

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		Termination Filer		Termination Date (If Applicable) (Month, Day, Year)	
01/20/2009		Last Name		Obama		First Name and Middle Initial		Barack		H.			
Reporting Individual's Name		Title of Position		President		Department or Agency (If Applicable)							
Position for Which Filing		Address (Number, Street, City, State, and ZIP Code)		White House, 1600 Pennsylvania Ave. NW, Washington, D.C. 20500		Telephone No. (Include Area Code)		202-456-1414					
Location of Present Office (or forwarding address)		Title of Position(s) and Date(s) Held											
Position(s) Held with the Federal Government During the Preceding 12 Months (If Not Same as Above)		Name of Congressional Committee Considering Nomination		Do You Intend to Create a Qualified Diversified Trust?		Yes <input type="checkbox"/>		No <input checked="" type="checkbox"/>					
Presidential Nominees Subject to Senate Confirmation		Signature of Reporting Individual		Date (Month, Day, Year)									
Certification		Signature of Other Reviewer		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.		Signature of Designated Agency Ethics Reviewing Official		Date (Month, Day, Year)									
Other Review (If desired by agency)		Signature		Date (Month, Day, Year)									
Agency Ethics Official's Opinion		Signature		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 any comments in the box below).		Signature		Date (Month, Day, Year)									
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 _____) ☐

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

<p>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.</p> <p>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.</p> <p>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.</p> <p>Nominees, New Entrants and Candidates for President and Vice President:</p> <p>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.</p> <p>Schedule B--Not applicable.</p> <p>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.</p> <p>Schedule C, Part II (Agreements or Arrangements)--Show any agreements or arrangements as of the date of filing.</p> <p>Schedule D--The reporting period is the preceding two calendar years and the current calendar year up to the date of filing.</p>	<p>Agency Use Only</p> <p>OGE Use Only</p>
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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.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																					
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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 report- ing 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)										Type																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																					
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Page Number

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[illegible]

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Reporting Individual's Name

Obama, Barack H.

SCHEDULE A continued

(Use only if needed)

Page Number

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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

Type

Amount

Other
Income
(Specify
Type &
Actual
Amount)

Date
(Mo., Day,
Yr.)
Only if
Honorary

		None (or less than \$1,001)											\$1,001 - \$15,000											\$15,001 - \$50,000											\$50,001 - \$100,000											\$100,001 - \$250,000											\$250,001 - \$500,000											\$500,001 - \$1,000,000											Over \$1,000,000*											\$1,000,001 - \$5,000,000											\$5,000,001 - \$25,000,000											\$25,000,001 - \$50,000,000											Over \$50,000,000											Excepted Investment Fund											Excepted Trust											Qualified Trust											Type				Amount											Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) 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Page Number
5 of 8[illegible]

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

Reporting Individual's Name
Obama, Barack H.

SCHEDULE B

Page Number
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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 ☒

		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	
1	Example	Central Airlines Common	x			2/1/99			x									
2																		
3																		
4																		
5																		

*This category applies only if the underlying asset is solely that of the filer's spouse or dependent children. If the underlying asset is either held by the filer or jointly held by the filer with the spouse or dependent children, use the other higher categories of value, as appropriate.

Part II: Gifts, Reimbursements, and Travel Expenses

For you, your spouse and dependent children, report the source, a brief description, and the value of: (1) gifts (such as tangible items, transportation, lodging, food, or entertainment) received from one source totaling more than \$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, 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 \$140 or less. See instructions for other exclusions.

None ☒

	Source (Name and Address)	Brief Description	Value
1	Examples Nat'l Assn. of Rock Collectors, NY, NY Frank Jones, San Francisco, CA	Airline ticket, hotel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty) Leather briefcase (personal friend)	\$500 \$385
2			
3			
4			
5			

Reporting Individual's Name
Obama, Barack H.

Page Number

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SCHEDULE C

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 ☐

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						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.											
Creditors (Name and Address)		Type of Liability	Date Incurred	Interest Rate	Term if applicable	Category of Amount or Value (X)											
Examples	First District Bank, Washington, DC	Mortgage on rental property, Delaware	1991	8%	25 yrs.	\$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	
	John Jones, Washington, DC	Promissory note	1999	10%	on demand			X		X							
1	Northern Trust, Chicago, IL	Mortgage on residence, Illinois	2005	5.625%	30 yrs.						X						
2																	
3																	
4																	
5																	

*This category applies only if the liability is solely that of the filer's spouse or dependent children. If the liability is that of the filer or a joint liability of the filer with the spouse or dependent children, mark the other higher categories, as appropriate.

Part II: Agreements or Arrangements

Report your agreements or arrangements for: (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.		
1	General Assembly Defined Benefit Pension Plan (no further contributions by former employer)	Doe Jones & Smith, Hometown, State State of Illinois, Springfield, IL	7/85 01/97
2			
3			
4			
5			
6			

Reporting Individual's Name
Obama, Barack H.

Page Number

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SCHEDULE D

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 ☒

Examples	Organization (Name and Address)		Type of Organization	Position Held	From (Mo., Yr.)		To (Mo., Yr.)	
	Natl 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								
2								
3								
4								
5								
6								

Part II: Compensation in Excess of \$5,000 Paid by One Source

Report sources of more than \$5,000 compensation received by you or your business affiliation for services provided directly by you during any one year of the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any other non-profit organization when you directly provided the services generating a fee or payment of more than \$5,000. You need not report the U.S. Government as a source. 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			

ATTACHMENT A TO SCHEDULE A - ASSETS AND INCOME

On January 9, 2009, Barack Obama executed an amendment to his previously disclosed, December 2004 agreement with Crown Publishing Group, a division of Random House, Inc. Under this agreement, a non-fiction work, the subject to be determined, would not be delivered during his term in office and the schedule for any future book publications would be accordingly revised.

On January 15, 2009, Barack Obama approved a \$500,000 advance against royalties under an agreement between Crown Publishing Group, a division of Random House, Inc., and Random House Children's Books, for an abridged version of *Dreams From My Father* suitable for middle grade or young adult readers, as proposed by the publisher in 2008. The President received the last advance payment for the abridged version of *Dreams From My Father* in 2010. Royalties for the book are: 15% of the U.S. sales price for hardcover book sales, 7.5% to 10% of the U.S. price for trade paperback book sales, 10% for the U.S. price for the mass-market paperback book sales, and other standard royalties. The abridged, young adult version of *Dreams From My Father* will be prepared and released by the publisher subject to the President's approval.

Prior to taking office in January 2009, Barack Obama wrote and delivered the manuscript of *Of Thee I Sing*, a children's book. This book is part of his previously disclosed December 2004 agreements with Crown Publishing Group, a division of Random House, Inc. *Of Thee I Sing* was published in November 2010 and all after-tax, author proceeds from this book have been and will continue to be donated to the Fisher House Foundation for a scholarship fund for children of fallen and disabled soldiers.

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	2011	New Entrant, Nominee, or Candidate <input type="checkbox"/>	Termination Date (If Applicable) (Month, Day, Year)	
01/20/2009		Last Name		BIDEN		First Name and Middle Initial		JOSEPH R., JR.	
Reporting Individual's Name		Title of Position		VICE PRESIDENT		Department or Agency (If Applicable)			
Position for Which Filing		Address (Number, Street, City, State, and ZIP Code)		WHITE HOUSE, 1600 PENNSYLVANIA AVE., NW, WASHINGTON, DC 20500		Telephone No. (Include Area Code)			
Location of Present Office (or forwarding address)		Title of Position(s) and Date(s) Held							
Position(s) Held with the Federal Government During the Preceding 12 Months (If Not Same as Above)		Name of Congressional Committee Considering Nomination		Do You Intend to Create a Qualified Diversified Trust?		Yes <input type="checkbox"/>		No <input checked="" type="checkbox"/>	
Presidential Nominees Subject to Senate Confirmation		Not Applicable							
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.				5.10.12					
Other Review (If desired by agency)		Signature of Other Reviewer		Date (Month, Day, Year)					
				5.10.2012					
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 any comments in the box below).				5.10.2012					
Office of Government Ethics Use Only		Signature		Date (Month, Day, Year)					
				5-10/12					
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"/>									
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Page Number
3 of 10[illegible]

* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.

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Reporting Individual's Name
BIDEN, JOSEPH R., JR.

SCHEDULE A continued (Use only if needed)

Page Number

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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										Other Income (Specify Type & Actual 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	
1	MASS MUTUAL WHOLE LIFE INSURANCE POLICY		X														X																	
2	MASS MUTUAL WHOLE LIFE INSURANCE POLICY			X													X																	
3	MASS MUTUAL WHOLE LIFE INSURANCE POLICY				X												X																	
4	MASS MUTUAL WHOLE LIFE INSURANCE POLICY					X											X																	
5	MASS MUTUAL WHOLE LIFE INSURANCE POLICY						X										X																	
6	MASS MUTUAL WHOLE LIFE INSURANCE POLICY							X									X																	
7	S - NEW CASTLE COUNTY SCHOOLS EMPLOYEE FCU - SAVINGS																																	
8	S - NEW CASTLE COUNTY SCHOOLS EMPLOYEE FCU - CHECKING																																	
9	S - NORTHERN VIRGINIA COMMUNITY COLLEGE, ANNANDALE, VA																																	

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Reporting Individual's Name
BIDEN, JOSEPH R., JR.

SCHEDULE A continued (Use only if needed)

Page Number
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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									Other Income (Specify Type & Actual 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
1	S - WILMINGTON SAVINGS FUND SOCIETY - CERTIFICATES OF DEPOSIT				X															X													
2	S - COMMONWEALTH OF VA, 457 DEFERRED COMP. - Balanced Growth Fund		X																														
3	S - COMMONWEALTH OF VA, 401(a) CASH MATCH PLAN - Balanced Growth Fund	X												X								X											
4	S - WILMINGTON SAVINGS FUND SOCIETY - CERTIFICATES OF DEPOSIT					X															X												
5	J - RENTAL PROPERTY (residential), WILMINGTON, DE						X													X													
6	M&T BANK - SAVINGS (CASH ACCOUNT) (formerly WILMINGTON TRUST)	X																				X											
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
BIDEN, JOSEPH R., JR.

SCHEDULE B

Page Number
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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 ☒

		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																		
2																		
3																		
4																		
5																		

*This category applies only if the underlying asset is solely that of the filer's spouse or dependent children. If the underlying asset is either held by the filer or jointly held by the filer with the spouse or dependent children, use the other higher categories of value, as appropriate.

Part II: Gifts, Reimbursements, and Travel Expenses

For you, your spouse and dependent children, report the source, a brief description, and the value of: (1) gifts (such as tangible items, transportation, lodging, food, or entertainment) received from one source totaling more than \$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, 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 \$140 or less. See instructions for other exclusions.

None ☐

	Source (Name and Address)	Brief Description	Value
Examples	Natl. Assn. of Book Collectors, NY, NY Frank Jones, San Francisco, CA	Airline ticket, hotel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty) Leather briefcase (personal friend)	\$500 \$385
1	Keijo Paajanen (Helsinki, Finland)	Vulcain Cricket Watch	\$800
2			
3			
4			
5			

Reporting Individual's Name
BIDEN, JOSEPH R., JR.

SCHEDULE C

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Part I: Liabilities

Report liabilities over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent children. Check the highest amount owed during the reporting period. Exclude

a mortgage on your personal residence unless it is rented out; loans secured by automobiles, household furniture or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.

None ☐

			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													
Creditors (Name and Address)		Type of Liability	Date Incurred	Interest Rate	Term if applicable	\$10,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001-\$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001-\$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000
Examples	First District Bank, Washington, DC John Jones, Washington, DC	Mortgage on rental property, Delaware Promissory note	1991 1999	8% 10%	25 yrs. on demand			X								
1	J - US SENATE FEDERAL CREDIT UNION	SIGNATURE NOTE WITH MONTHLY PAYMENTS	2007	9.99%	5 YRS		X									
2	WILMINGTON SAVINGS FUND SOCIETY	LINE OF CREDIT	2008	7.5%	10 YRS		X									
3	J - WILMINGTON SAVINGS FUND SOCIETY	HOME EQUITY LOC	2005	PRIME	10 YRS				X							
4	SUN NATIONAL BANK, DE	CO-SIGNER WITH SON ON LOC, RENEWABLE EVERY 2 YEARS	1989	PR+1	2 YRS		X									
5	MASS MUTUAL LIFE INSURANCE COMPANY POLICIES BOUGHT BETWEEN 1969 and 1983	LOANS AGAINST CASH VALUE OF POLICIES	1983	5-8%	LIFE		X									

*This category applies only if the liability is solely that of the filer's spouse or dependent children. If the liability is that of the filer or a joint liability of the filer with the spouse or dependent children, mark the other higher categories, as appropriate.

Part II: Agreements or Arrangements

Report your agreements or arrangements for: (1) continuing participation in an 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.		
1			
2			
3			
4			
5			
6			

Reporting Individual's Name
BIDEN, JOSEPH R., JR.

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 ☐

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						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.											
Creditors (Name and Address)		Type of Liability	Date Incurred	Interest Rate	Term if applicable	Category of Amount or Value (x)											
Examples	First District Bank, Washington, DC	Mortgage on rental property, Delaware	1991	8%	25 yrs.	\$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	
	John Jones	Promissory note	1999	10%	on demand			x		x							
1	J - WILMINGTON SAVINGS FUND SOCIETY	MORTGAGE ON PRINCIPAL RESIDENCE (INCLUDING RENTAL PROPERTY)	2010	4.625%	23 YRS						X						
2	J - WILMINGTON SAVINGS FUND SOCIETY	HOME EQUITY LOC	2011	5.25%	10 YRS		X										
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			
2			
3			
4			
5			
6			

Reporting Individual's Name
BIDEN, JOSEPH R., JR.

SCHEDULE D

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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 ☒

Examples	Organization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)
	Natl Assn of Book Collectors, NY, NY Doe Jones & Smith, Hometown, State	Non-profit education Law firm	President Partner	6/92 7/85	Present 1/00
1					
2					
3					
4					
5					
6					

Part II: Compensation in Excess of \$5,000 Paid by One Source

Report sources of more than \$5,000 compensation received by you or your business affiliation for services provided directly by you during any one year of the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any other

Do not complete this part if you are an Incumbent, Termination Filer, or Vice Presidential or Presidential Candidate.
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	
Legal services			
Examples	Doe Jones & Smith, Hometown, State Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services in connection with university construction	
1			
2			
3			
4			
5			
6			