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

(Check box if comments are continued on the reverse side)	(Сћеск бох и сопп		
			-
Agency Use Only			
of filing.	(Check box if filing extension granted & indicate number of days)		
Schedule D—The reporting period is 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 Offici	
Arrangements)—Show any agreements or arrangements as of the date of filing.	-	Use Only	
Schedule C, Part II (Agreements or	Signature Date (Month, Day, Year)	Office of Contract Dell	
year and the current calendar year up to any date you choose that is within 31 days of the date of filing.	this Machel Machel S/2/16	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).	
reporting period is the preceding calendar	Signature of Designated Agency Ethics Official/Reviewing Official Date (Month, Day, Year)	Agency Ethics Official's Opinion	
Schedule B-Not applicable.		(li desired by agency)	
as of any date you choose that is within 31 days of the date of filing.	Signature of Other Reviewer Date (Month, Day, Year)	OtherReview	
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	t, 28, 2016	I CERT IFY 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:	Signature of Reporting Individual Date (Month, Day, Year)	Certification	
Candidates for President and			
Nominees, New Entrants and		to Senate Confirmation	
Schedule D is not applicable.	Name of Congressional Committee Considering Nomination Do You Intend to Create a Qualified Diversified Trust?	Proceedings of Mannings Cub	
Termination Filers: The reporting period begins at the end of the period covered by your previous filing and ends	Title of Position(s) and Date(s) Held ng (e)	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.	1600 Pennsylvania Ave NW. Washington DC 20500 2024561414	Present Office (or forwarding address)	
the preceding calendar year except Part If of Schedule C and Part I of Schedule D	Address (Number, Street, City, State, and ZIP Code) Telephone No. (Include Area Code)	Location of	
Reporting Periods Incumbents: The reporting period is	Special Assistant to the President	Position for Which Filing	
to a \$200 fee.	Title of Position Department or Agency (If Applicable)		
than 30 days after the last day of the filing extension period, shall be subject	Patel Rohan S	Individual's Name	
filed, or, if an extension is granted, more	Last Name	Donating the second	
Any individual who is required to file this report and does so more than 30 days	Status Status (Check Appropriate X Roxes) Overred by Report 2015	- Water Special	RD
The second of th	Reporting Incumbent Calendar Year New Entrant.	Date of Appointment, Candidacy, Election,	

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5 C.F.R. Parl 2634
U.S. Office of Government Ethics
Reporting Individual's Nam

Reporting Individual's Name Patel, Rohan		Assets		For you, your spoureport each asset I production of inconvalue exceeding \$1,0 ing period, or which in income during th	For yourself, also r amount of earned in than from the U.S. Go report the source by	actual amount of any your spouse). None	nncome of more trial amount of a your spouse). None Central Air	nncome of mote dia actual amount of a your spouse). None Central Air Examples Doe Jones &	nncome of more that actual amount of a your spouse). None Central Air Examples Doe Jones & Kempstone	Income of mote dia actual amount of a your spouse). None Central Air Examples Doe Jones & Kempstone IRA: Heart	nincome of more trian actual amount of any your spouse). None Central Airlin Examples Doe Jones & Sn Kempstone E IRA: Heartlan	Examples Central Airlines Commo	Examples Doe_Jones & Smit	Examples Doe_Jones& Examples Doe_Jones& Inc.: Heart! Amana Growth Fu Central Air Kempstone IRA: Heart! Goldman Sachs G Maryland 529 Plar (inadvertently omit	Examples Central Airl
ul's Name		s and Income	BLOCK A	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	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).		Central Airlines Common	Central Airlines Common Doe, Jones & Smith, Hometown, State	Central Airlines Common Doe Jones & Smith, Hometown, State Kempstone Equity Fund	Central Airlines Common Doe Jones & Snith, Hometown, State Kempstone Equity Fund IRA: Heartland 500 Index Fund	Resmith, Hometown, State e Equity Fund land 500 Index Fund	rlines Common & Smith, Hometown, State & Equity Fund land 500 Index Fund Ind Frowth Fund	rlines Common k-Smith, Hometown, State e Equity Fund land 500 Index Fund Ind Stock Stock	Central Airlines Common Doe Jones & Smith, Hometown, State Kempstone Equity Fund IRA: Heartland 500 Index Fund Amana Growth Fund Goldman Sachs Growth Fund Goldman Sachs Growth Fund Maryland 529 Plan Global Equity Mkt Index Port (inadvertently omitted in previous reports)	Central Airlines Common Doe Jones & Smith, Hometown, State Rempstone Equity Fund IRA: Heartland 500 Index Fund Amana Growth Fund Goldman Sachs Growth Fund Bank of America Stock Maryland 529 Plan Global Equity Mkt Index Port (Inadvertently omitted in previous reports) Maryland 529 Plan Portfolio 2030 (inadvertently omitted in previous reports)
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		and amount. If "None her entry is needed in	BLOCK C	according to the second	\$5,001 - \$15,000				×	La Maril (Nacolo	101-1201-1201				316/506
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Page Number 2 of		ype and amount. If "None (or less than \$201)" is o other entry is needed in Block C for that item.		Other	(Specify Type & Actual Amount)		Law Partnership Income \$130,000								Spouse Salary
On .)" is em.		Date	Yr.) Only if Honoraria										

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

U.	U.S. Office of Government Ethics	3		1													
7 -	Reporting Individual's Name Patel, Rohan	SCHEDULE	ULE	В	,							Pag	Page Number 3	aber 3 of	5		
	Part I: Transactions Report any purchase, sale, or exchange	Do not report a transaction involving	None X	X								0					
	by you, your spouse, or dependent children during the reporting period of any	property used solely as your personal residence, or a transaction solely between	Tran	Transaction Type (x)						Amou	nt of	Trans	Amount of Transaction (x)	(x)			
	real property, stocks, bonds, commounty futures, and other securities when the amount of the transaction exceeded \$1,000 Include transactions that resulted in a loss.	Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.	ırchase	ile ichange	THE PERSON NAMED IN COLUMN	Date (Mo., Day, Yr.)	,001 - 5,000	5,001 - 0,000 0,001 -	00,000	50,000	00,000 500,001 - ,000,000	er ,000,000*	,000,000 -	5,000,001 -	5,000,001 - 0,000,000	er 0,000,000 rtificate of	vestiture
7	Identificat	Identification of Assets	Pu	Billion			\$1	\$5	\$1	\$2	\$5	Ov	\$1	\$2	\$5	\$5	
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1 .	*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 the ories of	underly value, a	ying ass us appro	set is eit priate.	her h	eld									
brond	Part II: Gifts, Reimbursements,	ments, and Travel Expenses	S														
	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,	the U.S. Government; given to your agency in connection with official travel; ble items, transportation, lodging, urce totaling more than \$350 and 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 or other exclusions.	S. Gove ed from ndent o nor's re- alue fro er exch	rnmen relativ f their sidence m one usions.	t; given es; reco relation d. Also, source,	iven to your agency in connection with official travel; received by your spouse or dependent child totally ationship to you; or provided as personal hospitality at lso, for purposes of aggregating gifts to determine the lso, for purposes worth \$140 or less. See instruction	ır age by you by you by you le ite	ncy i ur spo s or p s of a ms w	n cor ouse or rovid ggre- orth	nnect or dep led as gatin \$140	ion w bende pers g gift or le	with o ent clent clent clent sonal sonal s. S. S. S. S. S. S. S.	officia hild to hosp deterr ee ins	I travel; otally itality at mine the structions		X	
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						Example		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	*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.			DL Cc	DL Cc	DL St		Examples		during the reporting period by you, your spouse, or dependent children. Check the highest amount owed during the reporting period. Exclude	Part I: Liabilities Report liabilities over \$10,000 owed to any one creditor at any time	Patel, Rohan	Reporting Individual's Name
						Pur		II: /our a ge ben payme	tegory e spou			DL Consolidated Unsubsidized Loan	DL Consolodation Subsidized Student Loan	DL Stafford Unsubsidized Student Loan	Johr	First	Credi	he repouse, on he higher he higher higher higher higher higher he repouse he	I: L iabilit ne cre	han	Individ
						rsuant 1		Agreements greements or arrange nefit plan (e.g. pension ent by a former emplo	applie se or d			ted Una	ation Su	nsubsid	John Jones, Washington, DC	First District Bank, Washington, DC	Creditors (Name and Address)	portin or dep hest a portin	iab ies ov		lual's N
						to parti		Tee1 nents of lan (e. lan formation)	epend epend			subsidiz	ubsidize	dized S	Washin	Bank, W	ате ап	g peri pender moun g peri	111t er \$10 at an		lame
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						l receiv h 1/00	Status and Terms of any Agreement or Arrangement	Arrangements for: (1) continuing particity, deferred compensation); deferred compensation);	ely that he othe			Stud	Stud	Stud	Pron	Mort		or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.	a mortgage on your personal residence unless it is rented out; loans secured by automobiles, household furniture		
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								of absence; and (4) future employment. See instructions regarding the reporting of negotiations for any of these arrangements or benefits. Non	ity is th			3.6	3.6	o.8	10%	8%	Rate			EC	
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Patel, Rohan	SCHEDULE D		5 of 5
Part I: Positions Held Outside U.S. Governmen Report any positions held during the applicable reporting period, whether compen-		organization or educational institution. Exclude positions with religious,	ns with religious,
sated 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	F	entities and those solely of an honorary	honorary None X
Organization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.) To (Mo., Yr.)
Nat'l Assn. of Roc	Non-profit education	President	_
Examples Doe Jones & Smith, Hometown, State	Law firm	Partner — — — — — — — — — — — — — — — — — — —	+
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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 where the profit organization when the profit organization where the profit of the profit organization where the profit	\$5,000 Paid by One Source you or your non-profit organization when	Do not complete this part if you are an Incumbent, Termination Filer, or Vice Presidential or Presidential Candidate.	s part if you ar tion Filer, or V idential Candid
the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any other	services generating a fee or need not report the U.S. Go	payment of more than \$5,000. You vernment as a source.	. You None
Source (Name and Address)	Вт	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	uction — — — — — — —	
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