## Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Form Approved: OMB No. 3209 - 0001

(Check box if comments are continued on the reverse side)
(Check box If filing extension granted & indicate number of days
Date (Month, Day, real)
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Do You Intend to Create a Qualified Diversified Trust?
202-456-1414
Telephone No. (Include Area Code)
Department or Agency (If Applicable)
First Name and Middle Initial
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OGE Form 278 (Rev. 12/2011)
5 C.F.R. Part 2634
U.S. Office of Government Ethics
Reporting Individual's Namo

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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.			AA 80/20 - Western Asset Core Plus Bond (WACPX)	AA 80/20 - Vanguard Total International Stock Index (VTSNX)	AA 80/20 - Vanguard Total Bond Index (VBTIX)	AA 80/20 - Vanguard Small Cap Index (VSCIX)	AA 80/20 - Vanguard REIT index (VGSNX)	AA 80/20 - Vanguard Mid Cap Index (VMCIX)	AA 80/20 - Vanguard Emerging Market Stock Index (VEMIX)			BLOCK A	Assets and Income	•	Quillian, Natalie	Reporting Individual's Name
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										Date (Mo., Day, Yr.) Only if Honoraria			)1)" is item.		<del>1</del>	

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

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***					Frank Jones, San Francisco, CA	Examples Nat'l Assn. of Rock Collectors, NY, NY	Source (Name and Address)	authority, etc. For travel-related gifts and reimbursements, include travel itine dates, and the nature of expenses provided. Exclude anything given to you by	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	Part II: Gifts, Reimbursements, and	nis category applies only if the underlying as the filer or jointly held by the filer with the		Vanguard Total Stock Market Portfolio	Vanguard Aggressive Growth Portfolio	Vanguard Aggressive Age-Based Option: Vanguard Aggressive Growth Portfolio	Vanguard 500 Index Portfolio	Example   Central Airlines Common	Identific	near property, stocks, bonds, commonly futures, and other securities when the amount of the transaction exceeded \$1,000 Include transactions that resulted in a loss.	children during the reporting period of any	Part I: Transactions Report any purchase, sale, or exchange by you, your spouse, or dependent	Reporting Individual's Name Quillian, Natalie
					Leather briefcase (personal friend)	Airline ticket, hotel room & meals incident to national conference 6/15/99		authority, etc. For travel-related gifts and reimbursements, include travel itinerary, dates, and the nature of expenses provided. <b>Exclude</b> anything given to you by	ř '	sements, and Travel Expenses	*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.				nguard Aggressive Growth Portfolio			Identification of Assets	Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.		Do not report a transaction involving property used solely as your personal	SCHEDULE
						al confe	Вз		the U.S. Governmen received from relativing the from relativing the donor's residence total value from one for other exclusions.	SS	n. If th ories o		X	×	×	X	.×	Pt	ircháse	Ta Ta	None	ŬL
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						15/99 (personal activity unrelated to duty)	Brief Description		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.		rlying asset is ei , as appropriate		10/13/2014	10/13/2014	10/13/2014	10/13/2014	2/1/99	E	Date (Mo., Day, Yr.)	n		1
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					\$385	\$500	Value	X	<b>ω</b>									O	ver 50,000,000			17
						<u>ˈ</u>													ertificate of vestiture			

Reporting Individual's Name Quillian, Natalie  Part I: Transactions	SCHEDULE B conti
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Identification of Assets	
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5 C.E.R. Part 2634 U.S. Office of Government Ethics						
Reporting Individual's Name					Page Number	
Quillian, Natalie	Si	SCHEDULE C	C	-	10 of 1	11
Part I: Liabilities	a mortgage on your personal residence	None X				
Report liabilities over \$10,000 owed to any one creditor at any time	unless it is rented out; loans secured by automobiles, household furniture			Category of Am	Category of Amount or Value (x)	
during the reporting period by you, valir shouse or dependent children	or appliances; and liabilities owed to				) ;+ ;- ;)	00
Check the highest amount owed during the reporting period. Exclude	See instructions for revolving charge accounts.		0,001 - 5,000 5,001 -	0,000 0,001 - 00,000 00,001- 50,000 50,001 - 00,000	er ,000,000 ,000,000 ,000,000 ,000,000 5,000,00	5,000,00 0,000,00 er 0,000,00
Creditors (Name and Address)	Type of Liability	Incurred Rate	applicable \$ \$	\$5 \$1 \$1 \$2 \$2 \$5	\$1 Ov \$1 \$1 \$5 \$5 \$2	\$5 Ov
Examples First District Bank, Washington, DC	Mortgage on rental property, Delaware	+-	25 yrs.	   <sub>×</sub>   	 	       
John Jones, Washington, DC	Promissory note	10%	on demand	; · >		
2						
	A Company of the Comp					·
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*This category applies only if the liability is so 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 with the spouse or dependent children, mark the other higher categories, as appropriate.	ren. If the liability is	Or Cr	a joint liability 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	for: (1) continuing participation in an ; deferred compensation); (2) continua- icluding severance payments); (3) leaves	of absence; and (4) futuing of negotiations for a	. (4) future employm ons for any of these :	re employment. See instructions rega ny of these arrangements or benefits.	rding the rep	None X
Status and Ter	Status and Terms of any Agreement or Arrangement			Parties		Date
Example Pursuant to partnership agreement, w	Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through 1/00.	ırtnership share	Doe Jones & Smith, H	Hometown, State		7/85
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porting Individual's Name	Pas	Page Number
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## ail I. Fositions held Outside 0.3. Government

any corporation, firm, partnership, or other business enterprise or any non-profit sated or not. Positions include but are not limited to those of an officer, director, Report any positions held during the applicable reporting period, whether compentrustee, general partner, proprietor, representative, employee, or consultant of

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

None X

## 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 corpoi

Example

you directly provided the non-profit organization when

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

services generating a fee or payment of more than \$5,000. You

oration, firm, partnership, or other business enterprise, or any other	need not report the U.S. Government as a source.	None
Source (Name and Address)	Brief Description of Duties	
Iometown, State	Legal services	         
Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services in connection with university construction	