## Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Form Approved: OMB No. 3209 - 0001

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Co Annual Gr	cate number of days)	e if filing extension granted & indk	TIMELLY FILED BY May 15, 2015 (Check box if filling extension granted & indicate number of days.	Timede Filed
the preceding two calendar years and the current calendar year up to the date of films		ide of this sheet)	Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheet)	Comments of Reviewing Officials (
arrangements as of the date of filing.				Use Only
Schedule C, Part II (Agreements or Arrangements).—Show any agreements or	Date (Month, Day, Year)		Signature	Office of Government Ethics
year and the current causinast year up to any date you choose that is within 31 days of the date of filing.	51-8-D		1000 0 X	On the basis of information contained in this report, I conclude that the filer is in compliance with applicable taws and regulations (subject to any comments in the box below).
reporting period is the preceding calendar	Date (Month, Day, Year)	/Reviewing Official	Signature of Designated Agency Expics Official/Reviewing Official	Agency Ethics Official's Opinion
Schedule B-Not applicable.	6/6/15		THE STATE OF THE S	agency)
as of any date you choose that is within 31 days of the date of filing.	Date (Month, Day, Year)		Signature of Other Reviewer	Other Review (If desired by
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	6/11/15			IGENTE: that the statements I have naide contains form and all attached schedules are true, complete and correct to the best of my knowledge.
Vice President:	Date (Month. Day. Year)		Signature of Reporting Individual	Certification
Candidates for President and		h.		
Schedule D is not applicable.  Nominees, New Entrants and	Yes XNo		Name of congressional committee considering nomination Not Applicable	Presidential Nominees Subject to Senate Confirmation
covered by your previous filing and ends at the date of termination. Part II of			Viene of Control of Co	
Termination Filers: The reporting			Principal Deputy Press Secretary (January-June) Press Secretary (Impulpresent)	Position(s) ifeld with the Federal Government During the Proceding 12 Months (If Not Same as Above)
where you must also include the himy year up to the date you file. Part II of Schedule D is not applicable.	202.456	500	1500 Pennsylvania Ave NW Washington DC 20500	(or forwarding address)
The preceding calendar year except Fart I of Schedule C and Part I of Schedule D	Telephone No. (Include Area Code)	Code)	Address (Number, Street, City, State, and ZIP Code)	Location of
Reporting Periods Incumbents: The reporting period is		The White House	Press Secretary	Filing
10 a 5200 lee	Department or Agency (If Applicable)	Department or Ag	Title of Position	Position for Which
than 30 days after the last day of the filing extension period, shall be subject	70	Joshua	Earnest	Individual's Name
after the date the report is required to be filed, or, if an extension is granted, more	iddle Initial	First Name and Middle Initial	Last Name	Reporting
Fee for Late Filing Any individual who is required to file this report and does so more than 30 days	Termination Termination Date (If Applifiler	New Entrant, Nominee, or Candidate	Reporting incumbent Calendar Year Status (Cluck Appropriate Space)	Date of Appointment, Candidacy, Election, or Nomination (Mapth, Dav. Year)

Repo				For your report produvalue in incomment with s	For you amoust than fireport incom actual your s		Examples			1 SAI	2 ROTH FUND	3 RO	4 IRA	5 IRA	6 CHI
Reporting Individual's Name Earnest, Joshua R		Assets and Income	BLOCK A	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 reporting 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).	Central Airlines Common	es Doe Jones & Smith, Hometown, State	Kempstone Equity Fund	IRA: Heartland 500 Index Fund	SAVINGS ACCOUNT: CAPITAL ONE 360	ROTH IRA: AMERICAN CENTURY ULTRA FUND	ROTH IRA: AMERICAN CENTURY INTERNATIONAL GROWTH FUND	IRA: AMERICAN CENTURY INTERNATIONAL	IRA: AMERICAN CENTURY ULTRA FUND	CHECKING ACCOUNT: CAPITOL ONE BANK
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Page Number		Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.		Other	(Specify Type & Actual Amount)		Law Partnership Income \$130,000								
		)" is em.		Date (Mo., Day,	Yr.) Only if Honoraria				     						overname v

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* 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.				WELLS FARGO CHECKING ACCOUNT	RESIDENTIAL RENTAL PROPERTY IN WASHINGTON DC	ROLLOVER IRA: VANGUARD DIVIDEND APPRECIATION INDEX FUND ADM	ROTH IRA: VANGUARD GNMA FUND INVESTOR SHARES	ROTH IRA: VANGUARD EMERGING MARKETS STOCK INDEX FUND ADMIRAL SH	ROTH IRA: VANGUARD DIVIDEND GROWTH FUND			BLOCK A	Assets and Income		Earnest, Joshua R	Reporting Individual's Name
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										Other Income (Specify Type & Actual Amount)			type and amount. If "None (or less than \$201)" is no other entry is needed in Block C for that item.	-	of	Page Number
										Date (Mo., Day, Yr.) Only if Honoraria			)1)" is item.			

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

Leather briefcase (personal friend)
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
<b>EXISES</b> the U.S. Government; given to your agency in connection with official travel; received from relatives; received by your spouse or dependent child totally
*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 with the spouse or dependent children, use the other higher categories of value, as appropriate.
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Transaction Type (x)
None 🔀
SCHEDULE

		SCHEDULE B continued  (Use only if needed)  Sactions    Identification of Assets   Date   Dat	Clase only if needed	*	5 1	15 4	ವ	12	)	10	9	œ	7	6	Vi	4	W	2	ļued			ч	Rep Ear
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Transaction Type (x)  Purchase  Purchase  Exchange  Date  (Mo. Day)	Transaction Type (x)  Purchase Sale Exchange Date S15,000 S15,000 S15,000 S50,000 S50,	\$100,000	S100,000   S100,000   Amount of Frans   S250,000   S250,000   S250,000   S250,000   S1,000,000   S1,000,000   S1,000,000   S1,000,000   S1,000,000   S25,000,000   S25,0	set is solely that of the filer's spouse	i de deservación de la constante de la constan		, , , , , , , , , , , , , , , , , , ,	*******	· ·						1114					on of Assets			SC
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					- PA-MINA VARIO	Pursuant to partnership agreement, w calculated on service performed throu	Status and Ten	II: Agreements or arrangements your agreements or arrangements or benefit plan (e.g. pension, 401k payment by a former employer (in	ategory applies only if the liability is so he spouse or dependent children, mark				WELLS FARGO	RUST	John Jones, Washington, DC	Eiret Dietrict Bank Washington DC	Creditors (Name and Address)	during the reporting period by you, your spouse, or dependent children. Check the highest amount owed during the reporting period. Exclude	Part I: Liabilities Report liabilities over \$10,000 owed to any one creditor at any time	Joshua R	U.S. Office of Government Ethics  Reporting Individual's Name
						Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through $1/00$ .	Status and Terms of any Agreement or Arrangement	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	*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 with the spouse or dependent children, mark the other higher categories, as appropriate.				MORTGAGE ON PERSONAL RESIDENCE	MORTGAGE ON RENTAL PROPERTY, DC	Promissory note	Mortgage on rental property Delaware	Type of Liability	or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.	a mortgage on your personal residence unless it is rented out; loans secured by	Sı	
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						Doe Jones & Smith, Hometown, State		of absence; and (4) future employment. See instructions regarding the reporting of negotiations for any of these arrangements or benefits.  Now	at of the filer				7 YR	30 YR	on demand	25 yrs.	Term if applicable				
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	Source (Name and Address)  Doe Jones & Smith, Hometown, State  Metro University (client of Doe Jones & Smith), Moneytown, State	Compensation ces of more than \$5,000 cor lilation for services provide g period. This includes the firm, partnership, or other		Doe Jones & Smith, Hometown, State	Organization (Name and Address) Nat'l Assn. of Rock Collectors, NY, NY	Positions Held ( positions held during the apprositions include but are not a partner, proprietor, reption, firm, partnership, or o	Reporting Individual's Name Earnest, Joshua R	I.S. Office of Government Ethics
	ith), Moneytown, State	Part II: Compensation in Excess of \$5,000 Pa Report sources of more than \$5,000 compensation received by you or your pusiness 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			nd Address)	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, rustee, general partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise or any non-profit		
	Legal services  Legal services in connection with university construction	l id		Law firm	Type of Organization Non-profit education	nt nt	SCHEDULE D	
	Srief Description of Duties	by One Source Incumbent, Termination Filer, or Vice pou 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.		Partner	Position Held President	organization or educational institution. E <b>xclude</b> positions with religious, social, fraternal, or political entities and those solely of an honorary nature.		
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