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

## Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Form Approved: OMB No. 3209 - 0001

OGE Use Only	(Check box if comments are continued on the reverse side)	(Check box if comments ar	
Agency Use Only			
of filing.	dicate number of days 90_)	(Check box if filing extension granted & indicate number of days	
the preceding two calendar years and the current calendar year up to the date		Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheet)	Comments of Reviewing Officials (h
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 calculating year up to any date you choose that is within 31 day of the date of filing.	S/19/16	Tache Dowell	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).
Schedule C, Part I (Liabilities)—The reporting period is the preceding calendar	Date (Month, Day, Year)	Signature of Designated Agency Ethics Official/Reviewing Official	Agency Ethics Official's Opinion
Schedule B-Not applicable.			(If desired by 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
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	4/26/16		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.
Vice President:	Date (Month, Day, Year)	Signature of Reporting Individual	Certification
Candidates for President and			
Nominees, New Entrants and	∑ ₹	Not Applicable Yes	to Senate Confirmation
Schedule D is not applicable.	Do You Intend to Create a Qualified Diversified Trust?	Name of Congressional Committee Considering Nomination Do You Intend to	
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		Title of Position(s) and Date(s) Held  None.	Position(s) Held with the Federal Government During the Preceding 12 Months (If Not Same as Above)
where you must also include the filing year up to the date you file. Part II of Schedule D is not applicable.	2024561414	1600 Pennsylvania Ave NW Washington, DC 20500	Office g address)
II of Schedule C and Part I of Schedule D	Telephone No. (Include Area Code)	Address (Number, Street, City, State, and ZIP Code)	Location of
Reporting Periods Incumbents: The reporting period is		Special Assistant to the President for Higher Education Polic White House	Position for Which Filing
to a \$200 fee.	vgency (If Applicable)	Title of Position Department or Agency (If A	
than 30 days after the last day of the filing extension period, shall be subject	Ţ	Menon Ajita	Individual's Name
filed, or, if an extension is granted, more	Middle Initial	Last Name First Name and Middle Initial	Joseph San Control of the Control of
this report and does so more than 30 days	56.000000	priate	
Fee for Late Filing	Termination Termination Date (If Appli- Filer cable) (Month, Day, Year)	Reporting Incumbent Calendar Year New Entrant, Covered by Report Nominee, or	Date of Appointment, Candidacy, Election, or Nomination (Month, Day, Year)

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Reporting In	Reporting Individual's Name											r 0	õ	王	SCHEDULE	ŭ	LI	>															)
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	Assets and Income		190	at c	/al	Valuation of Assets at close of reporting period	tio	po	riir A	SS	ets	od						Che	Income: checked,	ne:	ty]	oth	er	ant	ou Ty i	nt. s n	If "	type and amount. If "None no other entry is needed in	ne	(or Blo	(or less Block C	type and amount. If "None (or less than \$201)" is no other entry is needed in Block C for that item.	m.
	BLOCK A						BLO	BLOCK B																hel	BLOCK C	K C							
For you,		e ,	$\dashv$												-			-	Туре	- 6		1 1	1	1 1	-	1	- Ar	Amount	-un	7	-		
report e producti value exc ing perio in incom with sucl	report each asset neud 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.	70-100	1 \$1,001)	0					- W						ent rund			ng	.0		n ¢201)	11 \$201)							. 22			Other Income	Date (Mo., Day,
For yourself, amount of ear than from the report the sou income of mo actual amour your spouse).	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).		one (or less that	,001 - \$15,000	15,001 - \$50,000 50,001 - \$100,00	100,001 - \$100,00	250,001 - \$230,0	500,001 - \$300,	ver \$1,000,000*	L,000,001 - \$5,0	5,000,001 - \$3,6	25,000,001 - \$25	ver \$50,000,000	cepted Investm	cepted Trust	ualified Trust	vidends	ent and Royaltie	terest	apital Gains	one (or less tha	201 - \$1,000	1,001 - \$2,500	2,501 - \$5,000	5,001 - \$15,000	15,001 - \$50,00	50,001 - \$100,0	100,001 - \$1,00	ver \$1,000,000 <sup>3</sup>	1,000,001 - \$5,0	ver \$5,000,000	Type & Actual Amount)	Only if Honoraria
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Examples	S Doe Jones & Smith, Hometown, State				×	!			-																			<u> </u>	$\vdash$	H		Law Partnership Income \$130,000	
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1 Sefaira	Sefaira (clean energy tech start-up)																															Spouse's Salary	
<sup>2</sup> Line in	Line intentionally left blank.																																
3 Bank	Bank of America Savings		0.0000	×														71			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	×											
4 Capita	Capital One Money Market		100	×																		×											
5 Fidelit	Fidelity Investments												1																				
6 - Fide	Fidelity Adv Equity Growth-CL A				×			_						- V	×					-		×											
* This	This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.	ae is nildı	sole en,	aly t	hat o	of the	her i	ler's high	spo er c	use ateg	or d orie	s of	ndei valı	nt ch	uildr s ap	en. proj	If tl pria	re at	If the asset/inco priate.	/inc	эте	is e	ithe	, th	t of	the	file	me is either that of the filer or jointly held	join	dy l	neld		

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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 by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.	- SFT Ivy Growth Fund	- SFT Advantus Inx 400 Mid-Cp C2	- Ivy VIP Value	- Ivy VIP Intl Core Equity	Minnesota Life Variable	- Fidelity Adv Stock Selector All Cap-CL A	- Fidelity Adv Dividend Growth Fd-CL A	- Fidelity Adv Small Cap-CL A	- Fidelity Adv Intl Capital App-CL A			BLOCK A	Assets and Income		Menon, Ajita T	Reporting Individual's Name	C.S. Office of Government Entites
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If th									-	Dividends			H		lee		
If the asset/income is either that of the filer or jointly held priate.										Rent and Royalties	J		Income: type and amount. If "None checked, no other entry is needed in		if needed	continue	
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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.							MG Trust	Davis Fund	- SFT Ivy Small Cap Growth Fund			BLOCK A	Assets and Income		Menon, Ajita T	Reporting Individual's Name
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l ble										Over \$5,000,000 Other Income (Specify Actual Amount)			Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.		そ	Page Number
										Date (Mo., Day, fy Yr.)  Mondy if Honoraria			\$201)" is at item.		of 🔗	er e

## Part Menon, Ajita T amount of the transaction exceeded \$1,000 futures, and other securities when the real property, stocks, bonds, commodity children during the reporting period of any by you, your spouse, or dependent Report any purchase, sale, or exchange Part I: Reporting Individual's Name \*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. Include transactions that resulted in a loss. Example | Central Airlines Common Transactions Gifts, Reimbursements, Identification of Assets property used solely as your personal to indicate sales made pursuant to a Check the "Certificate of divestiture" block residence, or a transaction solely between certificate of divestiture from OGE. you, your spouse, or dependent child. Do not report a transaction involving and Travel Expenses SCHEDULE None × Purchase Type (x) Sale W Exchange Date (Mo., Day, Yr.) 2/1/99 \$1,001 -\$15,000 \$15,001 -\$50,000 \$50,001 -\$100,000 \$100,001 \$250,000 Amount of Transaction \$250,001 \$500,000 \$500,001 -\$1,000,000 Over \$1,000,000 Page Number \$1,000,001 \$5,000,000 \$5,000,001 -\$25,000,000 X of \$25,000,001 \$50,000,000 Over \$50,000,000 00 Certificate of divestiture

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 \_

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

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		Presidential or Presidential Candidate
Reporting Individual's Name Menon, Ajita T	SCHEDULE B conti	(needed)	Page Number
Part I: Transactions			
		Transaction Type (x)	Amount of Transaction (x)
		rchase  Date (Mo., Day, Yr.)	5,000 - 5,000 - 6,000,000 - 6,
Identif	Identification of Assets	Sal	\$1 \$5 \$5 \$1 \$1 \$2 \$5 \$5 \$1 Ov \$1 \$5 \$2 \$5 \$1 \$1 \$1 \$2 \$5 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1
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*This category applies only if the underlyin	The 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 of the other higher categories of value as annountate	en. If the underlying ass	set is either held

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Reporting Individual's Name Menon, Ajita T	SC	SCHEDULE C	ULE C	30 to 3 Cm27		-			1 45,	7	of		00
Part I: Liabilities Report liabilities over \$10,000 owed	a mortgage on your personal residence unless it is rented out; loans secured by	None _		-			Category of Amount or Value (x)	of Amou	Int or V	alue (x	٥		
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	automobiles, nousehold furniture or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.			<del>-</del>	0,001 - 5,000 5,001 -	0,000 0,001 - 00,000	00,001- 50,000 50,001 -	00,000 00,001 - ,000,000	er ,000,000*	,000,001-	,000,001 - 5,000,000	5,000,001 -	0,000,000
Creditors (Name and Address)	Type of Liability	Incurred	Rate	applicable	\$15 \$15	\$50	\$25	\$50 \$50	Ov	\$1,	\$5,		051
First District Bank, Washington, DC	Mortgage on rental property, Delaware	1991	8%	25 yrs.		×			L				
Examples John Jones, Washington, DC	Promissory note	1999	10%	on demand				×				$\vdash$	
1 Federal Direct Student Loans	Student loans (Combined)	1999	6.8%	30 years			$\times$						
2											0		
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4						-			- X				
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*This category applies only if the liability is s with 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 filer or with the spouse or dependent children, mark the other higher categories, as appropriate.	en. If the li	ability is th	at of the fil	er or a joi	a joint liability of the filer	y of the	filer					
Part II: Agreements or	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	s for: (1) continuing participation in an k, deferred compensation); (2) continuancluding severance payments); (3) leaves	of abser ing of n	of absence; and (4) future employment. See instructions regarding the reporting of negotiations for any of these arrangements or benefits.  Non-	t) future e s for any	mploym of these a	ent. See urrange	instru ments (	ctions or bene	regard efits.	ling ti	he rej	port- None	
Status and Te	Status and Terms of any Agreement or Arrangement						Parties					_	
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.	rtnership sh	are	Doe Jones	& Smith, Hometown, State	ometown.	State						
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4				25									
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⊗ of ⊗	SCHEDULE D	Menon, Ajita T
Page Number		Reporting Individual's Name

## Part I: Positions Held Outside U.S. Government

trustee, general partner, proprietor, representative, employee, or consultant of 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,

> organization or educational institution. Exclude positions with religious, social, fraternal, or political entities and those solely of an honorary nature.

trustee, any cor	trustee, general partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise or any non-profit	ant of nature. on-profit		NC	None X
	Organization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.) To (Mo., Yr.	To (Mo., Yr.)
	Nat'l Assn. of Rock Collectors, NY, NY	Non-profit education	President	6/92	Present
Examples			Partner	7/85	1/00
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## Part II: Compensation in Excess of \$5,000 Paid by One Source

corporation, firm, partnership, or other business enterprise, or any other 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

non-profit organization when Presidential or President 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

X

Do not complete this part if you are an Incumbent, Termination Filer, or Vice Presidential or Presidential Candidate.

			I sardini		
V			Metro University (client of Doe Jones & Smith), Moneytown, State	Doe Jones & Smith, Hometown, State	Source (Name and Address)
			Legal services in connection with university construction	Legal services	Brief Description of Duties

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