

Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Date of Appointment, Candidacy or Nomination (Month, Day, Year)		07/03/2011	
Reporting Individual's Name		Schafer	
Position for Which Filing		Special Assistant to the President, Director Visitors Office	
Location of Present Office (or forwarding address)		1600 Pennsylvania Ave, NW Washington, DC 20502	
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 to Senate Confirmation		<input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Do You Intend to Create a Qualified Diversified Trust?	
Certification		Signature of Reporting Individual Date (Month, Day, Year) 3/11/16	
I CERTIFY that the statements made on this form and all attachments are true, complete and to the best of my knowledge.		Signature of Other Reviewer Date (Month, Day, Year) 5/11/16	
Other Review (if desired by agency)		Signature of Designated Agency Ethics Official/Reviewing Official Date (Month, Day, Year) 5/11/16	
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 (any comments in the box below).		Signature Date (Month, Day, Year) 5/11/16	
Office of Government Use Only		(If additional space is required, use the reverse side of this sheet)	
Comments of Reviewing Official		(Check box if filing extension granted & indicate number of days _____) <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 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.

Agency Use Only

OGE Use Only

Reporting Individual's Name
 Schafer, Elise S

SCHEDULE A

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.										Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria										
	BLOCK B										BLOCK C																					
	Type										Amount																					
	BLOCK A										BLOCK B										BLOCK C											
	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"/>										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										Excepted Investment Fund Excepted Trust Qualified Trust 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											
	Examples																															
	Central Airlines Common																															
	Doe Jones & Smith, Hometown, State																															
	Kempstone Equity Fund																															
	IRA: Heartland 500 Index Fund																															
1	SF Credit Union - Checking Account																															
2	SF Credit Union - Savings Account																															
3	White House Credit Union - Checking Account																															
4	Rental Property - 615 Detroit Street, San Francisco, CA																															
5	Trisco Properties, LLC (Commercial rental property in Bismarck, North Dakota)																															
6	State Farm Universal Life Insurance																															
* 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
 Schaefer, Elise S

SCHEDULE A continued
 (Use only if needed)

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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.	Date (Mo., Day, Yr.) Only if Honoraria										
	BLOCK B										BLOCK C									
BLOCK A	BLOCK B								BLOCK C	Type	Amount								Other Income (Specify Type & Actual Amount)	
	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*			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 American Funds Capital World Growth & Income Fund Class F	X								X											
2 American Funds Investime Company of America Fund Class F		X																		
3 American Funds Growth Fund of America Class F		X																		
4 American Funds Euro Pacific Fund Class F		X																		
5 Columbian Dividen Income Fund A		X																		
6 Franklin Mid Cap Value Fund Class A		X																		
7 Franklin Small Cap Value Fund Class A		X																		
8 FT Franklin Flex Cap Growth Fund Class A		X																		
9 Goldman Sachs Growth Opportunities Fund Class A		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
 Schafar, Ellie S

SCHEDULE A continued
 (Use only if needed)

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.			Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria																					
	BLOCK B										BLOCK C																									
	BLOCK A										Type			Amount																						
	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	Excepted Investment Fund	Excepted Trust	Qualified Trust	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						
1 FT Franklin Income A		X										X							X																	
2 Ally Bank CD			X																X																	
3 Signal Financial Bank			X																X																	
4 Bank of America (Rental Property Account)				X															X																	
5																																				
6																																				
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.

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

SCHEDULE B

Reporting Individual's Name
Schafer, Ellie S

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Part I: Transactions

Report any purchase, sale, or exchange by you, your spouse, or dependent children during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss.

Do not report a transaction involving property used solely as your personal residence, or a transaction solely between you, your spouse, or dependent child. Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.

None

Example	Identification of Assets	Transaction Type (x)	Date (MO, Day, Yr.)	Amount of Transaction (x)												
				\$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	Central Airlines Common	Purchase	2/1/99			x										
2		Sale														
3		Exchange														
4																
5																

*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.

Part II: Gifts, Reimbursements, and Travel Expenses

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 \$335 and (2) travel-related cash reimbursements received from one source totaling more than \$335. 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 \$134 or less. See instructions for other exclusions.

None

Source (Name and Address)	Brief Description	Value
Examples: Nat'l Assn. of Rock Collectors, NY, NY Frank Jones, San Francisco, CA	Airline ticket, hotel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty) Leather briefcase (personal friend)	\$500 \$350
1 Dole Institute of Politics	Rental Car, gas, meals	160.36
2 Dole Institute of Politics	Hotel Room	250.00
3		
4		
5		

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

Reporting Individual's Name
 Schafer, Elie S

SCHEDULE B continued
 (Use only if needed)

Part I: Transactions

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
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16																

*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.

Reporting Individual's Name
 Schafer, Ellie S

SCHEDULE C

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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

Creditors (Name and Address)	Type of Liability	Date Incurred	Interest Rate	Term if applicable	Category of Amount or Value (X)														
					\$10,001 - \$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				
Examples: First District Bank, Washington, DC John Jones, Washington, DC	Mortgage on rental property, Delaware Promissory note	1991	8%	25 yrs. on demand			X												
1 Bismarck National Bank	Mortgage on rental property, North Dakota Tesco Properties, LLC	2011	5.65%	30 yrs				X											
2 NYCB Mortgage Company	Mortgage on rental property, San Francisco	2011	4.5%	30 yrs					X										
3 Sterling Bank and Trust	Line of Credit on rental property, San Francisco	2011	5.25%	30 yrs				X											
4																			
5																			
6																			

* 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.

None

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, Hometown, State	7/85
2			
3			
4			
5			
6			

Reporting Individual's Name
 Schafel, Ellie S

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.)
	Examples	Examples				
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
1	Doe Jones & Smith, Hometown, State	Legal services
2	Metro University (Client of Doe Jones & Smith), Moneytown, State	Legal services in connection with university construction
3		
4		
5		
6		