

Executive Branch Personnel Public Financial Disclosure Report

Date of Appointment, Candidacy, Election, or Nomination (Month, Day, Year)	2/23/2015 <i>YAK</i>	Reporting Status (Check Appropriate Boxes)	<input type="checkbox"/> Incumbent <input type="checkbox"/> New Entrant, Nominee, or Candidate	Termination Filer <input checked="" type="checkbox"/>	Termination Date (if Applicable) (Month, Day, Year)		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	Last Name: Shevlin; First Name and Middle Initial: Paige L; Department or Agency (if Applicable):						
Position for Which Filing	Special Assistant to the President for Economic Policy						
Location of Present Office (or forwarding address)	Address (Number, Street, City, State, and ZIP Code): 1600 Pennsylvania Ave NW Washington DC 20500 <i>YAK</i> Telephone No. (Include Area Code): 202-456-1414 <i>YAK</i>						
Position(s) Held with the Federal Government During the Preceding 12 Months (If Not Same as Above)	Senior Policy Advisor, March 2014 to Feb 2015						
Presidential Nominees Subject to Senate Confirmation	Name of Congressional Committee Considering Nomination: Not Applicable; Do You Intend to Create a Qualified Diversified Trust? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Certification 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.	Signature of Reporting Individual: [Redacted]; Date (Month, Day, Year): 4/18/16						
Other Review (if desired by agency)	Signature of Other Reviewer: [Redacted]; Date (Month, Day, Year):						
Agency Ethics Official's Opinion	Signature of Designated Agency Ethics Official/Reviewing Official: [Redacted]; Date (Month, Day, Year): 7/19/2016						
Office of Government Ethics Use Only	Signature: [Redacted]; Date (Month, Day, Year):						
Comments of Reviewing Officials (if additional space is required, use the reverse side of this sheet)	Late fee waived for termination form. <i>KHC</i> Late fee paid for late transaction reporting p. 8, lines 1-5 and p. 9, lines 1-3. <i>KHC</i>						
					Agency Use Only 4/18/2016 <i>KHC</i>		
					OGE Use Only		

SCHEDULE A

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										BLOCK C													
	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	Over \$25,000,000	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*	\$1,000,001 - \$5,000,000	Over \$5,000,000		
Type	Dividends	Rent and Royalties	Interest	Capital Gains	Expected Investment Fund	Expected Trust	Qualified Trust	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria															
None <input type="checkbox"/>																								
Examples																								
Central Airlines Common																								
Doe Jones & Smith, Hometown, State																								
Kempstone Equity Fund																								
IRA: Heartland 500 Index Fund																								
1 Trust for the benefit of spouse dated 12/1995																								
2 Individual stocks																								
3 Bank of America																								
4 Bank of America (w/ts)																								
5 Berkshire Hathaway																								
6 Intentionally left blank																								

* 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.

SCHEDULE A continued

(Use only if needed)

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.																			
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BLOCK A	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	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	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria			
1 Chesapeake Energy		X											X				X															
2 Coca Cola		X											X				X															
3 Colfax Corp			X														X															
4 Devon Energy		X											X																			
5 Discovery Communications																	X															
6 American International Group																	X															
7 Bank of NY, Mellon																	X															
8 Enstar Group																	X															
9 Exxon Mobile																	X															

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SCHEDULE A continued
 (Use only if needed)

Assets and Income	BLOCK B												BLOCK C														
	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.														
	BLOCK B												BLOCK C														
BLOCK A	BLOCK B												BLOCK C														
	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	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		
1 401k: Spartan Ext Mkt Indx Adv		X											X														
2 401k: Spartan 500 Index Institution			X											X													
3 401k: Pimco Total Return		X												X													
4 Spouse Bank of America Savings Account					X																						
5 401k: Thornburg International Value R5	X																										
6 401k: MEIJX MFS Value R4	X																										
7 401k: Columbia Mid Cap Index Z	X																										
8 401k: Harbor Capital Appreciation Inv	X																										
9 401k: TIAA-CREF Lifecycle 2050 Retire	X																										

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SCHEDULE A continued
 (Use only if needed)

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	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	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			
	Type	Dividends	Rent and Royalties	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Trust													Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria				
1 Morgan Stanley Inst Mid Cap Growth	X																									
2 Columbia Large Cap Index Z	X																									
3 Vanguard Total Stock Market Index Fund		X																								
4 Vanguard Total International Stock Index Fund	X																									
5																										
6																										
7																										
8																										
9																										

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Reporting Individual's Name

SCHEDULE C

Page Number

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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

Examples	Creditors (Name and Address)		Type of Liability	Date Incurred	Interest Rate	Term if applicable 2.5 yrs. on demand	Category of Amount or Value (x)										
	First District Bank, Washington, DC	John Jones, Washington, DC					\$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	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	
1			Mortgage on rental property, Delaware Promissory note	1991 1999	8% 10%			x									
2																	
3																	
4																	
5																	

* 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
	Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through 1/00.			
1	401(k): TIAA-CREF (defined contribution plan) - neither the Brookings Institute or I will make any further contributions.		Doe Jones & Smith, Hometown, State Brookings Institute, Washington, DC	7/85 08/07
2				
3				
4				
5				
6				

Reporting Individual's Name

SCHEDULE D

Page Number

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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.)	
	Nat'l Assn. of Rock Collectors, NY, NY Doe Jones & Smith, Hometown, State				6/92 7/85	Present 1/00
1			Non-profit education Law firm	President Partner		
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.

None

Examples	Source (Name and Address)		Brief Description of Duties
	Doe Jones & Smith, Hometown, State Metro University (Client of Doe Jones & Smith), Moneytown, State		
1			
2			
3			
4			
5			
6			