

Executive Branch Personnel Public Financial Disclosure Report

Date of Appointment, Candidacy, Election, or Nomination (Month, Day, Year) 08/10/2014	Reporting Status (Check Appropriate Boxes) <input checked="" type="checkbox"/> Incumbent <input type="checkbox"/> New Entrant, Nominee, or Candidate	Calendar Year Covered by Report 2015	Termination Filer <input type="checkbox"/>	Termination Date (If Applicable) (Month, Day, Year)	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.
Reporting Individual's Name Last Name: Koo First Name and Middle Initial: Stacy J.					
Position for Which Filing Title of Position: SAP and Chief of Staff for Presidential Personnel Department or Agency (If Applicable): Presidential Personnel / The White House					
Location of Present Office (or forwarding address) Address (Number, Street, City, State, and ZIP Code): 1600 Pennsylvania Avenue NW, Washington, DC 20500 Telephone No. (Include Area Code): 202-456-1414					
Position(s) Held with the Federal Government During the Preceding 12 Months (If Not Same as Above) Title of Position(s) and Date(s) Held: None					
Presidential Nominees Subject to Senate Confirmation Name of Congressional Committee Considering Nomination: Not Applicable Do You Intend to Create a Qualified Diversified Trust? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Certification 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.					
Other Review (if desired by agency) Signature of Other Reviewer: Rachel Dowell Date (Month, Day, Year): 4/6/2016					
Agency Ethics Official's Opinion 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 of Designated Agency Ethics Official/Reviewing Official: Rachel Dowell Date (Month, Day, Year): 4/8/16					
Office of Government Ethics Use Only Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheet) <div style="text-align: right;">(Check box if filing extension granted & indicate number of days) <input type="checkbox"/></div> <div style="text-align: right;">(Check box if comments are continued on the reverse side) <input type="checkbox"/></div>					

Reporting Individual's Name
 Koo, Stacy J.

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 accounts.

None

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.

Creditors (Name and Address)		Type of Liability	Date Incurred	Interest Rate	Term if applicable	Category of Amount or Value (x)											
Examples			1991 1999	8% 10%	25 yrs. on demand	\$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	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	\$50,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000
1	First District Bank, Washington, DC John Jones, Washington, DC	Mortgage on rental property, Delaware Promissory note															
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.	Doe Jones & Smith, Hometown, State	7/85
1			
2			
3			
4			
5			
6			

SCHEDULE D

Reporting Individual's Name
 Koo, Stacy J.

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.)	
	Nat'l Assn. of Rock Collectors, NY, NY Doe Jones & Smith, Hometown, State				6/92 7/85	Present 1/00
1			Non-profit education Law firm	President Partner		
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

Examples	Source (Name and Address)		Brief Description of Duties
	Doe Jones & Smith, Hometown, State Metro University (client of Doe Jones & Smith), Moneytown, State		
1		Legal services Legal services in connection with university construction	
2			
3			
4			
5			
6			