |                            |                         |                         |                              |                                     |             |           |                            |
| 3   |  |                                 |                                  |                                   |   | 2                         | 8                                    |                          |                            |                         |                         |                              |                                     |             |           |                            |
| 4   |  | 13                              |                                  |                                   |   |                           |                                      |                          |                            |                         |                         |                              |                                     |             |           |                            |
| 5   |  | Wh                              |                                  | 100                               |   |                           | 3                                    | B                        |                            |                         | 194                     |                              |                                     |             |           |                            |
| Part II: Gifts, Reimbur  For you, your spouse and dependent child tion, and the value of: (1) gifts (such as ta food, or entertainment) received from one (2) travel-related cash reimbursements re than \$350. For conflicts analysis, it is hel as personal friend, agency approval under | angible items, transportation, lodging, received source totaling more than \$350 and independence of the doctor of | S. Governdent nor's realue from | ernn<br>n rel<br>of the<br>eside | nent;<br>ative<br>eir re<br>ence. | given to yo<br>s; received<br>elationship<br>Also, for prource, exclu | our ag<br>by yo<br>to you | ur spo<br>i; or p<br>es of a         | ouse o<br>rovid<br>aggre | or dep<br>led as<br>gating | ender<br>perso<br>gifts | nt ch<br>onal l<br>to d | ild to<br>hospi<br>etern     | tally<br>tality<br>nine t<br>tructi | at<br>the   |           |                            |
| Source (Name and Address)   |  |                                 |                                  | escrip                            |   |                           |                                      |                          |                            |                         |                         |                              |                                     |             | 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 unre                              | lated                    | to duty                    | ·)                      |                         |                              | -4                                  |             | 00        |                            |
| Frank Jones, San Francisco, CA  | Leather briefcase (personal friend)  |                                 |                                  |                                   |   |                           |                                      |                          |                            |                         |                         |                              | $\dashv$                            | \$3         | 885       |                            |
| 74  |  |                                 |                                  |                                   |   |                           |                                      |                          |                            |                         |                         |                              |                                     |             |           |                            |
| 2   |  |                                 |                                  |                                   |   |                           |                                      |                          |                            |                         |                         |                              |                                     |             |           |                            |
| 3   |  |                                 |                                  |                                   |   |                           |                                      |                          |                            |                         |                         |                              |                                     |             |           |                            |
| 4   |  |                                 |                                  |                                   |   |                           |                                      |                          |                            |                         |                         |                              |                                     |             |           |                            |
| 5   |  |                                 |                                  |                                   |   |                           |                                      |                          |                            |                         |                         |                              |                                     |             |           |                            |

| Reporting Individual's Name  | SCHEDULE  | Всо      | ont              | inı            | ıed                            |                       |            |            |                    |            |            | Page        | Numb       | ег                   |             |           |                           |
|--|---|----------|------------------|----------------|--------------------------------|-----------------------|------------|------------|--------------------|------------|------------|-------------|------------|----------------------|-------------|-----------|---------------------------|
| Segal-Knowles, Christina M   | SCHEDULE<br>(Use only i   | f nee    | ded              | )              |                                |                       |            |            |                    |            |            |             |            | of                   | 6           |           |                           |
| Part I: Transactions   |   |          |                  |                |                                |                       |            |            |                    |            |            |             |            |                      |             |           |                           |
|  |   | Тга      | insact<br>ype (: | ion<br>x)      |                                |                       |            |            | An                 | ount       | of T       | ransa       | ction      | (x)                  |             |           |                           |
|  | 2)  | Purchase |                  | Exchange       | Date<br>(Mo.,<br>Day, Yr.)     | \$1,001 -<br>\$15,000 | 5,001 -    | 0,001 -    | 00,001 -<br>50,000 | 50,001 -   | 00,001 -   | er,000,000* | ,000,001 - | ,000,000 - 5,000,000 | 5,000,001 - | o,000,000 | rtificate of<br>⁄estiture |
|  | ification of Assets   | P        | Sale             | Ë              |                                | \$1                   | \$1<br>\$5 | \$5<br>\$1 | \$1<br>\$2         | \$2<br>\$5 | \$5<br>\$1 | \$0         | \$1<br>\$5 | \$2                  | \$22        | \$25      | ಶಿಕೆ                      |
| 1  |   |          |                  |                |                                |                       |            |            |                    |            |            |             |            |                      |             |           |                           |
| 2  |   |          |                  |                |                                |                       |            |            |                    |            |            |             |            |                      |             |           |                           |
| 3  |   |          |                  |                |                                |                       |            |            |                    |            |            |             |            |                      | $\neg$      |           |                           |
| 4  |   |          |                  |                |                                |                       |            |            |                    |            |            |             |            |                      |             |           |                           |
| 5  |   |          |                  |                |                                |                       |            |            |                    |            |            |             |            |                      | $\exists$   |           |                           |
| 6  |   |          |                  |                |                                | 87                    |            |            |                    |            |            |             |            |                      | $\top$      |           |                           |
| 7  |   |          |                  |                |                                |                       |            |            |                    |            |            |             |            |                      |             |           |                           |
| 8  |   |          |                  |                |                                |                       |            |            |                    |            |            |             |            |                      |             |           |                           |
| 9  |   |          |                  |                |                                |                       |            |            |                    |            |            |             |            |                      | $\exists$   |           |                           |
| 10   |   |          |                  |                |                                |                       |            |            |                    |            |            |             |            |                      | $\exists$   |           |                           |
| 11   |   |          |                  |                |                                |                       |            |            |                    |            |            |             |            |                      | $\neg$      |           |                           |
| 12   |   |          |                  |                |                                |                       |            |            |                    |            |            |             |            |                      |             |           |                           |
| 13   |   | 1.74     |                  |                |                                |                       |            |            |                    |            |            |             |            |                      | $\exists$   |           |                           |
| 14   |   |          |                  |                |                                |                       |            |            |                    |            |            |             |            |                      | $\exists$   |           |                           |
| 15   |   |          | $\vdash$         |                |                                |                       |            |            |                    |            |            |             |            |                      | $\exists$   |           |                           |
| 16   |   |          |                  |                |                                |                       |            |            |                    |            |            |             |            |                      |             |           |                           |
| *This category applies only if the underlyi<br>by the filer or jointly held by the filer wit | ing asset is solely that of the filer's spouse or dependent child<br>th the spouse or dependent children, use the other higher cate | ren. If  | the u            | inder<br>alue, | lying asset is<br>as appropria | eithe<br>te.          | r hel      | d          |                    |            |            |             |            |                      |             |           |                           |

Reporting Individual's Name

|                                   | owles, Christina M   | S  | CHED                 | ULE (                    | 2                     |                        |                        |                         |                         |                          |                            |                   |              | 5 of                          | 6            |                      |
|-----------------------------------|--|--|----------------------|--------------------------|-----------------------|------------------------|------------------------|-------------------------|-------------------------|--------------------------|----------------------------|-------------------|--------------|-------------------------------|--------------|----------------------|
| 1                                 | I: Liabilities liabilities over \$10,000 owed  | a mortgage on your personal residence<br>unless it is rented out; loans secured by   | None 🔀               |                          |                       |                        |                        |                         |                         |                          |                            |                   |              |                               |              |                      |
| to any c                          | one creditor at any time   | automobiles, household furniture   |                      |                          | ,                     |                        |                        | (                       | Catego                  | ry of A                  | moun                       | t or Va           | lue (x)      | )                             |              | _                    |
| during to<br>your spe<br>Check to | the reporting period by you, ouse, or dependent children. he highest amount owed the reporting period. Exclude | or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts. | <b>–</b> Date        | Interest                 | Term if               | \$10,001 -<br>\$15,000 | \$15,001 -<br>\$50,000 | \$50,001 -<br>\$100,000 | \$100,001-<br>\$250,000 | \$250,001 -<br>\$500,000 | \$500,001 -<br>\$1,000,000 | ver<br>1,000,000* | \$1,000,001- | \$5,000,001 -<br>\$25,000,000 | 25,000,001 - | Over<br>\$50,000,000 |
| l                                 | Creditors (Name and Address)   | Type of Liability  | Incurred             | Rate                     | applicable            | SS                     | 8 8                    | 8 8                     | 83.83                   | 8 8                      | 89.89                      | Ó.≥               | 60.60        | 89.89                         | 55.55        | 0 %                  |
| Examples                          | First District Bank, Washington, DC  | Mortgage on rental property, Delaware  | 1991                 | 8%                       | 25 yrs.               |                        | L                      | x                       | ļ                       |                          | <u> </u> _                 | 100               | lacksquare   |                               |              |                      |
|                                   | John Jones, Washington, DC   | Promissory note  | 1999                 | 10%                      | on demand             |                        |                        |                         |                         | х                        |                            | 1                 |              |                               |              | 17.00                |
| 1                                 |  |  |                      |                          |                       |                        |                        |                         |                         |                          |                            | 1200              |              |                               |              |                      |
| 2                                 |  |  | +                    |                          |                       | 2                      |                        |                         |                         | - 73                     | $\vdash$                   |                   |              |                               |              |                      |
| _                                 |  |  |                      |                          |                       |                        |                        |                         |                         |                          |                            |                   |              | 100                           |              |                      |
| 3                                 |  |  |                      |                          |                       |                        |                        | y.T                     |                         |                          |                            |                   |              |                               |              |                      |
| 4                                 |  |  |                      |                          |                       |                        |                        |                         |                         |                          |                            |                   |              |                               |              |                      |
| 5                                 |  |  | _                    |                          |                       |                        |                        |                         |                         |                          | ┢                          |                   |              |                               |              |                      |
| l I                               |  |  |                      |                          |                       |                        |                        | -10                     |                         |                          |                            |                   |              |                               |              | 200                  |
| *This ca<br>with th               | ategory applies only if the liability is<br>ne spouse or dependent children, ma                                | solely that of the filer's spouse or dependent child rk the other higher categories, as appropriate.                             | ren. If the li       | ability is t             | hat of the fi         | ler or a               | a joint                | liabili                 | ity of t                | he file                  | er                         |                   |              |                               |              |                      |
| Part                              | II: Agreements of  | r Arrangements   |                      |                          |                       |                        |                        |                         |                         |                          |                            |                   |              |                               |              |                      |
| employe                           | ee benefit plan (e.g. pension, 40  | ts for: (1) continuing participation in an 1k, deferred compensation); (2) continua-(including severance payments); (3) leaves   | of abser<br>ing of n | nce; and (<br>egotiation | 4) future ons for any | emplo<br>of the        | ymer<br>se ar          | nt. See<br>range        | e insti<br>ement        | ructions<br>s or l       | ons re<br>oenef            | gardi<br>its.     | ing th       |                               | ort-<br>None | $\times$             |
|                                   | Status and T   | erms of any Agreement or Arrangement   |                      |                          |                       |                        |                        |                         | Partie                  | es                       |                            |                   |              |                               | I            | Date                 |
| Example                           | Pursuant to partnership agreement calculated on service performed th   | , will receive lump sum payment of capital account & prough 1/00.  | artnership sh        | аге                      | Doe Jones             | & Smit                 | h, Hon                 | netown                  | , State                 |                          |                            |                   | -            |                               | 7            | /85                  |
| 1                                 |  |  |                      |                          |                       |                        |                        |                         |                         |                          |                            |                   |              |                               |              |                      |
| 2                                 |  |  |                      |                          |                       |                        |                        |                         |                         |                          |                            |                   |              |                               | T            |                      |
| 3                                 | <u> </u>   |  | <u> </u>             |                          | <u> </u>              |                        |                        |                         |                         |                          | -                          |                   |              |                               | T            |                      |
| 4                                 |  |  |                      |                          |                       |                        |                        | ·                       |                         |                          |                            |                   |              | <del>-</del>                  | $\dagger$    |                      |
| 5                                 |  |  |                      | ~                        |                       |                        |                        |                         |                         |                          |                            |                   |              |                               | $\dagger$    |                      |
| 6                                 |  |  |                      |                          |                       |                        |                        |                         |                         |                          |                            |                   |              |                               | +            |                      |
|                                   |  |  |                      |                          |                       |                        |                        |                         |                         |                          |                            |                   |              |                               |              |                      |

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| Reporting Individual's Name   |   |                                   |   |   | Page Number                             |              |
|---|---|-----------------------------------|---|---|---|--------------|
| Segal-Knowles, Christina M  |   | SC                                | HEDULE D                                  |   | 6 of                                    | 6            |
| Part I: Positions Held Report any positions held during the appropriate or not. Positions include but are a trustee, general partner, proprietor, repany corporation, firm, partnership, or constitution. | oplicable reporting period, whethe<br>not limited to those of an officer, d<br>presentative, employee, or consulta  | er compen-<br>lirector,<br>ant of |   | al institution. Exclude position al entities and those solely of an | honorary                                | ,<br>one ⊠   |
| Organization (Name  |   |                                   | Type of Organization                      | Position Held   | From (Mo., Yr.)                         | To (Mo.,Yr.) |
| Nat'l Assn. of Rock Collectors, NY, NY  | 114 / 144 / 1 | Non-profit educ                   |   | President   | 6/92                                    | Present      |
| Examples Doe Jones & Smith, Hometown, State   |   | Law firm                          |   | Partner   | 7/85                                    | 1/00         |
| 2   |   |                                   |   |   |   |              |
| 4   |   |                                   |   |   |   |              |
| 5   |   |                                   |   |   |   |              |
|   |   |                                   |   |   |   |              |
| 6   |   |                                   |   |   |   |              |
| 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                    | mpensation received by you or yo<br>d directly by you during any one<br>names of clients and customers of   | our<br>year of<br>f any           | non-profit organization w                 | hen Presidential or Presi<br>or payment of more than \$5,000        | tion Filer, or<br>dential Cand<br>. You | · Vice       |
| Source (Name an   | d Address)  |                                   | 1   | Brief Description of Duties   |   |              |
| Examples Doe Jones & Smith, Hometown, State  Metro University (client of Doe Jones & S  | mith), Moneytown, State   | Legal service                     | s<br>es in connection with university con | struction   |   |              |
| 2   |   |                                   |   |   |   |              |
| 3   |   |                                   |   |   |   |              |
| 4   |   |                                   |   |   |   |              |
| 6   |   |                                   |   |   |   |              |
|   | -24   |                                   |   |   |   |              |

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