

Executive Branch Personnel Public Financial Disclosure Report

| | | | | | | | | | | | |
|---|--|--|--|--|--|--|--|---|--|---|--|
| Date of Appointment, Candidacy, Election, or Nomination (Month, Day, Year) 01/06/2014 KAC | | Reporting Status (Check Appropriate Boxes) Last Name: MARCUS | | Incumbent <input type="checkbox"/> New Entrant, Nominee, or Candidate <input type="checkbox"/> | | Termination Date (If Applicable) (Month, Day, Year) 08/10/16 | | Termination Filer <input checked="" type="checkbox"/> | | <p>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.</p> <p>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.</p> | |
| Reporting Individual's Name | | First Name and Middle Initial ROBERT | | Department or Agency (If Applicable) EOP | | Telephone No. (Include Area Code) 202-456-1414 | | | | <p>Agency Use Only</p> <p>8/4/2016 KAC</p> <p>OGE Use Only</p> | |
| Position for Which Filing | | Title of Position SPECIAL ASSISTANT TO THE PRESIDENT | | EOP | | | | | | | |
| Location of Present Office (or forwarding address) | | Address (Number, Street, City, State, and ZIP Code) 1600 PENNSYLVANIA AVE NW WASHINGTON DC 20500 | | | | | | | | | |
| 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 | | | | | | | | | |
| Presidential Nominees Subject to Senate Confirmation | | Name of Congressional Committee Considering Nomination | | Do You Intend to Create a Qualified Diversified Trust? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | |
| Certification | | Signature of Reporting Individual | | Date (Month, Day, Year) 08/04/2016 | | | | | | | |
| 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) 9/20/2016 | | | | | | | |
| Office of Government Ethics Use Only | | Signature | | Date (Month, Day, Year) | | | | | | | |
| Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheet) | | | | | | | | | | | |
| | | | | | | | | | | | |

(Check box if filing extension granted & indicate number of days _____)

(Check box if comments are continued on the reverse side)

SCHEDULE A continued
 (Use only if needed)

Reporting Individual's Name
 MARCUS, ROBERT N

| Assets and Income | BLOCK B Valuation of Assets at close of reporting period | | | | | | | | | | | | BLOCK C Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item. | | | | | | | | | | | | | | | | | | | |
|---|--|--------------------|---------------------|----------------------|-----------------------|-----------------------|-------------------------|-------------------|---------------------------|----------------------------|-----------------------------|-------------------|--|--------------------|----------|---------------|---------------------------|-----------------|-------------------|-------------------|--------------------|---------------------|----------------------|-------------------------|-------------------|---------------------------|------------------|---|---|--|--|--|
| | BLOCK B Valuation of Assets at close of reporting period | | | | | | | | | | | | BLOCK C Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item. | | | | | | | | | | | | | | | | | | | |
| | BLOCK B Valuation of Assets at close of reporting period | | | | | | | | | | | | BLOCK C 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 | | | | | | | | | | | | | | | | | | | |
| | 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 | 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 | Other Income (Specify Type & Actual Amount) | Date (Mo., Day, Yr.) Only if Honoraria | | | |
| 1 (DC) CARDINAL HEALTH INC | | X | | | | | | | | | | | X | | | X | | | | | | | | | | | | | | | | |
| 2 (S) CELGENE CORP | | X | | | | | | | | | | | | | | X | | | | | | | | | | | | | | | | |
| 3 (S, DC) COACH INC | | X | | | | | | | | | | | X | | | | | | | | | | | | | | | | | | | |
| 4 (S) COCA COLA COMPANY (THE) | | X | | | | | | | | | | | X | | | | | | | | | | | | | | | | | | | |
| 5 (S, DC) DEXCOM INC | | | | | | | | | | | | | | | | X | | | | | | | | | | | | | | | | |
| 6 (S) FACEBOOK INC CL A | | | | | | | | | | | | | | | | X | | | | | | | | | | | | | | | | |
| 7 (S) FAIR ISAAC INC FORMERLY FAIR ISAAC & CO INC | | X | | | | | | | | | | | X | | | | | | | | | | | | | | | | | | | |
| 8 (DC) FASTENAL CO | | X | | | | | | | | | | | X | | | | | | | | | | | | | | | | | | | |
| 9 (S) GILEAD SCIENCES INC | | 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
 MARCUS, ROBERT N

SCHEDULE A continued
 (Use only if needed)

Page Number

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| BLOCK A Assets and Income | BLOCK B Valuation of Assets at close of reporting period | | | | | | | | | | BLOCK C Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item. | | | | | | | | | | Date (Mo., Day, Yr.) Only if Honorary | | | | | | | | | | | |
|----------------------------------|--|--------------------|---------------------|----------------------|-----------------------|-----------------------|-------------------------|-------------------|---------------------------|----------------------------|--|-------------------|---------------------------|-----------|--------------------|----------|---------------|-----------------|-------------------|-------------------|---|---------------------|----------------------|-------------------------|-------------------|---------------------------|------------------|--|---|--|--|--|
| | BLOCK B Valuation of Assets at close of reporting period | | | | | | | | | | BLOCK C Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item. | | | | | | | | | | | | | | | | | | | | | |
| | BLOCK B Valuation of Assets at close of reporting period | | | | | | | | | | BLOCK C Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item. | | | | | | | | | | | | | | | | | | | | | |
| | 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 | None (or less than \$201) | Dividends | Rent and Royalties | Interest | Capital Gains | \$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 | Other Income (Specify Type & Actual Amount) | Date (Mo., Day, Yr.) Only if Honorary | | | |
| 1 (S) RAPID7 INC COM | X | | | | | | | | | | | | X | | | | | | | | | | | | | | | | | | | |
| 2 S) SHAKE SHACK INC CL A | | X | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 (S) STARBUCKS CORP | | X | | | | | | | | | | | | X | | | | | | | | | | | | | | | | | | |
| 4 (DC) SYSCO CORP | | X | | | | | | | | | | | | X | | | | | | | | | | | | | | | | | | |
| 5 (S) TELADOC INC COM | | X | | | | | | | | | | | | X | | | | | | | | | | | | | | | | | | |
| 6 (S) TIFFANY & CO NEW | | X | | | | | | | | | | | | X | | | | | | | | | | | | | | | | | | |
| 7 (S) VISA INC CL A COMMON STOCK | | | | | | | | | X | | | | | X | | | | | | | | | | | | | | | | | | |
| 8 (S) WISDOMTREE INVESTMENTS INC | | X | | | | | | | | | | | | X | | | | | | | | | | | | | | | | | | |
| 9 (S) WTS GENERAL MOTORS COMPANY | | X | | | | | | | | | | | | X | | | | | | | | | | | | | | | | | | |

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Reporting Individual's Name
 MARCUS, ROBERT N

SCHEDULE A continued
 (Use only if needed)

Page Number

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| Assets and Income | BLOCK B Valuation of Assets at close of reporting period | | | | | | | | | | BLOCK C Amount | | | | | | | | | | Other Income (Specify Type & Actual Amount) | Date (Mo., Day, Yr.) Only if Honoraria | | | |
|---|--|--------------------|---------------------|----------------------|-----------------------|-----------------------|-------------------------|-------------------|---------------------------|----------------------------|-----------------------------|-------------------|---------------------------|-----------------|-------------------|-------------------|--------------------|---------------------|----------------------|-------------------------|--|--|-------------------|---------------------------|------------------|
| | 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 | 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 |
| | Type | | | | | | | | | | Type | | | | | | | | | | | | | | |
| | Dividends | | | | | | | | | | Dividends | | | | | | | | | | | | | | |
| | Rent and Royalties | | | | | | | | | | Rent and Royalties | | | | | | | | | | | | | | |
| | Interest | | | | | | | | | | Interest | | | | | | | | | | | | | | |
| | Capital Gains | | | | | | | | | | Capital Gains | | | | | | | | | | | | | | |
| | Qualified Trust | | | | | | | | | | Qualified Trust | | | | | | | | | | | | | | |
| | Excepted Trust | | | | | | | | | | Excepted Trust | | | | | | | | | | | | | | |
| | Excepted Investment Fund | | | | | | | | | | Excepted Investment Fund | | | | | | | | | | | | | | |
| 1 General Electric | | X | | | | | | | | | | X | | | | | | | | | | | | | |
| 2 Insulet | | X | | | | | | | | | | X | | | | | | | | | | | | | |
| 3 PURE Bioscience | X | | | | | | | | | | | X | | | | | | | | | | | | | |
| 4 Capital One Savings Account | | X | | | | | | | | | | X | | | | | | | | | | | | | |
| 5 Congressional Federal Credit Union Checking and Savings | | X | | | | | | | | | | X | | | | | | | | | | | | | |
| 6 USAA Joint Checking with Spouse | | X | | | | | | | | | | X | | | | | | | | | | | | | |
| 7 US Savings Bonds | | X | | | | | | | | | | X | | | | | | | | | | | | | |
| 8 (S)USAA Checking and Savings | | X | | | | | | | | | | X | | | | | | | | | | | | | |
| 9 (S) Sullivan Family Discretionary Trust Income | | | | | | | | | | | | | | | | | | | | | X | | | | Income Only |

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

Reporting Individual's Name
 MARCUS, ROBERT N

SCHEDULE B continued
 (Use only if needed)

Page Number
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Part I: Transactions

| Line Number | 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 | | | |
| 1 | TWILIO INC | X | | | 06/23/2016 | X | | | | | | | | | | | | | | |
| 2 | TWILIO INC | | X | | 06/23/2016 | | X | | | | | | | | | | | | | |
| 3 | (S) GILEAD SCIENCES INC | | X | | 06/29/2016 | | X | | | | | | | | | | | | | |
| 4 | (S) MOBILEYE N V ORD SHS | X | | | 03/17/2016 | X | | | | | | | | | | | | | | |
| 5 | (S) MOBILEYE N V ORD SHS | | X | | 06/07/2016 | | X | | | | | | | | | | | | | |
| 6 | (S) LENDINGCLUB CORPORATION COM | | X | | 05/09/2016 | | X | | | | | | | | | | | | | |
| 7 | (S) SEATTLE GENETICS INC | | X | | 05/06/2016 | | X | | | | | | | | | | | | | |
| 8 | (S) BAXALTA INCORPORATED | | X | | 04/05/2016 | | X | | | | | | | | | | | | | |
| 9 | (S) CELGENE CORP | | X | | 03/31/2016 | | X | | | | | | | | | | | | | |
| 10 | (S) GILEAD SCIENCES INC | | X | | 03/31/2016 | | X | | | | | | | | | | | | | |
| 11 | (S) GILEAD SCIENCES INC | | X | | 01/29/2016 | | X | | | | | | | | | | | | | |
| 12 | (S) TELADOC INC COM | X | | | 06/29/2016 | X | | | | | | | | | | | | | | |
| 13 | (S) GRUBHUB INC COM | X | | | 06/07/2016 | X | | | | | | | | | | | | | | |
| 14 | (S) NEOGENOMICS INC | | X | | 05/11/2016 | | X | | | | | | | | | | | | | |
| 15 | (S) FACEBOOK INC CL A | X | | | 04/07/2016 | X | | | | | | | | | | | | | | |
| 16 | (S) FAIR ISAAC INC FORMERLY FAIR ISAAC & CO INC | X | | | 03/31/2016 | X | | | | | | | | | | | | | | |

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

Reporting Individual's Name
 MARCUS, ROBERT N

SCHEDULE B continued
 (Use only if needed)

Page Number
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Part I: Transactions

| Line | 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 | | |
| 1 | (s) DEXCOM INC (DXCM) | X | | | 03/10/2016 | X | | | | | | | | | | | | | |
| 2 | (s) INSULET CORPORATION (PODD) | X | | | 03/10/2016 | X | | | | | | | | | | | | | |
| 3 | (s) AMAZON.COM INC (AMZN) | X | | | 03/10/2016 | X | | | | | | | | | | | | | |
| 4 | (s) APPLE INC (AAPL) | X | | | 03/10/2016 | X | | | | | | | | | | | | | |
| 5 | (s) DEXCOM INC (DXCM) | X | | | 03/10/2016 | X | | | | | | | | | | | | | |
| 6 | (s) INSULET CORPORATION (PODD) | X | | | 03/10/2016 | X | | | | | | | | | | | | | |
| 7 | (s) DEXCOM INC (DXCM) | X | | | 02/16/2016 | X | | | | | | | | | | | | | |
| 8 | (s) WISDOMTREE INVESTMENTS INC (WETF) | X | | | 01/29/2016 | X | | | | | | | | | | | | | |
| 9 | (s) FACEBOOK INC CL A (FB) | X | | | 01/05/2016 | X | | | | | | | | | | | | | |
| 10 | (s) GILEAD SCIENCES INC (GILD) | | X | | 06/29/2016 | | X | | | | | | | | | | | | |
| 11 | (s) MOBILEYE N V ORD SHS (MBLY) | | X | | 06/07/2016 | | X | | | | | | | | | | | | |
| 12 | (s) LENDINGCLUB CORPORATION COM (LC) | | X | | 05/09/2016 | | X | | | | | | | | | | | | |
| 13 | (s) SEATTLE GENETICS INC (SGEN) | | X | | 05/06/2016 | | X | | | | | | | | | | | | |
| 14 | (s) BAXALTA INCORPORATED (BXLTY) | | X | | 04/05/2016 | | X | | | | | | | | | | | | |
| 15 | (s) CELGENE CORP (CELG) | | X | | 03/31/2016 | | X | | | | | | | | | | | | |
| 16 | (s) GILEAD SCIENCES INC (GILD) | | X | | 03/31/2016 | | X | | | | | | | | | | | | |

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

Reporting Individual's Name
 MARCUS, ROBERT N

SCHEDULE B continued
 (Use only if needed)

Page Number
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Part I: Transactions

| | Identification of Assets | Transaction Type (S) | | | 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 | \$1,000,001 - \$2,500,000 | \$2,500,001 - \$5,000,000 | \$5,000,001 - \$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 | |
| 1 | (S) GILEAD SCIENCES INC (GILD) | | X | | 01/29/2016 | X | | | | | | | | | | | | | | |
| 2 | American Capital Agency Corp REIT | | X | | 02/01/2016 | X | | | | | | | | | | | | | | |
| 3 | Insulet (PODD) | X | | | 01/12/2016 | X | | | | | | | | | | | | | | |
| 4 | Insulet (PODD) | X | | | 05/04/2016 | X | | | | | | | | | | | | | | |
| 5 | Insulet (PODD) | | X | | 8/04/2016 | | X | | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | | | | | | | | |
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| 15 | | | | | | | | | | | | | | | | | | | | |
| 16 | | | | | | | | | | | | | | | | | | | | |

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Reporting Individual's Name
 MARCUS, ROBERT N

SCHEDULE C

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) | | | | | | | | | | | | | | |
|----------|---|--|---------------|---------------|----------------------|---------------------------------|---------------------|----------------------|-----------------------|-------------------------|---------------------------|----------------------------|-----------------------------|-----------------------------|-----------------------------|------------------------------|----------------------|--|--|--|
| | | | | | | \$10,000 - \$15,000 | \$15,000 - \$50,000 | \$50,000 - \$100,000 | \$100,000 - \$500,000 | \$500,000 - \$1,000,000 | \$1,000,000 - \$5,000,000 | \$5,000,000 - \$10,000,000 | \$10,000,000 - \$25,000,000 | \$25,000,000 - \$50,000,000 | \$50,000,000 - \$75,000,000 | \$75,000,000 - \$100,000,000 | (Over \$100,000,000) | | | |
| 1 | First District Bank, Washington, DC John Jones, Washington, DC | Mortgage on rental property, Delaware Promissory note | 1991 1999 | 8% 10% | 25 yrs. on demand | | | | | | | | | | | | | | | |
| 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.

| 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, Home town, State | 7/85 |
| 2 | Agreement with McBee Strategic Consulting, Inc. to begin employment starting September 7, 2016. | McBee Strategic Consulting, Inc. Washington, DC | 7/16 |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |

Reporting Individual's Name
 MARCUS, ROBERT N

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

| Examples | Organization (Name and Address) | | Type of Organization | Position Held | From (Mo., Yr.) To (Mo., Yr.) | |
|----------|--|----------------------------------|----------------------|---------------|-------------------------------|--------------|
| | Natl Assn. of Rock Collectors, NY, NY Doc. Jones & Smith, Hometown, State | Non-profit education Law firm | | | President Partner | 6/92 7/85 |
| 1 | | | | | | |
| 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 Doc Jones & Smith), Hometown, State | Legal services Legal services in connection with university construction | |
| 1 | | | |
| 2 | | | |
| 3 | | | |
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| 6 | | | |