Form Approved
OMB No. 3209-0006

# CONFIDENTIAL FINANCIAL DISCLOSURE REPORT

## Executive Branch

**Why Must I File?**

The duties and responsibilities of your position require you to file the Confidential Financial Disclosure Report to avoid involvement in a real or apparent conflict of interest. The purpose of this report is to assist employees and their agencies in avoiding conflicts between official duties and private financial interests or affiliations. The information you provide will only be used for legitimate purposes, and will not be disclosed to any requesting person unless authorized by law. (See the Privacy Act Statement at the bottom of this page.) Please ensure that the information you provide is complete and accurate.

**When Must I File?**

**New Entrants:** The report is due within 30 days of your assuming a position designated for filing, unless your agency requests the report earlier or your agency grants you a filing extension.
**Annual Filers:** The report is due no later than February 15, unless your agency grants you a filing extension.

**What is the Reporting Period?**

**New Entrants:** Report the required information for the 12 months preceding your filing of this form.
**Annual Filers:** Report the required information for the preceding calendar year (January 1 – December 31).

**What if I Have Questions?**

If you have any questions about how to complete this form, please contact your ethics official or go to the Office of Government Ethics web site at www.oge.gov and select **OGE Form 450: Confidential Financial Disclosure Report** under **Forms Library.**

**PENALTIES**

Falsification of information or failure to file or report information required to be reported may subject you to disciplinary action by your employing agency or other authority. Knowing and willful falsification of information required to be reported may also subject you to criminal prosecution.

**Privacy Act Statement**

Title I of the Ethics in Government Act of 1978 (5 U.S.C. App.), Executive Order 12674 (as modified by Executive Order 12731), and 5 CFR Part 2634, Subpart I, of the Office of Government Ethics regulations require the reporting of this information. The primary use of the information on this form is for review by Government officials of your agency, to determine compliance with applicable Federal conflict of interest laws and regulations. Additional disclosures of the information on this report may be made pursuant to the routine uses set forth in OGE/GOVT-2: (1) to a Federal, State, or local law enforcement agency if the disclosing agency becomes aware of a violation or potential violation of law or regulation; (2) to a court or party in a court or Federal administrative proceeding if the Government is a party or in order to comply with a judge-issued subpoena; (3) to a source when necessary to obtain information relevant to a conflict of interest investigation or decision; (4) to the National Archives and Records Administration or the General Services Administration in records management inspections; (5) to the Office of Management and Budget during legislative coordination on private relief legislation; (6) to the Department of Justice or in certain legal proceedings when the disclosing agency, and employee of the disclosing agency, or the United States is a party to litigation or has an interest in the litigation and the use of such records is deemed relevant and necessary to the litigation; (7) to reviewing officials in a new office, department or agency when an employee transfers from one covered position to another, (8) to a Member of Congress or a congressional office in response to an inquiry made on behalf of an individual who is the subject of the record, and (9) to contractors and other non-Government employees working for the Federal Government to accomplish a function related to this OGE Governmentwide system of records. This confidential report will not be disclosed to any requesting person unless authorized by law. See also the OGE/GOVT-2 Executive Branch Confidential Financial Disclosure Reports Privacy Act system of records.

**Public Burden Information**

It is estimated that completing this form, including reviewing the instructions and gathering the data needed, takes an average of one hour. No private citizen is required to respond to a collection of information unless it displays a currently valid OMB control number as printed in the top right-hand corner of each page of this form. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Program Counsel, U.S. Office of Government Ethics, Suite 500, 1201 New York Avenue, NW, Washington, DC 20005-3917. Do not send your completed OGE Form 450 to this address.

OGE Form 450, 5 CFR Part 2634, Subpart I
U.S. Office of Government Ethics (June 2015)
(Replaces January 2014 edition)

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| Date Received by Agency | Page Number |
|---|---|
| | |

# CONFIDENTIAL FINANCIAL DISCLOSURE REPORT

## Executive Branch

| | | |
|---|---|---|
| **Employee's Name (*Print last, first, middle initial*)** | | **E-mail Address** |
| **Position/Title** | | **Grade** |
| **Agency** | **Branch/Unit and Address** | |
| **Work Phone** | **Reporting Status**<br>New Entrant ☐ Annual ☐ | **If New Entrant, Date of Appointment to Position (*mm/dd/yy*)** |
| **Check box if Special Government Employee (SGE)** ☐ | An SGE is an executive branch officer or employee who is retained, designated, appointed, or employed to perform temporary duties either on a full-time or intermittent basis, with or without compensation, for a period not to exceed 130 days during any consecutive 365-day period. | |
| **If an SGE, Mailing Address (*Number, Street, City, State, ZIP Code*)** | | |

Step 1: Read the instructions for Parts I through V on the following pages.

Step 2: For each statement below, check Yes or No to describe your situation.

| | | |
|---|---|---|
| **I. I have reportable assets or sources of income for myself, my spouse, or my dependent children.** | **Yes** ☐ | **No** ☐ |
| **II. I have reportable liabilities (debts) for myself, my spouse, or my dependent children.** | **Yes** ☐ | **No** ☐ |
| **III. I have reportable outside positions for myself.** | **Yes** ☐ | **No** ☐ |
| **IV. I have reportable agreements or arrangements for myself.** | **Yes** ☐ | **No** ☐ |
| **NOTE: Statement V is for annual filers only. It does not apply to new entrants and SGEs.**<br>**V. I have reportable gifts or travel reimbursements for myself, my spouse, or my dependent children.** | **Yes** ☐ | **No** ☐ |

Step 3: If you selected Yes for any statement, you must describe the reportable interests that you have in the corresponding Part (I, II, III, IV, or V) of the form.

Step 4: Sign and date the form.

Step 5: Submit the completed form to your ethics office.

**I certify that the statements I have made on this form and all attached statements are true, complete, and correct to the best of my knowledge.**

| | |
|---|---|
| **Signature of Employee** | **Date *(mm/dd/yy)*** |

**FOR REVIEWERS' USE ONLY:**

| | |
|---|---|
| **On the basis of information contained in this report, I conclude that the filer is in compliance with applicable laws and regulations, except as noted in the "comments" box below.** | |
| **Signature and Title of Supervisor/Other Intermediate Reviewer *(if required by the agency)*** | **Date *(mm/dd/yy)*** |
| **E-mail Address** | **Phone Number** |
| **Signature and Title of Agency's Final Reviewing Official** | **Date *(mm/dd/yy)*** |
| **Comments of Reviewing Officials**<br>**(Check box if continued on additional page ☐)** | |

| **Employee's Name (*Print last, first, middle initial)*** | **Page Number** |
|---|---|
| | |

## Part I: Assets and Income

| **Report for Yourself, Spouse, and Dependent Child:** | **Do Not Report:** |
|---|---|
| • Assets held for investment with a value greater than $1,000 at the end of the reporting period OR assets held for investment which produced more than $200 in income during the reporting period, including but not limited to:<br>- Assets such as stocks, bonds, annuities, trust holdings, partnership interests, life insurance, investment real estate, or a privately-held trade or business<br>- Sector mutual funds: those funds invested in a particular industry, business, or location such as ABC Electronics Fund or XYZ Canada Fund (report the full name of the fund, not just the general family fund name)<br>- Holdings of retirement plans, such as 401(k)s or IRAs (list each holding except diversified mutual funds)<br>- Holdings of investment life insurance<br>- Holdings of variable annuities<br>- Defined benefit pension plans provided by a former employer (include the name of the employer) | • Federal Government retirement benefits<br>• Thrift Savings Plan<br>• Certificates of deposit, savings or checking accounts<br>• Term life insurance<br>• Money market mutual funds and money market accounts<br>• Your personal residence, unless you rent it out<br>• Diversified mutual funds, such as ABC Equity Value Fund or XYZ Large Capital Fund<br>• U.S. Government Treasury bonds, bills, notes, and savings bonds<br>• Money owed to you, your spouse, or dependent child by a spouse, parent, sibling, or child |
| | |
| **Also Report:** | **Do Not Report:** |
| • For yourself: (1) all sources of salary, fees, commissions, and other earned income greater than $200, (2) honoraria greater than $200, and (3) other non-investment income such as scholarships, prizes, and gambling income greater than $200<br>• For your spouse: (1) all sources of salary, fees, commissions, and other earned income greater than $1,000, and (2) honoraria greater than $200 | • Dependent child's earned income<br>• Veterans' benefits<br>• Federal Government salary<br>• Social Security benefits |

### Important Definitions

| |
|---|
| **Diversified Mutual Fund** – A mutual fund that does not have a stated policy of concentrating its investments in one industry, business, or single country other than the United States. |
| **Sector Mutual Fund** – A mutual fund that concentrates its investments in an industry, business, single country other than the United States, or bonds of a single state within the United States. |
| **Dependent Child** – A son, daughter, stepson or stepdaughter who is either unmarried and under age 21 and living in the filer's house, **or** considered dependent under the U.S. tax code. |

**Reportable Information –** Go to the last page to see examples of how to report assets and income.

| **Specific stock, bond, sector mutual fund, type/location of real estate, etc.** *(Indicate the full name of each specific asset or investment. You may add the ticker symbol to the full name.)*<br>**Name of Employer or Business; Source of Fees, Commissions, or Honoraria** *(Include brief description.)*<br>You may distinguish any entry for a family member by preceding it with S for spouse, DC for dependent child, or J for jointly held. | **No longer held** |
|---|---|
| 1 | ☐ |
| 2 | ☐ |
| 3 | ☐ |
| 4 | ☐ |
| 5 | ☐ |

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| **Employee's Name (*Print last, first, middle initial)*** | **Page Number** |
|---|---|
| | |

## Part I: Assets and Income

### Continuation Page

| **Specific stock, bond, sector mutual fund, type/location of real estate, etc. (***Indicate the full name of each specific asset or investment. You may add the ticker symbol to the full name.)*<br>**Name of Employer or Business; Source of Fees, Commissions, or Honoraria** *(Include brief description.)*<br>You may distinguish any entry for a family member by preceding it with S for spouse, DC for dependent child, or J for jointly held. | **No longer held** |
|---|---|
| 1 | ☐ |
| 2 | ☐ |
| 3 | ☐ |
| 4 | ☐ |
| 5 | ☐ |
| 6 | ☐ |
| 7 | ☐ |
| 8 | ☐ |
| 9 | ☐ |
| 10 | ☐ |
| 11 | ☐ |
| 12 | ☐ |
| 13 | ☐ |
| 14 | ☐ |
| 15 | ☐ |
| 16 | ☐ |
| 17 | ☐ |
| 18 | ☐ |
| 19 | ☐ |
| 20 | ☐ |

| **Employee's Name (*Print last, first, middle initial)*** | **Page Number** |
|---|---|
| | |

## Part II: Liabilities

| **Report for Yourself, Spouse, and Dependent Child:** | **Do Not Report:** |
|---|---|
| • A liability over $10,000 owed at any time during the reporting period, other than a loan from a financial institution or business entity granted on terms made available to the general public<br>• A loan over $10,000 from an individual, such as a friend or a business associate | • Any liability, such as a mortgage, a student loan, or a credit card account, from a financial institution or business entity granted on terms made available to the general public<br>• Loans secured by automobiles, household furniture, or appliances, unless the loan exceeds the purchase price of the item it secures<br>• Liabilities that you owe to your spouse or to the parent, sibling, or child of you, your spouse, or your dependent child |

**Reportable Information** – Go to the last page to see examples of how to report liabilities.

| **Name of creditor** *(include city and state where creditor is located)* | **Type of liability** *(personal loan, margin account, etc.)* |
|---|---|
| 1 | |
| 2 | |

## Part III: Outside Positions

| **Report for Yourself:** | **Do Not Report:** |
|---|---|
| • All positions outside the U.S. Government held at any time during the reporting period, whether or not you were compensated and whether or not you currently hold that position. Positions include an officer, director, employee, trustee, general partner, proprietor, representative, executor, or consultant of any of the following:<br>- Corporation, partnership, trust, or other business entity<br>- Non-profit or volunteer organization<br>- Educational institution | • Any position with a<br>- Religious entity<br>- Social entity<br>- Fraternal entity<br>- Political entity<br>• Any position held by your spouse or dependent child<br>• Any position that you hold as part of your official duties |

**Reportable Information** – Go to the last page to see examples of how to report outside positions.

| **Organization** *(include city and state where organization is located)* | **Type of organization** | **Position** | **No longer held** |
|---|---|---|---|
| 1 | | | ☐ |
| 2 | | | ☐ |
| 3 | | | ☐ |
| 4 | | | ☐ |
| 5 | | | ☐ |
| 6 | | | ☐ |

| **Employee's Name (*Print last, first, middle initial*)** | **Page Number** |
|---|---|
| | |

## Part IV: Agreements or Arrangements

| **Report Your Agreements or Arrangements for:** | **Do Not Report:** |
|---|---|
| • Continuing participation in an employee pension or benefit plan maintained by a former employer<br>• A leave of absence<br>• Future employment, including date you accepted employment offer<br>• Continuation of payment by a former employer (including severance payments) | • Any agreement or arrangement related to your employment by the Federal Government<br>• Spouse's and dependent child's agreements or arrangements |

**Reportable Information** – Go to the last page to see examples of how to report agreements and arrangements.

| **Entity with which you have an agreement or arrangement** *(include city and state where entity is located)* | **Terms of Agreement or Arrangement** |
|---|---|
| 1 | |
| 2 | |
| 3 | |
| 4 | |

## Part V: Gifts and Travel Reimbursements

**Fill out this part only if you are filing an Annual Report. If you are a new entrant or an SGE, skip this part.**

| **Report for Yourself, Spouse, and Dependent Child:** | **Do Not Report:** |
|---|---|
| • Travel-related reimbursements (items such as lodging, transportation, and food) totaling more than $375* from any one source during the reporting period; include where you traveled, the purpose, and date(s) of the trip<br>• Any other gifts totaling more than $375* from any one source during the reporting period<br><br>*If you received more than one gift from one source:<br>1. Determine the value of each item you received from that source<br>2. Ignore each item valued at $150 or less<br>3. Add the value of those items valued at more than $150; if the total is more than $375, then you must list those items on this form | • Anything received from relatives, the U.S. Government, D.C., state, or local governments<br>• Bequests and other forms of inheritance<br>• Gifts and travel reimbursements given to your agency in connection with your official travel<br>• Gifts of hospitality (food, lodging, entertainment) at the donor's residence or personal premises<br>• Anything received by your spouse or dependent child totally independent of their relationship to you |

**Reportable Information** – Go to the last page to see examples of how to report gifts and travel reimbursements.

| **Source** | **Description** |
|---|---|
| 1 | |
| 2 | |
| 3 | |

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# EXAMPLES

## Part I: Assets and Income

| **Specific stock, bond, sector mutual fund, type/location of real estate, etc.** *(Indicate the full name of each specific asset or investment. You may add the ticker symbol to the full name.)*<br>**Name of Employer or Business; Source of Fees, Commissions, or Honoraria** *(Include brief description.)*<br>You may distinguish any entry for a family member by preceding it with S for spouse, DC for dependent child, or J for jointly held. | **No longer held** |
|---|---|
| XYZ Japan Fund *(Example of sector mutual fund)* | ☐ |
| OGE Energy *(Example of stock that produced more than $200 in capital gains)* | ☒ |
| (S) OGC Communications *(Example of stock held in a 401(k) plan)* | ☐ |
| ABC Healthcare Fund *(Example of sector fund held in a variable annuity)* | ☐ |
| Rental Condo, Anchorage, AK *(Example of investment real estate)* | ☐ |
| Bryggadune University – former employer | ☒ |
| (S) Express Medical Clinic – employer | ☐ |
| Association of Accountants – honoraria | ☐ |

## Part II: Liabilities

| **Name of creditor** *(city and state)* | **Type of liability** *(personal loan, margin account, etc.)* |
|---|---|
| John Jones (Denver, CO) | Personal loan from a friend |
| ANW Investment Company (San Francisco, CA) | Margin account |

## Part III: Outside Positions

| **Organization** *(city and state)* | **Type of organization** | **Position** | **No longer held** |
|---|---|---|---|
| Bryggadune University (Memphis, TN) | Educational institution | Professor | ☒ |
| ISK Family Trust (Boynton Beach, FL) | Family Trust | Trustee | ☐ |
| Scenic Rivers Association (Nashville, TN) | Non-profit environmental organization | Member, Board of Directors | ☒ |

## Part IV: Agreements or Arrangements

| **Entity with which you have an agreement or arrangement** *(include city and state where entity is located)* | **Terms of Agreement or Arrangement** |
|---|---|
| Dee, Jones & Smith (San Diego, CA) | Will receive pension benefits (defined benefit plan) *(Example of continuing participation in an employee pension or benefit plan by a former employer)* |
| Hartford & Brown (San Diego, CA) | Employment agreement with Hartford & Brown. Starting work as attorney in July 2012. Entered into agreement in October 2011. (*Example of agreement for future employment)* |

## Part V: Gifts and Travel Reimbursements

| **Source** | **Description** |
|---|---|
| Dee, Jones & Smith | Leather briefcase *(Example of a gift totaling more than $375 from one source)* |
| CGH Culinary Institute | Airline ticket, hotel room, and meals incident to culinary seminar in Tokyo, Japan from May 1-5, 2011 *(Example of travel reimbursement)* |