

Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Date of Appointment, Candidacy, Election, or Nomination (Month, Day, Year)		07/19/2016		Reporting Status (Check Appropriate Boxes)		Incumbent <input type="checkbox"/>		Calendar Year Covered by Report		New Entrant, Nominee, or Candidate <input checked="" type="checkbox"/>		Termination Date (If Applicable) (Month, Day, Year)		Termination Filer <input type="checkbox"/>		Termination Cable (Month, Day, Year)	
Reporting Individual's Name				LEVI				MICHAEL				A					
Position for Which Filing				SPECIAL ASSISTANT TO THE PRESIDENT				WHO/EOP				Department or Agency (If Applicable)					
Location of Present Office (or Forwarding address)				1600 PENNSYLVANIA AVE, WASHINGTON, DC, 20050				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)				NONE				Title of Position(s) and Date(s) Held									
Presidential Nominees Subject to Senate Confirmation				Name of Congressional Committee Considering Nomination				Do You Intend to Create a Qualified Diversified Trust?				Not Applicable <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>					
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.				Signature of Reporting Individual				Date (Month, Day, Year) 14 August 2016					
Other Review (If desired by agency)				Signature of Other Reviewer				Date (Month, Day, Year)									
Agency Ethics Official's Opinion				Signature of Designated Agency Ethics Official/Reviewing Official				Date (Month, Day, Year)				10/25/16					
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				Date (Month, Day, Year)									
Office of Government Ethics Use Only				Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheet)													
				<p>Technical amendments to report as per Allen CSS 10/25/16</p> <p>-Fiberic Special Assistant to the President for Energy and Economic Policy</p> <p>(Check box if filing extension granted & indicate number of days _____) <input type="checkbox"/></p> <p>(Check box if comments are continued on the reverse side) <input type="checkbox"/></p>													
				Agency Use Only				8/14/16 CSS									
				OGE Use Only													

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 Periods
Incumbents: The reporting period is the preceding calendar year except Part II of Schedule C and Part I of Schedule D where you must also include the filing year up to the date you file. Part II of Schedule D is not applicable.

Termination Filers: The reporting period begins at the end of the period covered by your previous filing and ends at the date of termination. Part II of Schedule D is not applicable.

Nominees, New Entrants and Candidates for President and Vice President:
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 as of any date you choose that is within 31 days of the date of filing.

Schedule B—Not applicable.

Schedule C, Part I (Liabilities)—The reporting period is the preceding calendar year and the current calendar year up to any date you choose that is within 31 days of the date of filing.

Schedule C, Part II (Agreements or Arrangements)—Show any agreements or arrangements as of the date of filing.

Schedule D—The reporting period is the preceding two calendar years and the current calendar year up to the date of filing.

Reporting Individual's Name
LEVI, MICHAEL A

SCHEDULE A

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Assets and Income		Valuation of Assets at close of reporting period								Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.									
BLOCK A		BLOCK B								BLOCK C									
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.		None (or less than \$1,001)								None (or less than \$201)									
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).		None (or less than \$1,001)								None (or less than \$201)									
None <input type="checkbox"/>		None (or less than \$1,001)								None (or less than \$201)									
Examples																			
Central Airlines Common																			
Doe, Jones & Smith, Hometown, State																			
Kempstone Equity Fund																			
IRA: Heartland 500 Index Fund																			
Council on Foreign Relations																			
Sullivan & Cromwell LLP																			
Farallon Capital Management LLC																			
Line Intentionally Left Blank																			
Scior Corporation																			
SAIC Corp																			

* 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.

Reporting Individual's Name
 LEVI, MICHAEL A

SCHEDULE A continued
 (Use only if needed)

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Assets and Income	Valuation of Assets at close of reporting period								Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.			Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria																										
	BLOCK B								Type	BLOCK C				Amount																									
	None (or less than \$1,001)	\$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	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Excepted Investment Fund		Excepted Trust	Qualified Trust	Dividends	Rent and Royalties	Interest	Capital Gains	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	Over \$5,000,000								
1 "The Power Surge," Oxford University Press (value not readily ascertainable)																	X																						
2 TD Bank Checking/Savings Account			X																X																				
3 iShares Core MSCI EAFE ETF				X									X																										
4 iShares U.S. Financials ETF			X										X																										
5 iShares New York Muni Bond ETF			X										X																										
6 SPDR S&P 500 ETF					X								X																										
7 Vanguard FTSE Developed Markets ETF						X							X																										
8 Vanguard S&P 500 ETF							X						X																										
9 Vanguard Total World Stock Index			X										X																										

* 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.

Reporting Individual's Name
 LEVI, MICHAEL A

SCHEDULE A continued

(Use only if needed)

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Assets and Income	Valuation of Assets at close of reporting period										Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.										Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria														
	BLOCK A					BLOCK B					BLOCK C			BLOCK C																						
	Valuation of Assets at close of reporting period					Type			Amount																											
	None (or less than \$1,001)	\$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	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Excepted Investment Fund	Excepted Trust	Qualified Trust	Dividends	Rent and Royalties	Interest	Capital Gains	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	Over \$5,000,000						
1 Vanguard Total Stock Market ETF						X							X																							
2 Vanguard FTSE Emerging Markets ETF				X																																
3 TD Ameritrade Money Market			X											X																						
4 SolarEdge Technologies Inc (Shares)																		X								X										
5 First Solar Inc																	X																			
6 United States Oil Fund LP																	X																			
7 CREF Equity Index R2					X														X																	
8 CREF Global Equities R2						X													X																	
9 CREF Bond Market R2				X															X																	

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Reporting Individual's Name
 LEVI, MICHAEL A

SCHEDULE A continued
 (Use only if needed)

Assets and Income	Valuation of Assets at close of reporting period										Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.										Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria	
	BLOCK B										BLOCK C												
											Type	Amount											
1	TIAA Real Estate																						
2	Vanguard Mid-Cap Growth ETF																						
3	Vanguard High Dividend Yield ETF																						
4	Fidelity 500 Index Inst																						
5	Fidelity Intl Index PR																						
6	Fidelity US Bond IDX IS																						
7	Citibank Checking Account																						
8	Vanguard Bond Index Fund -- Total Bond Market Index Fund																						
9	Vanguard Total Intl Stock Index Fund																						

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Reporting Individual's Name
 LEVI, MICHAEL A

SCHEDULE A continued

(Use only if needed)

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Assets and Income	Valuation of Assets at close of reporting period								Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria		
	BLOCK B											Type	Amount
	None (or less than \$1,001)	\$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	Over \$1,000,000*					
1 Brightsight Group LLC (speaker's bureau)									Dividends				
2 - American Public Power Association									Rent and Royalties				
3 - Investment Management Consultants Association									Interest				
4									Capital Gains				
5									None (or less than \$201)				
6									\$201 - \$1,000				
7									\$1,001 - \$2,500				
8									\$2,501 - \$5,000				
9									\$5,001 - \$15,000				
									\$15,001 - \$50,000				
									\$50,001 - \$100,000				
									\$100,001 - \$1,000,000				
									Over \$1,000,000*				
									\$1,000,001 - \$5,000,000				
									Over \$5,000,000				
									Excepted Investment Fund				
									Excepted Trust				
									Qualified Trust				

* 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.

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

Reporting Individual's Name: **LEVI, MICHAEL A**

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Part I: Transactions

Report any purchase, sale, or exchange by you, your spouse, or dependent children during the reporting period of any 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.

Do not report a transaction involving property used solely as your personal residence, or a transaction solely between you, your spouse, or dependent child. Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.

None

1 2 3 4 5	Identification of Assets	Transaction Type (x)			Date (Mo., Day, Yr.)	Amount of Transaction (x)												
		Purchase	Sale	Exchange		\$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	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Certificate of divestiture	
Example	Central Airlines Common	x			2/1/99			x										

*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 or jointly held by the filer with the spouse or dependent children, use the other higher categories of value, as appropriate.

Part II: Gifts, Reimbursements, and Travel Expenses

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) 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 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 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

1 2 3 4 5	Source (Name and Address)	Brief Description	Value
	Examples: Nat'l Assn. of Rock Collectors, NY, NY	Airline ticket, hotel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty)	\$500
	Frank Jones, San Francisco, CA	Leather briefcase (personal friend)	\$385

Reporting Individual's Name
 LEVI, MICHAEL A

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

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.

None

Examples	Creditors (Name and Address)	Type of Liability	Date Incurred	Interest Rate	Term if applicable	Category of Amount or Value (X)															
						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	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$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	1991	8%	25 yrs. on demand								X								
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

Example	Status and Terms of any Agreement or Arrangement	Parties	Date
1	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
2	I continue to participate in this defined contribution plan. The plan sponsor will not make further contributions after my separation.	Council on Foreign Relations, New York, NY	01/06
3			
4			
5			
6			

Reporting Individual's Name
 LEVI, MICHAEL A

SCHEDULE D

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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

Organization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)
Examples Natl Assn. of Rock Collectors, NY, NY Doe Jones & Smith, Hometown, State	Non-profit education Law firm	President Partner	6/92 7/85	Present 1/00
1 NewWorld Capital LLC	Investment firm	Member, Strategic Advisory Council	06/2009	07/2016
2 Princeton University	University	Member, External Advisory Board, Carbon Mitigation Initiative	06/2009	07/2016
3 Council on Foreign Relations	Think tank	Senior Fellow and Director, Center for Geoeconomic Studies	01/2009	7/2016
4 Scior	Government contractor	Consultant (dates are estimates)	11/2011	3/2016
5 SAIC	Government contractor	Consultant (one time) (dates are estimates)	11/2015	11/2015
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 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

Source (Name and Address)	Brief Description of Duties
Examples Doe Jones & Smith, Hometown, State Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services Legal services in connection with university construction
1 Council on Foreign Relations, New York, NY	Research and writing -- Primary employment
2 Farallon Capital LLC, San Francisco, CA	Seminar presentation on energy markets and policy
3 American Public Power Association, Arlington, VA	Speech on energy markets and policy
4 Oxford University Press, Cambridge, MA	Book royalties
5	
6	