

Executive Branch Personnel Public Financial Disclosure Report

Date of Appointment, Candidacy, Election, or Nomination (Month, Day, Year) 03/1/2013		Reporting Status (Check Appropriate Boxes) <input checked="" type="checkbox"/> Incumbent <input type="checkbox"/> New Entrant, Nominee, or Candidate	Calendar Year Covered by Report 2015	Termination Date (If Applicable) (Month, Day, Year)	Termination Filer <input type="checkbox"/>	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 Individual's Name Rogers		First Name and Middle Initial Melissa		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.		
Position for Which Filing Executive Director, Special Assistant		Department or Agency (If Applicable) White House Office of Faith-based and Neighborhood				
Location of Present Office (for forwarding address) 1600 Pennsylvania Ave NW, 20502		Address (Number, Street, City, State, and ZIP Code)		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)		Title of Position(s) and Date(s) Held				
Presidential Nominee 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 (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) 7/15/16		
Other Review (If desired by agency)		Signature of Other Reviewer		Date (Month, Day, Year) 6/13/16		
Agency Ethics Official's Opinion 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 of Designated Agency Ethics Official/Reviewing Official		Date (Month, Day, Year) 6/14/16		
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 _____) <input type="checkbox"/>		
				Agency Use Only 4/15/2016 KALF OGE Use Only		

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

Reporting Individual's Name
 Rogers, Melissa

SCHEDULE A

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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.																				
	None (or less than \$1,000)	\$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	Over \$25,000,000	Over \$50,000,000	Dividends	Legal 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		
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. 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 <input type="checkbox"/>																															
	Examples																														
	Central Airlines Common																														
	Doc. Jones & Smith, Hometown, State																														
	Kempstone Equity Fund																														
	IRA: Heartland 500 Index Fund																														
1	Corning Inc. (GLW) Restricted Stock																														
2	Corning Inc. (GLW) Stock Options																														
3	Corning Inc. Restricted Cash Performance Units																														
4	Corning Inc. Qualified Cash Balance Plan																														
5	Corning Inc. Non-Qualified Cash Balance Plan																														
6	Vanguard Value Index Fund																														

* 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
 Rogers, Melissa

SCHEDULE A continued
 (Use only if needed)

BLOCK A	BLOCK B	BLOCK C	BLOCK C		Date (Mo., Day, Yr.) Only if Honoraria										
			Type	Amount											
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.									
			None (or less than \$1,000)	\$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 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Other Income (Specify Type & Actual Amount)	Spouse's Salary
1	Corning Incorporated (S)														
2	U.S. Senate Federal Credit Union Checking and Money Market Accounts		X												
3	PNC Bank Checking Account		X												
4	Direxion ALL CAP (KNOW)					X									
5	iShares Biotech (IBB)		X												
6	SBI Cons Discretion (XLTY)		X												
7															
8															
9															

* 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
 Rogers, Melissa

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SCHEDULE D

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.)	
	Nat'l Assn. of Rock Collectors, NY, NY Doe Jones & Smith, Hometown, State				Non-profit education Law Firm	President Partner
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 Doe Jones & Smith), Hometown, State		
1			
2			
3			
4			
5			
6			