OGE Form 450, 5 CFR Part 2634, Subpart I
U.S. Office of Government Ethics (2/96)

Form Approved:
OMB No. 3209-

Executive Branch CONFIDENTIAL FINANCIAL DISCLOSURE REPORT

Employee's Name *(Last, first, middle initial)*	Position/Title	Grade	Reporting Status: ☐ New entrant ☐ Annual
Agency	Branch/Unit and Address	Work Phone	If New Entrant, Date of Appointment
Check box if special Government employee (SGE) ☐	If an SGE, Home Address *(Number, Street, City, State and ZIP Code)*		
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

Date Received by Agency	*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 "comments" box below).*	Signature and Title of Supervisor/Other Intermediate Reviewer *(If agency requires)*	Date
Signature of Agency's Final Reviewing Official and Title	Date	Comments of Reviewing Officials (Check box if continued on reverse) ☐	

Part I: Assets and Income

None ☐

Identify for you, your spouse, and dependent children: 1) asset with a fair market value exceeding $1,000 at the close of the reporting period or producing income such as salaries, fees, honoraria; (other than U.S. Government salary or retirement benefits, such as the Thrift Savings Plan) which generated over $200 in income during the reporting period. Earned income sources of your spouse must be reported if greater than $1,000 (greater than $200 for honoraria). No earned income needs to be reported for dependent children.

Assets include (but are not limited to): stocks, bonds, tax shelters, real estate, mutual funds, pensions, annuities, IRAs, trusts, commodity futures, trades and businesses, and partnership interests.

Exclude your personal residence, unless you rent it out, and deposit accounts in financial institutions. See instructions for additional exclusions.

Use copies of blank pages for continuation

	Assets and Income Sources *(Identify specific employer, business, stock, bond, mutual fund, type/location of real estate, etc.)*	(X) if no longer held	Nature of Income *(Rent, interest, dividends, capital gains, salary, etc.)*	Date *(Only for honoraria)*
Examples	Rental Condo, Anchorage, Alaska		Rent	
	Dee, Jones & Smith, Hometown, USA	X	Salary	
	(S) Alexandria medical clinnic, Alexandria, VA		Salary	
	Franklin Equity mutual Fund		Dividends/Capital Gains	
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

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Employee's Name *(Last, first, middle initial)*	Work Phone

Part II: Liabilities

None ☐

Report liabilities over $10,000 owed to any one creditor at any time during the reporting period (over $10,000 at the end of the period if revolving charge accounts) by you, your spouse, and dependent children. Exclude a mortgage on your personal residence unless it is rented out; loans secured by automobiles, household furniture or appliances; and liabilities owed to a spouse, dependent child, or parent, brother, sister or child of you or your

Creditors *(Name and address)*		Type of Liability *(Mortgage, promissory note, etc.)*
Example	First Alaska Bank, Anchorage, Alaska	Mortgage on rental property in Anchorage, AK
1		
2		
3		

Part III: Outside Positions

None ☐

Report any positions, whether or not compensated, which you held outside the U.S. Government during the reporting period. Positions include (but are not limited to) an employee, officer, director, trustee, general partner, prop- rietor, or consultant for a business, non-profit or labor organization, or educational institution. Exclude positions with religious, social, fraternal, or political entities or those solely of an honorary nature. You need not report any positions of your spouse or dependent children.

Organization *(Name and address)*		Type of Organization	Position	(X) if no longer held
Example	Dee, Jones & Smith, Hometown, USA	Law Firm	Associate	X
1				
2				
3				
4				

Part IV: Agreements and Arrangements

None ☐

Report your agreements or arrangements for current or future employment, leaves of absence, continuation of payment by a former employer (including severance payments), or continuing participation in an employee benefit plan.

You need not report agreements or arrangements of your spouse or dependent children.

Terms of Any Agreement or Arrangement		Parties	Date
Example	Will receive retained pension benefits (independently managed, fully, funded, defined contribution plan)	Dee, Jones & Smith, Hometown, USA	12/95
1			
2			
3			

Part V: Gifts and Travel Reimbursements

Do not complete this part if you are a new entrant or a special Goverment employee (SGE)

None ☐

Report for you, your spouse, and dependent children, gifts or travel reimbursements you have received from one source totaling $250 or more. Exclude anything valued at $100 or less; anything received by your spouse or dependent child totally independent of their relationship to you; anything from a relative or from the U.S. Government; anything given to your agency in connection with your official travel; and food, lodging, or entertainment received as personal hospitality at the donor's

Source		Description *(For travel-related items, include itinerary)*	Date
Example	Dee, Jones & Smith, Hometown, USA	Leather briefcase as a departing gift	12/95
1			
2			
3			
4			