OGE Form 278 (Rev. 122011) Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT U.S. Office of Government Ethics

Form Approved: ONB No. 3209 - 0001

Date of Appointment, Candidacy, Election. Reporting or Nomination (Month. Day, Year) Status	Incumbent Calendar Year Covered by Report	New Entrant, Nominee, or	Termination Filer	Termination Termination Date (If Appli- Filer Cable) (Nonth, Day, Year)	Fee for Late Filing
	rfare	Candidate		06/17/2016	Any individual who is required to file this report and does so more than 30 day
Reporting	Last Name	First Name and Middle Initial	liddle initial		filed, or, if an extension is granted more
Individual's Name	Leibentuft	Jacob		D.	than 30 days after the last day of the filing extension period, shall be subject
Donision for Miles	Title of Position	Department or Agency (If Applicable)	gency (If Appli	cable)	to a \$200 fee.
Filing	Deputy Assistant to the President/Deputy Director of the NEC	National Economic Council/Executive Office of the President	c Council/Exec	rtive Office of the	Reporting Periods
Location of Present Office	Address (Number, Street, City, State, and ZIP Code) 1420 11th Street NW, Apt. 1, Washington, DC 20001		Telephone No 202-744-6797	Telephone No. (Include Area Code) 202-744-6797	the preceding calendar year except Part II of Schedule C and Part I of Schedule D where you must also include the filing
Position(s) Held with the Federal	Title of Position(s) and Date(s) Held				Schedule D is not applicable,
Covernment During the Preceding 12 Months (If Not Same as Above)					Termination Filers: The reporting period begins at the end of the period covered by your previous filing and ends
Subject	Name of Congressional Committee Considering Nomination Do You Intend to Create a Qualified Diversified Trust?	on Do You Intend to C	reate a Qualifie		at the date of termination. Part II of Schedule D is not applicable.
	Not Applicable	Yes	X		Nominees, New Entrants and
	Signature of Reporting Individual		Date (Month, Day, Year)		Vice President:
made on this form and all attached schedules are true, complete and correct to the best of my knowledge.			7/18	7/18/2016	Schedule A-The reporting period for income (BLOCK C) is the preceding calendar year and the current calendar
Other Review (If desired by	Signature of Other Reviewer		Date (Month, Day, Year)		as of any date you choose that is within all days of the date of filing.
					Schedule B-Not applicable.
Agency Ethics Official's Opinion	Signature of Designated Agency Ethics Official/Reviewing Official	Official	Date (Month, Day, Year)		Schedule C, Part I (Liabilities)-The reporting period is the preceding calendar
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 continents in the box below).	121	= \	10/	10/19/2016	year and the current calendar year up to any date you choose that is within 31 days of the date of filing.
Office of Government Ethics Use Only	Signature		Date (Month. Day, Year)		Schedule C, Part II (Agreements or Arrangements)-Show any agreements or
Comments of Reviewing Officials IIf	Comments of Reviewing Officials iff additional space is required, use the reverse side of this sheet)	heet)			Schedule D -The reporting period is the preceding two calendar years and
report as per like cos 10/19	(Check box if filing extension granted & indicate number of days.	ension granted & indic	ate number of c		the current calendar year up to the date of filing.
4	,			T - T - T	7/16/16
	(Cheek	(Check box if comments are continued on the reverse side)	ontinued on the	: reverse side)	OGE Use Only

OGE Form 278 (Rev. 12/2011)
5 C.F.R. Part 2634
U.S. Office of Government Ethics

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DoubleLine Core Fixed Income I X X X	Vanguard FTSE All-World ex-US	Vanguard MSCI US Total Market 2500 ETF	Templeton Income Global Bond Adv	Vanguard Total Bond Market	Vanguard Short-Term Bond Index Adm	IRA: Heartland 500 Index Fund	Kempstone Equity Fund	S Doe Jones & Smith, Hometown, State	Central Airlines Common	of income which had a fair maring \$1,000 at the report which generated more than \$2 uring the reporting period, toget come. Also report the source and act report dincome exceeding \$200 (ot a U.S. Government). For your spoul ource but not the amount of earn ore than \$1,000 (except report in the fany honoraria over \$200).	For you, your spouse, and dependent children, report each asset held for investment or the	BLOCK A	Assets and Income		Reporting Individual's Name
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OGE Form 278 (Rev. 12/2011) 5 C.F.R. Part 2634 U.S. Office of Government Ethics

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3 of 3 sthan \$20 C for that i				Matthews Asian Growth & Income Instl	Vanguard 500 Index Fund	T. Rowe Price Equity Index 500	Wells Fargo Checking, Savings and Way2Save Account	Vanguard Short-Term Investment Grade Adm	Schwab Treasury Money Fund	Schwab Total Stock Market Index Select	19		BLOCK A			
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OGE Form 278 (Rev. 12/2011) 5 C.F.R. Part 2634

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

	U.S. Office of Government Ethics																		III .
	Reporting Individual's Name Leibenluft, Jacob D.	SCHEDULE B	TU	EB									Page	Page Number		<u></u> 약	7		1
	Part I: Transactions Report any purchase, sale, or exchange	Do not report a transaction involving property used solely as your personal	None																
	children during the reporting period of any		TI.	Transaction Type (x)	on					Amount of Transaction	unt	of Tr	ansa	ction	×				
	real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss.	you, your spouse, or dependent child. Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.	urchase	ale	xchange	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	25,000,001 - 50,000,000	ver 50,000,000	ertificate of ivestiture	ivestitute
	Identificat	Identification of Assets	Pi	Si	E			\$5	\$	\$2	\$3	\$	\$:	S:		\$2		C	1 u
	Example Central Airlines Common		×			2/1/99		L	×	L	L								1
	1 Vanguard FTSE All-World ex-US		×			2/17/16	X		_										L
	² Vanguard FTSE All-World ex-US		×			2/29/16	X												l .
	³ Vanguard Total Bond Market		×			2/29/16	X												l
	4 Vanguard MSCI US Total Market 2500 ETF		×			2/29/16		X											
	⁵ Vanguard MSCI US Total Market 2500 ETF		×			2/17/16	X		_	_									
	*This category applies only if the underlying asse by the filer or jointly held by the filer with the s	*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.	n. If th	ie unc of valu	lerlyii .e, as	ng asset is ei appropriate.	ther h	eld		-									I.
	Part II: Gifts, Reimburse	Part II: Gifts, Reimbursements, and Travel Expenses	S																
21/11/2	For you, your spouse and dependent children, report the source, a brief description, and the value of: (1) gifts (such as tangible items, transportation, lodging, food, or entertainment) received from one source totaling more than \$350 and (2) travelated cash reimbursements received from one source totaling more	· · · · · · · · · · · · · · · · · · ·	S. Gored from the second of th	vernn m rel of th	nent; atives eir re	the U.S. Government; given to your agency in connection with official travel; received from relatives; received by your spouse or dependent child totally independent of their relationship to you; or provided as personal hospitality at the dependent of their relationship to you; or provided as personal hospitality at the dependent of the conference of t	ur ag	ency ur sp u; or I	in co ouse orovi	or d	ctior cper as p	wit iden ersor	h of t chi nal h	ficia ld to lospi	l trantally	vel; , y at			

(2) travel-related cash reimbursements received from one source totaling more than \$350. For conflicts analysis, it is helpful to indicate a basis for receipt, such as personal friend, agency approval under 5 U.S.C. § 4111 or other statutory authority, etc. For travel-related gifts and reimbursements, include travel itinerary, dates, and the nature of expenses provided. Exclude anything given to you by

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 _

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				New Yorker WHCD Cocktail Party	Frank Jones, San Francisco, CA	Nat'l Assn. of Rock Collectors, NY, NY	Source (Name and Address)
				WHCD party at W Hotel in Washington DC for 2016 WHCD	Leather briefcase (personal friend)	e 6/15/99 (personal ac	Brief Description
	2			\$500	\$385	\$500	Value

OGE Form 278 (Rev. 12/2011) 5 C.F.R. Part 2634 U.S. Office of Government Ethics	Do not complete Schedule B if you are a new entrant, nominee, or Vice P	nee,	or V	ice F	residential or Presidential Candidate	tial	or P	esi.	dent	<u>8</u>	Can	did	ate					
Reporting Individual's Name Leibenluft, Jacob D.	SCHEDULE B conti	CO1	continue eeded)	nue	ď							Page	Page Number	nber of		7		
Part I: Transactions																		
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OGE Form 278 (Rev. 12/2011)
5 C.F.R. Part 2634
11 S. Office of Government Ethics

U.S. Office of Government Ethics							
Reporting Individual's Name Leibenluft, Jacob D.	SC	SCHEDULE C				Page Number 6 of	7
Part I: Liabilities Report liabilities over \$10,000 owed	a mortgage on your personal residence unless it is rented out; loans secured by	None X	٦	Cat	Category of Amount or Value	or Value (x)	
during the reporting period by you, your spouse, or dependent children. Check the highest amount owed during the reporting period. Exclude	or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.		0,001 - 5,000	5,001 - 0,000 0,001 - 00,000	50,000 50,001 - 00,000 00,001 - ,000,000	er ,000,000* ,000,001- ,000,000 ,000,001 - 5,000,000	5,000,001 - 0,000,000 er 0,000,000
Creditors (Name and Address)	Type of Liability	Incurred Rate		\$1 \$5 \$5 \$1	\$2 \$5 \$5 \$1	\$1 \$5 \$5	\$5 Ov
First District Bank, Washington, DC	Mortgage on rental property, Delaware	1991 8%	25 yrs.	x			
Examples John Jones, Washington, DC	Promissory note		on demand		×		
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*This category applies only if the liability is swith the spouse or dependent children, mark	*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.	ren. If the liability is t	filer	or a joint liability of the filer	of the filer		
Part II: Agreements or Arrangements Report your agreements or arrangements for: (1) continuing participation in an Report your agreements or arrangements for: (1) continuing participation in an	or Arrangements nents for: (1) continuing participation in an 4011 deferred compensation): (2) continua-	of absence; and (4) future	4) future empl	oyment. See ii	to of those arrangements or benefits	arding the rep	port-
Department of the Control of the Co							
Status and Te	Status and Terms of any Agreement or Arrangement			P.	Parties		Date
Example Pursuant to partnership agreement, v	Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through $1/00$.	artnership share	Doe Jones & Sm	Smith, Hometown, State	tate		7/85
Agreement to join Hillary for America for full-time employment as senior policy advisor	ployment as senior policy advisor		Hillary for America, Brooklyn, NY	a, Brooklyn, NY			05/16
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J.S. Office of Government Ethics				- 40	
Reporting Individual's Name Leibenluft, Jacob D.		SCHEDULE D		Page Number 7 of	7
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	utside U.S. Gover licable reporting period, whether t limited to those of an officer, or essentative, employee, or consult	ent pen- organization or educational r, social, fraternal, or political nature.	institution. Exclude positions with religious entities and those solely of an honorary	with religious nonorary	None T
any corporation, firm, partnership, or other business enterprise or any non-profit	ner business enterprise or any in	on-profit			
Organization (Name and Address)	d Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo.,Yr.)
Nat'l Assn. of Rock Collectors, NY, NY		Non-profit education	President	6/92	Present
Examples Doe Jones & Smith, Hometown, State		Law firm	Partner	7/85	1/00
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Part II: Compensation Report sources of more than \$5,000 com hysiness affiliation for services provided	in Excess of \$5,00 pensation received by you or you directly by you during any one	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 non-profit organization when haviness affiliation for services provided directly by you directly provided the	Do not complete this part if you are an Incumbent, Termination Filer, or Vice Presidential or Presidential Candidate.	part if you lon Filer, or lential Cand	are an r Vice lidate.
the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any other	ames of clients and customers of usiness enterprise, or any other	any services generating a fee or need not report the U.S. Go	payment of more than \$5,000. You vernment as a source.		None
Source (Name and Address)	Address)	Brief	Brief Description of Duties		
Examples Doe Jones & Smith, Hometown, State Metro University (client of Doe Jones & Smith), Moneytown, State	th), Moneytown, State	Legal services Legal services in connection with university construction	iction — — — — — —		
1					
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