UNITED STATES SENATE FINANCIAL DISCLOSURE REPORT FOR ANNUAL AND TERMINATION FILERS

ГОГ	WIAIAOWE	. <u> </u>						
Amendment								-
Last Name	First Name and Middle Initi	al	_	Annual Report				
			,	Calendar Year Covered by Report	Senate Office / Ag	ency in Which Employed		
Murkowski	Lisa A.			2012	US Senate	!		
Senate Office Address (Number, Street, City, State, and ZIP Code)	Senate Office Telephone N	iumber (Inci	ude Area Co	de) Termination Report	_			
700 H 110 O	202 224 6665		,	Termination Date (mm/dd/yy)	Prior Office / Agen	cy in Which Employed		
709 Hart, US Senate, Washington, DC	202-224-6665			i				:
20510								
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AFTER READING THE INSTRUCT	TIONS – ANSW	ER EA	ACH O	F THESE QUESTIONS A	ND ATTAC	H THE RELEVA	NIPA	AR I
	-	YES	NO				YES	NO
Did any individual or organization make a donation to	charity in lieu of			Did you, your spouse, or dependen				
paying you for a speech, appearance, or article in the				reimbursements for travel in the rep	porting period (i.e.	, worth more than		X
If Yes, complete and attach PART I.				\$350 from one source)? If Yes, complete and attach PART	VI.			
Did you or your spouse have earned income (e.g., sal	aries or fees) or non-							
investment income of more than \$200 from any report				Did you, your spouse, or depender (more than \$10,000) during the rep	nt child have any re porting period?	еропаріе нарінту		
reporting period?				If Yes, complete and attach PART				
If Yes, complete and attach PART II.						<u>-</u>		
Did you, your spouse, or dependent child hold any rep				Did you hold any reportable positio	ns on or before th	e date of filing in the		
more than \$1,000 at the end of the period, or receive investment income of more than \$200 in the reporting		X		current calendar year?	N 2414		X	
If Yes, complete & attach PART IIIA and/or IIIB.	ponou.	لكــكا		If Yes, complete and attach PART	VIII.			\
Did you, your spouse, or dependent child purchase, s	ell or exchange any			Do you have any reportable agreer	ment or arrangeme	ent with an outside	г	
reportable asset worth more than \$1,000 in the report		X	1 1	entity?				X
If Yes, complete and attach PART IV.				If Yes, complete and attach PART	IX.		!	
Did you, your spouse, or dependent child receive any	reportable gift in the			If this is your EIRST Poport: Did w	nu roceive compe	neation of more than		
reporting period (i.e., aggregating more than \$350 and			$ \mathcal{N} $	If this is your FIRST Report: Did you \$5,000 from a single source in the		isation of more than	33	
exempt)?				If Yes, complete and attach PART	X.	2		
If Yes, complete and attach PART V.	· · · · · · · · · · · · · · · · · · ·	-					70	
Each question must	be answered a	nd the	appro	priate PART attached for	or each "YE	o response.		
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Reporting Individual's Name	☐ Amendment	
Lisa A. Murkowski		

PART I. PAYMENTS TO PAY CHARITABLE ORGANIZATIONS IN LIEU OF HONORARIA

Page Number

2

Report the source (name and address), date, and amount of any payment from each source to a charitable organization made in lieu of honoraria to you during the reporting period. Identify the activity (speech, article, or appearance), which generated the payment. For further information, see Instructions.

Note: Travel expenses in excess of \$350 related to activities giving rise to these payments must be reported in Part VI, Reimbursements.

Date	of Payment	Name of Source	Address (City, State)	Speech, Article, or Appearance	Amount
Example:	3/26/1X	Association of American Associations	Wash., DC EXAMPLE	Speech	\$1,000
Example.	7/23/1X	XYZ Magazine	NY, NY EXAMPLE	Article	\$500
1 7/6/	12	Cam Toohey	Kenai, Alaska	Appearance	\$2,000
2 11/1	0/12	Aryeh and Kay Levenson	Anchorage, Alaska	Appearance	\$2,000
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4					
5					
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7					
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0					
11	•				•
12	······································				
13					

A separate, confidential report which names the charitable organization receiving such payments must be filed directly with the Select Committee on Ethics.

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Reporting Individual's Name	D 4	ים ו	- 111	I A	_	11 12	.	101	v	TC	3 A I	ne	D	A C	e E	TC		ME		NE	A DNIS	- D	1 N I A	~~	8.7			1D	CE	:0		Pag	e Number
Lisa A. Murkowski	PF	KK		IA.		'Ui	BL	ICI	_ Y 	<u> </u>	(A)	JE	ע ע	A5)	:13	• A	NL		NE	ARNE	:U 	יאו		IAII	= 3 		<u> </u>	<u>С</u> Е	:5 —			3
BLOCK A Identity of Publicly Traded Assets And Unearned Income Sources Report the complete name of each publicly traded asset held by you, your spouse, or			At	Valuathe control	u ati :lose ie, or	of re	of / epor	Ass ting in \$1	perio	od.				•		Тур	0.0	Fine			ype and			K C	of i				f In	con	<u></u>		
your dependent child, (See p.3, CONTENTS OF REPORTS Part B of Instructions) for production of income or investment which: (1) had a value exceeding \$1,000 at the close of the reporting period; and/or (2) generated over \$200 in "unearned" income during the reporting period. Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.	None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	01 - \$100,0	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000,***	<u> </u>	\$5,000,001 - \$25,000,000	=	Over \$50,000,000		Dividends		sst	Gains	Excepted Investment Fund	ed Trust	Blind Trust	Other (Specify Type)		\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	- \$15,000	\$15,001 - \$50,000	1 - \$100,000	,001 - \$1,000,000	,000,000,	00,000 - \$5,000,000	r \$5,000,000	Actual Amount Required if "Other" Specified
S, IBM Corp. (stock) Example: DC,	igspace			Х	Ç									X				J			Example	\	X					ļ					Example
or J (S) Keystone Fund	十				^_									<u> </u>			-	^			Example	^						<u> </u>					Example
1 TD Waterhouse Cash	1	×											_		_	*	┞					×						ļ					
2 State of AK Annuity Plan	<u> </u>	ļ	×				· · · · · ·									_	_	×				×											
3 Schwab Cash	L	×						<u> </u>						×								×											
4 DC Investoo S&P 500 Index Fund (Child 1) (formerly known as MS S&P 500 Index Fund)			×											×									×										
5 DC MS Focus Growth (Child 1) (formerly known as MS American Fund Op 8)		×												×								×		:									
6 DC Investoo S&P 500 Index Fund (Child 2) (formerly known as MS S&P 500 Index Fund)			×											×									×		:								
7 DC MS Focus Growth (Child 2) (formerly known as MS American Fund Op B)		×												×								×											
8 DC T Rowe Price College Savings Plan (Enrollment-Based Portfolio - 2009) (Child 1)			×															×	:			×											
9 DC T Rowe Price College Savings Plan (Enrollment-Based Portfolio - 2011) (Child 2)			×															×				×									,		
10 DC Wells Fargo (shares) (Child 1)		×												×									×										
EXEMPTION TEST (see instructions before marking box): I *** This category applies only if the asset is/was held independent	If you cende	u omi ently l	tted a	ny as	sset (beca or de	use pend	it me lent (ets ti child.	he th	ree-p	oart t set is	est f	or exe s eith	empt er he	tion d eld by	lescr	ibed filer	in the	e inst ntly l	tructions, p	lease ne oth	che er c	ck bo	x to	the r	ight. ilue,	as a	prot	oriate).		

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Reporting Individual's Name	P#	\R¹	ר וו	IA.	F) LJI	BLI	ICI	Υ	TR	Α[- DEI	D A	AS	SE	ETS	S A	NE) U	NE	ARNE	ΞD	iN	CO	M	E S	OI	UR	CE	- S		Page	• Number
Lisa A. Murkowski	· _							_	- ' 				_						_										_				4
BLOCK A Identity of Publicly Traded Assets And Unearned Income Sources Report the complete name of each publicly			At	Val i the c Non Ch	uati close	of rest	eport s tha	Ass ting (n \$1	perio ,001	d.					-					7	ype and		-	K C		nco	me						
traded asset held by you, your spouse, or your dependent child, (See p.3,	L			O()	CON		131 0	Viun								Тур	e o	fine	com	ne						Am	oui	nt o	f In	con	пе		
CONTENTS OF REPORTS Part B of Instructions) for production of income or investment which: (1) had a value exceeding \$1,000 at the close of the reporting period; and/or (2) generated over \$200 in "unearned" income during the reporting period. Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a	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	- 100,000	Over \$50,000,000		Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	(or less tha	\$201 - \$1,000	1	\$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	5,000,000	Actual Amount Required if "Other" Specified
retirement planS, IBM Corp. (stock)	╆	ļ		X										X		\vdash		\vdash			Example		Х										Example
Example: DC, or J (S) Keystone Fund.	T	<u> </u>		-	х		·										\vdash	x	 		Example	х											Example
1 DC Wells Fargo (shares) (Child 2)		×												×									×	r									
2 J Investoo S&P 500 Index Fund (formerly known as MS S&P 500 Index Fund)			×											×									×										
3 DC AK Permanent Fund Dividend		×											×											×									
4 DC AK Permanent Fund Dividend		×											×											×									
5 S AK Permanent Fund Dividend	L	×						<u>-</u>					×											×									
6 AK Permanent Fund Dividend		×	L										×											×									
7 DC Wells Fargo (acct) (Child 1)			×													×					•	×											
8 DC Northrim Bank (acct) (Child 2)			×													×						×											
9 Northrim Bank (acct)		×														×						×											
10 Wells Fargo (acct)				×												×						×			i								
EXEMPTION TEST (see instructions before marking box): *** This category applies only if the asset is/was held indep	If you sende	omi ently l	tted a	any a e spo	isset iuse (beca or de	use pend	it me lent d	ets ti child.	ne thi	ree-p	art to set is	est fo	or exi	emp	tion o	lesc y the	ribed filer	in the	e inst intly l	tructions, p held, use th	lease	che ier c	ck bo	x to	the r	ight. Ilue,	as a	pprot	oriate).		

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Re	porting Indi	lividual's Name						_							_	_										484		.							Pag	e Number
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R	And	BLOCK A ity of Publicly Traded Assets Unearned Income Sources e complete name of each public				At	the of	uati close ne, o	ion e of r	epor s tha	Ass ting : in \$1	регіо ,001	d.										T	ype and			K C		nco	me						
tra	aded as	set held by you, your spouse, o	-				Ch	eck 1	the f	irst c	otun	រក.					•	-	Гур	e o	fino	con	1e						Am	oui	nt o	f In	con	ne		
C In in In id fu exactri	onten struction vestmer (1) had close (2) gend incom clude of entification nd, pub scepted ccounts,	endent child, (See p.3, ITS OF REPORTS Part B of ns) for production of income or nt which: a value exceeding \$1,000 at the of the reporting period; and/or erated over \$200 in "unearned" ne during the reporting period. ITA a complete tion of each public bond, mutuallicly traded partnership interest investment funds, bank, excepted and qualified blind of publicly traded assets of a nt plan.	ne '	None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	1 - \$25	\$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	None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	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	er \$5,000,000	Actual Amount Required if "Other" Specified
	•	S, IBM Corp. (stock)					х										Х				-:-			Example		Х										Example
(3	cample: D o	S) Keystone Fund						Х													Х			Example	X											Example
1		Wells Fargo (shares)				×											×											×								•
2	J .	Invesco Diversified Dividend (formerly known as MS Divide Growth Securities B)	end		×												×									×		•								
3	J	Fidelity Small Cap (Mutual Fund	I)		×															×					×			- -								
4	s	ING. Intl. Small Cap			×				:								×					 -		•	×											
5	DC	Fidelity Small Cap (Mutual Fund) (Chile	d 1)		×												×			×					×	•										
6	DC	Investoo S&P 500 Index Fund (Child 1) (formerly known as S&P 500 Index Fund)	MS		×												×			×					×											
7	DC	Fidelity Small Cap (Mutual Fund) (Child	d 2)		×												×			×					*		:	1								
8	DC	Investop S&P 500 Index Fund (Child 2) (formerly known as S&P 500 Index Fund)	MS		×												×			×					×								•			. <u>-</u>
9	J	Morgan Stanley Money Market			×														×						×											
10	s	investco S&P 500 Index Fund (formerly known as MS S&P Index Fund)	500		x												x								×											
		N TEST (see instructions before marking in a gory applies only if the asset is/was held																														prot	oriate	- -		

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Reporting In	ndividu	al's Name	-		- ···				.		v	T C			_		or						- A DAIF		ibia	~~				ın	~г			Page	Number
Lisa A	. Mi	ırkowski	۲/	4K	I III	IA.	. t	וטי	BL		_ Y 	1 1	KAI	JE	ָּט	A5) 	:12	> A 	NL		NE	ARNE	:U	<u> </u>		IAII	= 3 		JK'	↓ <u>⊏</u>				6
And	d Úr	BLOCK A of Publicly Traded Assets learned Income Sources omplete name of each public	V		At	the (luati close ne, o	e of r	of / epor s tha	Ass ting in \$1	регіс ,001	d.										7	Type and			K C		nco	me						
traded a	sset	held by you, your spouse, or	-			Ch	neck '	the f	irst c	olun	nn.						-	Тур	e 0	f Ind	con	ne	, <u>.</u> ,					Am	oui	nt o	f Ind	con	ne		
CONTEI Instruction investment (1) had close (2) general incontration include entification fund, purexcepted accounts	NTS ons) ent v d a v e of nera on th ation blich d inv s, ex	value exceeding \$1,000 at the the reporting period; and/or ted over \$200 in "unearned" during the reporting period. his PART IIIA a complete of each public bond, mutually traded partnership interest, restment funds, bank accepted and qualified blind publicly traded assets of a	None (or less than \$1,001)	1 - \$15,000	5,001 - \$5(\$50,001 - \$100,000	0,001 - \$25	,001 - \$50	\$500,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	,000,001 - \$50,000	ar \$50,000,000	None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	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	0,001 - \$	Over \$1,000,000***	\$1,000,001 - \$5,000,000	8	Actual Amount Required if "Other" Specified
Example:	S, DC.	IBM Corp. (stock)				Х										Х							Example		X										Example
11	or J	(S) Keystone Fund	-	╀	_		X		_		* * **			Щ		_		_	_	X	_		Example	X											Example
1 J	M	S Focus Growth		×										Ш		×			<u> </u>					×											
2	Va	anguard Bond Index ETF			×											×								:	×										<u> </u>
3	Vē	anguard REIT ETF		×												×									×										
4	So	hwab US MKT Broad ETF			×											×				ļ				×											
5	So	hwab Int'l Equity ETF		×									:			×									×										<u>,</u>
6	So	hwab Emg MKT ETF		×												×		<u> </u>						×											
7	<u></u>															_		L		<u> </u>		L													
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EXEMPTIC	ON TE	ST (see instructions before marking both applies only if the asset is/was held in	ox): If yo depend	u omi	itted a	any a e spo	asset ouse	beca or de	ause epend	it me lent o	ets ti child.	he th	ree-p	part t set is	est f	or ex s eith	empi er hi	tion o	desci	ribed filer	in th or jo	e insi intly l	tructions, p held, use th	lease ne oth	che ner c	ck bo	ox to ories	the r	ight. Ilue,	as ar	pror	oriate	: .		

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Reporting Individual's Name	PA	٩R'	TII	IB.	N	101	1-P	UB	ILK	CL'	ΥT	R/	\DE	ED .	AS —	SE	TS	S Al	ND	UN	NEARN	IEC) IN	ICC	MC	E S	Ol	JR	CE	s		Pag	je Number 7
BLOCK A Identity of Non-Publicly Traded Assets and Unearned Income Sources Report the name, address (city, state and description) of each interest held by you,			At	the o	uati close	e of re	of A eport s tha	Asseting pain \$1	perio	od.						Тур	e o	f Inc	con		ype and		OC nou		of I				f In	con	ne		
your spouse, or your dependent child (See p.3, CONTENTS OF REPORTS Part B of Instructions) for the production of income or investment in a non-public trade or business which: (1) had a value exceeding \$1,000 at the close of the reporting period; and/or (2) generated over \$200 in "unearned" income during the reporting period. Include the above report for each underlying asset, which is not incidental to the trade or business. Publicly traded assets held by non-public entity may be listed on Part IIIA.	None (or less than \$1,001)	5,000	1 - \$50,(87	11 - \$250	100	\$500,001 - \$1,000,000	,000,000	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	ed Trust	Qualified Blind Trust	Other (Specify Type)		\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	1 - \$50,(\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000***	\$1,000,001 - \$5,000,000	rer \$5,0	Actual Amount Required if "Other" Specified
S, JP Computer, Software Design, Example: DC, Wash DC				х										х							Example		X										Example
or J Undeveloped land, Dubuque, Iowa 1 First Bank (IRA) (cash)	╁	×	,		X		H					H	X	×				 	 		Example	×				H							Example
2 First Bank (CD)	+		×							H						×		-				Ť	×										
First Bank (shares)			×											×												×							
Accounts Receivable from promissory note for sale of Alaska Pasta Company to Hope Nelson			×																		payments on note									•			\$1,250
Rental Income from basement apartment in Washington, DC residence			×												×												×						
6				ļ. 																													
7																																	
8	Γ																																
9															r			Ī													. ;		

EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.

*** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

Re	porting Indi	vidual's N	Name														Page	Numbe	ı
	Lisa A	. Murk	kowski	PAR	TIV	. TF	RAN	SACTIONS										8	
						•		·			Am	oun	t of	Trar	ısac	tion	(x)	<u> </u>	
ch	hild (Se	e p.3	CONTENTS OF REPO	nge by you, your spouse, or dependent ORTS Part B of Instructions) during the		nsact ype (x												8	
ot In in	ther sec iclude to volving etween	urities ransac prope you, y	s when the amount of to ctions that resulted in a erty used solely as you	stocks, bonds, commodity futures, and the transaction exceeded \$1,000. a loss. Do not report a transaction in personal residence, or a transaction dent child. Please clarify which two able exchange.	urchase	ale	xchange	Transaction Date (Mo., Day, Yr.)	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	ver \$1,000,000***	1,000,001 - \$5,000,000	5,000,001 - \$25,000,000	000	Over \$50,000,000
			·	ion of Assets	4	Sa	û		\$1	8	θ̈́	↔		₩	0	\$	\$2	\$2	
	Example:	S, DC,	IBM Corp. (stock)		X		 -	2/1/1X		X		V	E	X	Α	M	<u> </u>	L	E
	-	ог Ј	(DC) Microsoft (stock) N.	ASDAQ/OTC		X		1/27/1X				Х	E	X	Α	М	P		E
1	DC	Invesc	o S&P 500 Index Fund (Chil	ld 1) (formerly known as MS S&P 500 Index Fund)		X		10/1/12	×	_		_							
2																		,	
3																			
4																			
5						•													
6																			
7																			
8			• • • • • • • • • • • • • • • • • • •																
9						:								·					
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11																			
12																			
EX	EMPTION This categ	I TEST ory appli	(see instructions before marking ies only if the asset is/was held in	ng box): If you omitted any asset because it meets the threndependently by the spouse or dependent child. If the asset	ee-part is/was e	test for either he	exempt Id by the	ion described in the inset filer or jointly held, use t	truction	ons, p ner cat	lease tegorie	check s of v	k box t alue, a	to the	right. ropriat	te.			

00000623204 Page Number Reporting Individual's Name ☐ Amendment PART VII. LIABILITIES Lisa A. Murkowski Category of Amount of Value (x) Only) ξ Report liabilities over \$10,000 owed by you, your spouse, or dependent child (See p.3, CONTENTS OF REPORTS, Part B of Instructions), to any one creditor at any aid \$25,000,000 Term if Applicable \$5,000,000 (Senators time during the reporting period. Check the highest amount owed during the Date Incurred nterest Rate \$1,000,000 \$250,000 \$500,000 reporting period. Exclude: (1) mortgages on your personal residences unless \$100,000 Over \$1,000,000*** \$50,000 \$15,000 \$50,000,000 rented (except for Senators); (2) loans secured by automobiles, household furniture or appliances; and (3) liabilities owed to certain relatives listed in Mortgage \$25,000,001 Instructions. See Instructions for reporting revolving charge accounts. \$5,000,001 \$500,001 \$250,001 \$100,001 \$10,001 \$15,001 Type of Liability Name of Creditor Address P Ε M Mortgage on undeveloped land Α First District Bank 13% 25 yrs Wash., DC 1992 1 pt Example: DC, XE X A M P L 10% On dmd 2000 n/a John Jones Wash., DC Promissory Note 15 yr Mortgage on Townhouse 2011 3.75 Wells Fargo Anchorage, AK n/a EXEMPTION TEST (see instructions before marking box): If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right.

*** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

<u>00000623205</u>

PART VIII. POSITIONS HELD OUTSIDE U.S. GOVERNMENT

Page Number

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Report any positions held by you 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. Both the year and month must be reported for the period of time that the position was held.

Exclude: Positions with federal government, religious, social, fraternal, or political entities, and those solely of an honorary nature.

	N	ame of Organization	Addres	s (City, State)	Type of Organization	Position Held	From (Mo/Yr)	To (Mo/Yr)
Ev	ample:	National Assn. of Rock Collectors	NY,NY	EXAMPLE	Non-profit education	President	6/91	Present
	ample:	Jones & Smith	Hometown, USA	EXAMPLE	Law Firm	Partner	7/96	11 / 1X
1	U.S. Jap	oan Friendship Commission	Washington, DC		ind. Federal Agency	Member	2005	Present
2	Japan Ir	nterparlimentary Group	Washington, DC		Ind. Federal Agency	Vice Chair	4/12	12/12
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6	-							
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12		· · · · · · · · · · · · · · · · · · ·		······································				
13			-					

Compensation in excess of \$200 from any position must be reported in Part II.