OGE Form 278 (Rev. 12/2011) 5 C.F.R. Part 2634

## Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Form Approved: OMB No. 3209-0001

U.S. Office of Government Ethics				
Date of Appointment, Candidacy, Election,			ermination Termination Date (If Appli-	Fee for Late Filing
or Nomination (Month, Day, Year)		ominee, or Fil	ler cable) (Month, Day, Year)	Any individual who is required to file
9/4/2013	Boxes) 2013 Ca	andidate		this report and does so more than 30 days after the date the report is required
	Last Name	First Name and Middle Initial		to be filed, or, if an extension is
Reporting Individual's Name	Comey	James B.		granted, more than 30 days after the last day of the filing extension period,
	Title of Position	Department or Agency (If Appl	licable)	shall be subject to a \$200 fee.
Position for Which Filing	Director, Federal Bureau of Investigation	Department of Justice		Reporting Periods Incumbents: The reporting period is
	Address (Number, Street, City, State, and ZIP Code)	Tele	lephone No. (Include Area Code)	the preceding calendar year except Part
Location of Present Office (or forwarding address)	935 Pennsylvania Avenue, NW, Washington, DC 20535	202	2-324-3000	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
on(s) Held with the Federal	Title of Position(s) and Date(s) Held			Schedule D is not applicable.
. vernment During the Preceding 12 Months (If Not Same as Above)				Termination Filers: The reporting period begins at the end of the period
			12.15.	covered by your previous filing and ends
Presidential Nominees Subject to Senate	Name of Congressional Committee Considering Nomination	Do You Intend to Create a Qua	alified Diversified Trust?	at the date of termination. Part II of Schedule D is not applicable.
Confirmation		Yes	No	
Certification	Signature of Reporting Individual	In	ite (Month, Day, Year)	Nominees, New Entrants and Candidates for President and
I CERTIFY that the statements I have	orginature of reporting marvidua	Dat	ne (Monin, Day, Tear)	Vice President:
made on this form and all attached schedules are true, complete and correct to the best of my knowledge.	4		6/9/14	Schedule AThe reporting period for income (BLOCK C) is the preceding calendar year and the current calendar
Other Review	Signature of Other Reviewer	Dat	ite (Month, Day, Year)	year up to the date of filing. Value
(If desired by	FAFA	a Australia	6/10/14	assets as of any date you choose that is within 31 days of the date of filing.
agency)			-,,	Schedule BNot applicable.
Agency Ethics Official's Opinion On the basis of information contained	Signature of Designated Agency Ethics Official/Leviewing Official	Dat	ite (Month. Dav. Year)	Schedule C, Part I (Liabilities)
in this report, I conclude that the filer is in compliance with applicable laws and ations (subject to any comments			1-21-14	The reporting period is the preceding calendar year and the current calendar year up to any date you choose that is
box below).	Signature	Da	ate (Month, Day, Year)	within 31 days of the date of filing.
Office of Government Ethics				Schedule C, Part II (Agreements or
Use Only	Barbara Mullen Rose	_ /	12-30-14	Arrangements)Show any agreements or arrangements as of the date of filing.
Comments of Reviewing Officials (If addition	ional space is required, use the reverse side of this sheet)			Schedule D-The reporting period is
30 Day Extension Granted	•	ox if filing extension granted & inc		the preceding two calendar years and the current calendar year up to the date of filing.
Page grevised and	I substituted in consultation wit	th FBI July 23,	,2014. CKShaw	
J		1		Agency Use Only
				2
		2011	a ma hamana a ma a mana a m	OGE Use Only
		(Check box if comments	ts are continued on the reverse side)	JUL 2 9 2014
Supersedes Prior Editions.				

Reporting Individual's Name  Comey, James B.	SCHEDULE A	Page Number 2 of 16
Assets and Income	Valuation of Assets at close of reporting period  BLOCK B  Income: type and amount. If "None (or less than \$201)" is no other entry is needed in Block C for that item.	checked,
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 come during the reporting period, together 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 acount of any honoraria over \$200 of your spouse).  None	None (or less than \$1,991)   S1,001 - S15,000	Other Income (Mo Dav. Yr.) Type & Actual Amount)  Only if Honoraria
Examples Doe Jones & Smith, Hometown, State  Kempstone Equity Fund  JRA: Heartland 500 Index Fund		Law Partnership Income \$130,000.
Tweedy Browne Global Value - Mutual Fund - IRA	x x	
Alliance Bernstein Income Fund - IRA		
Baton Vance Short Duration Income Fund - IRA		
Albertsons Individual Bond - IRA	x x x x	
Morgan Stanley Indivdual Bond - IRA	x x x	
BBVA US Senior Notes - Individual Bond - IRA	x x x	
* This category applies only if the asset/income is by the filer with the spouse or dependent children, r	solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held nark the other higher categories of value, as appropriate.	

Re	porting Individual's Name		-								00	TTT	3.	TTY	_		· · ·		_			-				<del></del>			سندد	IPag	ze Number		<del></del>	
Co	omey, James B.							., , <u>.</u>			<u>SC.</u>						cont eded)	inu	ied											1 66	o Indition	3 of 1	6	
	Assets and Income		<b>F</b>			uatio e of r						-				Inc no	ome	: typ entr	e an	nd a	moui ded i	nt. I	f "N	lone C fo	(or l	less t at ite	than em.	\$20	)1)"	is ch	hecked,			
	BLOCK A					BL	OCK	C B																	F	BLOC	K C							
			$\prod$														Тур	e								Amo		<u> </u>						
		Note (or less than \$1,14(1)	\$1,001 - \$15,000	\$15.06J - \$58,000	\$50,001 - \$100,000	S100,001 - \$250,000	Sam but 12 Junioral	Over \$1,000,000*	OROSONOSS LEROBOTES	\$5,000,001 - \$25,000,000	925,000,000 - S50,000,000	Over \$50,006,006	Excepted investment Fund	Excepted Trust	Outlified Trust	Dividends	Rent and Royaltres	Interest Fountier of the	None (on loss than \$201)	(YOUR (OF MESS MINER 32/OL)	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$58,000	\$50,001 - \$100,000	\$100,001 \$1,006,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	Over \$5,000,000		Other Income (Specify Type & Actual Amount	,	Date (Mo., D Yr.)  Only Honora	if
	Peabody Energy - Indivdual Bond - IRA	×															7	x			x				,									
2	Alpha Natural Resouces - Individual Bond -	×															,	x		Į,														
3	Alcoa - Individual Bond - IRA	×															,	×		,														
4	FPA Crescent Fund - Mutual Fund					×													_			,											····	
5	Royce Pennsylvania Mutual Fund					X							X						,	۲										<del> </del> -	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>			
6	Vanguard Wellesley Income Fund					×							×										x							1				
7	Yacktman Focused - Mutual Fund					х							X						,	۲														
8	First Trust Exchange Lg Value					×							X								x										,			
1	Wisdom Tree Emerging Markets	х											X														 !							
* 7 by 1	This category applies only if the asset/income is so the filer with the spouse or dependent children, m	olely nark ti	that the of	of the	e file ighe	r's sp r cate	ouse gori	or de	peno value	dent e, as	child appr	ren. opria	If thate.	ie as	set/i	inco	me is	eithe	r tha	t of	the fi	ler o	join	tly h	eld			F0000000	_	<del>-</del>		<u></u>		$\dashv$

U.S. Office of Government Ethics Reporting Individual's Name Page Number SCHEDULE A continued Comey, James B. 4 of 16 (Use only if needed) Assets and Income Valuation of Assets Income: type and amount. If "None (or less than \$201)" is checked, at close of reporting period no other entry is needed in Block C for that item. BLOCK A BLOCK B BLOCK C Type Amount Exerpted Investment Fund Other Date \$25,000,001 - \$50,000,000 Income (Mo., Day, \$5,000,001 - \$25,000,000 \$1,600,001 - \$5,600,000; \$1,000,001 - \$5,000,000 (Specify Yr.) \$500,001 - \$1,000,000 \$100,001 - \$250,000 \$250,001 - \$500,000 Type & Rent and Royating \$50,001 - \$100,000 Over \$1,000,000\* None (or less than Only if Over \$50,000,000 SS0,001 - \$100,000 Actual \$100.001 - \$1,008, \$1,001 - \$15,000 \$15,001 - \$50,000 Over \$1,000,000\* Excepted Trust Qualified Trust \$5,001 - \$15,000 Over \$5,000,000 Amount) Honoraria Capital Gains \$201 \$1.000 \$1,001 - \$2,500 Dividends Interest AGL Resources - Equity Х х 2 AT&T - Equity х х Allergan - Equity х × Aqua America - Equity Х X. Berkshire Hathaway - Equity CSX Corp - Equity Chevron - Equity X. CME Group - Equity х × Coca Cola - Equity 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,

eporting Individual's Name			-			Ś	CHE	EDU	JLE	À	ont	inue	d					•				Page Nu	mber	
Comey, James B.			······································			······································			only if														5 of	16
Assets and Income			Valuation of s							Inc no c	ome:	type entry	and a	mour ded i	ıt, Ii n Ble	f "No	one (e	or le that	ss tha item	n \$2	:01)"	is check	ed,	
BLOCK A			BI	оск Е	3													BL	OCK (	c			•	
	None (or less then \$1,000)	\$1,001 - \$15,000 \$15,001 - \$50,000	\$50,001 - \$100,000 \$100,001 - \$750,000 \$150,001 - \$500,000	SSEO, #61 - \$1,0#6,400	Over \$1,000,000*	\$5,000,001 - \$25,000,000	Over \$50,000,000	Excepted livestment Fund	Excepted Trust Ouglified Trust	Dividends	Typeset Laboration	Gans	None (or less than \$201)	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000		Ores SI 000 000*	0.644	Over \$5,000,000	Ir (S	Other acome pecify ype & actual mount)	Date (Mo., Da Yr.) Only if Honorari
Compass Minerals - Equity	×									×		×				×							<u>.</u>	
Core Labs - Equity	,									x		×					V							
Dominian Resources - Equity	×									x		×					X							
Emerson Electric - Equity	×									x		×					x							_
Exxon Mobile - Equity	×									×		×											<del></del>	
Hormel Foods - Equity	x									×		×				×								
Illinois Tool Works - Equity	×									×		×					×							
Johnson & Johnson - Equity	×									×		×					×							
Kroger - Equity	x			ouse o						x		×				x								

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Comey, James B.						SCII		only			muc	u 									6 of	16
Assets and Income			aluation ose of rep			d		<u></u>	Inc	come: other c	type entry i	and an s need	nount. ed in	If ' Bloc	'None	or l	less t	han i	\$201	l)" is	checked,	
BLOCK A			BLO	СК В			1									Е	BLOCI	КC				
										Тур	e 	1888	3 18	8888	18888		Amo	unt				
	None (or less than \$1,001)	\$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000	\$100.901 - \$250,000 \$250,001 - \$500,000	\$500,000 - \$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 Onalidised Trust	Dividends	Rest and Royalters	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*	\$1,900,001 - \$5,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day Yr.)  Only if Honoraria
Microsoft - Equity	x								×		×				×							
Murphy Oil - Equity	×								×		×				×							-
Nestle - Equity	×								×		x				x							
Norfolk Southern - Equity	×								×		×				X							-
Pepsico Inc Equity	X								×		X				x							
Proctor & Gamble - Equity	×								×		X				×							
Southern Company - Equity									×		×			×								
Total SA ADR - Equity	,								×		×			×								
Union Pacific	×								×		×				X							<del> </del>

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	Assets and Income		а	Val t clos			rting					-				e: typ							r the		em.	\$20	1)" i	is checked,	*****	
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		None (ur less than \$1,001) e1 001 - e14 000	\$15,001 - \$59,000	\$50,001 - \$100,000	S160,403 - \$250,000	\$259,001 - \$500,000	Over \$1,000,000*	\$1,000,047 - \$5,640,046	\$5,000,001 - \$25,000,000	\$25,066,601 - \$50,000,000 Over \$50,000,000	Excepted lavestment Fand	Excepted Trust	Qualified Trust	Dividends	Royalties	Interest	Money (and here about	None (or less than 3207)	\$1.001 - \$2.500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$180,000	\$100,001 - \$1,000,000		\$1,606,901 - \$5,400,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount		Date (Mo., Day, Yr.) Only if Honoraria
1	Verizon Communications - Equity	×												х								¥								
	Westinghouse Air Brake Technology - Equity													×							x									
3	WD-40 Company - Equity	×												×								x								
4	Darling International - Ind. Bond															х														
5	Hewlett Packard - Ind. Bond															x														
6	Markel - Ind. Bond	¥														х			х										_	
7	Petrohawk Energy - Ind. Bond															×	,		×											
8	Teekay LNG Partners - MLP	×												x		x					x									
9	INTENTIONALLY BLANK																													
* · by	This category applies only if the asset/income is the filer with the spouse or dependent children,	solely th mark the	iat of othe	the fil r high	ler's s ier cai	pous legor	e or d ies of	epen valu	dent c e, as a	hildre ipprop	ı. If riate	the a	sset/	ínco	me is	eithe	r th	at of	the f	iler c	r joi	ıtly h	eld				-			

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	Assets and Income		а					Asset ig per							Inc no c	ome	e: ty	pe an	nd a	mou ded	nt. in B	If "N lock	one C fo	(or l	less at ite	than em.	\$20	1)" i	s chec	ked,	
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		None (or less than \$1,001) \$1.001 - \$15.000	\$15,000 - \$58,000	\$50,001 - \$100,000	\$100,401 -5250,000	\$250,001 - \$500,000	SSEE 601 - ST, 3046 (E0)	Over \$1,000,000*	\$5,000,001 - \$25,000,000	\$25,000,001 - \$56,000,000	Over \$50,000,000	Excepted investment Fund	Excepted Trust	Onglifted Trast	Dividends	Rent and Royalties	Interest	Lapital Gains		\$2.001 - \$2.500	000150 X30170	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$190,001 - \$1,400,000	Over S1,000,000*	\$1,500,001 - \$5,000,000	Over \$5,000,000	1	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
1	Enterprise Production Ptnrs - MLP .	×													x		x	X					×							. 12-12	
2	Kinder Morgan - MLP														x		x						×								
3	St. Joe Company	x																X		,	(										
4	Schwab Government Money Fund (SWGXX)							×									х	,	x												
5	Bridgewater Assoc., LP Westport, CT Phantom Equity (profit sharing plan)	X																								х					
8	Lockheed Martin Defined Benefit Plan					х												;	x												
7	JP Morgan Bank Accounts (cash)						×										х			Y	(										
8	Wells Fargo Bank Accounts (cash)					х											х			X										<u>.</u>	
	Personal loan to Mr. and Mrs. Wilson						X											,	x												
by	This category applies only if the asset/income is the filer with the spouse or dependent children,	solely th mark the	at of othe	the f r hig	ler's : her ca	spou itego	se or ries (	deper of val	nden ue, a	t chi s app	ldren propi	. If iate.	the a	sset/	inco	me is	eith	er tha	at of	the f	iler o	or joi	ntly l	ield							

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	ney, James B.	:	•							·				se o					Iuc													9 of 10	
	Assets and Income						ion rep				d			*	7	In no	con	ie: t	ype itry i	and	am eed	oun ed ir	t. If	f"N ock	one C fo	or l	iess t at ite	than	\$20	1)"	is checke	d,	
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																	T	ype	Teesees		B000000	0	10000000		No.		Am	oun	t		T		
		Name for Benithan S1,00(1)	\$1,001 - \$15,000	\$15,001-550,000	S50,001 - \$106,000	Simple: SZSnied	\$250,001 - \$500,000	CATTOLICES - LIMITARS	Over \$1,000,000*	St.1600.081 \$5.460,000	\$5,000,001 - \$25,000,000	5.25, 1961, 401 - \$50/#16, 1004	Over 550,000,000	Excepted tayesment Fund	Antiqued Trust	Dividends	Rent and Royalims	Interest	Capital Cards	None (or less than \$201)	\$203 - \$1,000	\$1,001 - \$2,500	S. 301 - 35,946.	\$5,001 - \$15,000	\$15,001~\$x4.000	S50,001 - \$100,000	STREE (001 - ST. 0.000, UHH)	Over \$1,006,090*	SI, E00, 501 - 55, 190, 10E	Over \$5,000,000	In (S <sub>I</sub> T <sub>1</sub>	ther come secify pe & ctual nount)	Date (Mo., Day, Yr.) Only if Honoraria
1	Personal loan to Mr. and Mrs. R. Fitzgerald						x													х													
2	Columbia University School of Law																														Salary \$26,18	8	
3	HSBC Group, plc																														Directo \$89,53	8 US	
4	Bridgewater Associates, LP Westport CT																														Salary LT equ \$3,819		·
5	Lockheed Martin Common Stock	×																	×						×								
θ	Lockheed Martin Salarled Savings Plan (401K):																																
7	Target Date Fund 2025					×								×						×													
8	Stable Value Fund		x											X						y	ς .												
9	Broad Market Bond Index Fund		×	(										×						,	,												

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	,	None (or less than 31,303)	\$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*	\$1,800,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Excepted investment Fund	Excepted Trust	Qualitized Trust	Dividends	Kest and Kayathes	Interest	Capital Gains	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	52,501 - \$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., Dav. Yr.) Only if Honoraria
1	S&P 500 Indexed Equity Fund		х											×							х														
2	Small/Mid-Cap Indexed Equity Fund		х											Х								×													
3	US Equity Fund		х											Х							х														
4	Global Equity Fund		х								2.0000000000000000000000000000000000000			×			*				х													1	
5	MSCI EAFE Indexed Equity Fund				х									X										X										1	
6	ESOP Stock Fund - Lockheed Martin (stock and cash)	×																		×							х							T	
7	Investment Company of America Fund	×												X								X													
8	INTENTIONALLY BLANK																																		
9	INTENTIONALLY BLANK																																		
∗ ' hv	This category applies only if the asset/income is a the filer with the spouse or dependent children, r	olely nark	tha	t of i	he f	ler's	spou	se or	of v	end	ent c	hild	ren.	If th	ne ass	set/iz	ıcon	ie is	eith	er t	hat c	of th	e file	rorj	oint	y he	ld							يىرىيىدى.	

	orting Individual's Name		-					,			5	SCE	IE	$\mathbf{DU}$	LE	À	co	ntir	ıue	d			,								Page 1	Number	
Co	mey, James B.											,		Use c													···				<u> </u>	11	of 16
	Assets and Income			at		alua ose c					od .																ess ti		\$20	1)"	is che	eked,	
	BLOCK A						BLO	CK I	3																	B	LOCI	ĸс					
																	T	ype	lesses		88888		*****	1	88888		Amo	unt	\$8388B	_	Т		
		None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	######################################	\$250,001 - \$500,000	\$540,001 - \$1,000,000	Over \$1,000,000*	\$1,800,001 - \$5,000,800	85,000,001 - 825,000,000	\$25,0 <del>00</del> 6,001 - \$ <del>5</del> 6,000,000	Over \$50,090,000	Excepted Investment Fund Excepted Trust	(highlight Traist	Dividends	Rest and Royalites	Interest	Capital Gains	None (or less than \$201)	\$261 - \$1,000	\$1,001 - \$2,500	\$2,501\$5,000	85,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$190,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	Over \$5,000,000		Other Incorne (Specify Type & Actual Amount)	Date (Mo., Do Yr.) Only is Honorar
1	Virginia Prepaid Education Plan, Commonwealth of VA:																																
2	Contract 1		×																	х													
3	Contract 2		x																	х													
4	Contract 3		х																	х													
5																									*								
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Continue that the continue tha										l	Page 1	Yumber				
Comey, James B. SCHED	ULE	В											12	of 16		
Part I: Transactions		******			1	lone		1								
Report any purchase, sale, or exchange by you,  Do not report a transaction involving property your spouse, or dependent children during the reporting used solely as your personal residence, or a		ansact Type (x			<u> </u>	· ·	•		Amou	nt of T	ransact	ion (x)				_
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.  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.	Purchase	Sale	Exchange	Date (Mo., Day, Yr.)	\$1,001 -	5,001 -	0,001 -	.00,001 <b>-</b> .50,000	\$250,001 - \$500,000	.00,001 - .000,000,	ver ,000,000*	\$1,000,001 -	,000,001 - 5,000,000	5,000,001 -	Over \$50,000,000	Certificate of
Identification of Assets	Д. X	S	Щ	2/1/99	2 2	\$3	× \$3	12 23	\$ \$2	\$ 13	<u> 5 %</u>	12 8	88	88	० %	<u>८</u> ५
Tweedy Browne Global Value Fund - Mutual Fund - IRA	×			11/22/13			х									
Eaton Vance Short Term Duration Income Fund - IRA	×			11/22/13			x									
3 AllianceBernstein Income Fund - IRA	x			11/22/13		х						<del> </del> -				
Tweedy Browne Global Value Fund - Mutual Fund - IRA	x			12/27/13	х		-									
5																
* This category applies only if the underlying asset is solely that of the filer's spouse or dependent children. If the und by the filer or jointly held by the filer with the spouse or dependent children, use the other higher categories of value, a	erlying a is appro	isset is priate.	eithe	er held	•	·	•	•	·							
Part II: Gifts, Reimbursements, and Travel Expenses										<del>"''</del>		<del></del>			***************************************	
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 a sonal friend, agency approval under 5 U.S.C. § 4111 or other statutory ity, etc. For travel-related gifts and reimbursements, include travel itinerary, dates, and the nature of expenses provided. Exclude anything given to you by	recei indep the d total	ved fro ender onor's	om re it of t resid from	ment; given latives; recei heir relations ence. Also, one source, ons.	ved by ship to for pu	your s you; o	pouse r provi	or dep ded as regatin	endent person g gifts	child ( al hos) to dete	totally pitality rmine	y at	. 1	None		
		Bri	ef Des	cription										1	Value	
Source (Name and Address)  Examples Nat'l Assn. of Rock Collectors, NY, NY  Airling ticket, botal room & meals incident to national conf				, o p												

OGE Form 278 (Rev. 12/2011) 5 C.F.R. Part 2634 U.S. Office of Government Ethics

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

Re	porting Individual's Name	SCI	TEL	TIT			1 .						Page 1	lumber			-	
Cc	omey, James B.	SCI.				3 continue	ea									of 16		
P	art I: Transactions		······································								4-		<u> </u>					
				ansact							Amo	unt of T	ransact	ion (x)				
				l ype (	ĺ	Date (Mo.,		<u> </u>					T	,	T	<u> </u>	g	٦ ا
***************************************	Lands		Purchase	Sale	Exchange	Day, Yr.)	\$1,001 -	- 100.0	- 100,00	20,000	000,000	00,000	Over \$1,000,000*	000,000	00,000;	,000,0 ,000,0	Over \$50,000,000	Certificate of divestiture
1		tion of Assets	<u> </u>	X X	G	9/11/13	\$1,		\$50	\$16	\$25	\$50	SI,	\$1,0	\$5,0 \$25	\$25	Over \$50,00	Cer
2			igwdapprox			<u> </u>	-	X		_							· ·	
3			<del> </del>	×		9/11/13	×											ļ
4			<del> </del>	х		9/11/13		×										
5	Doubleline Emerging Mkts - Mutual Fu	und		×		10/8/13				х								
6	Pimco Emerging Mkts - Mutual Fund			x		10/8/13				х								
	Pimco Total Return Fund - Mutual Fur	nd		х	·	10/8/13			х									
7	Wisdomtree Trust Chinese Yuan Fund	d		х		10/8/13				х								
8	FPA Crescent Fund - Mutual Fund		х			11/7/13				х								
9	Eaton Vance Muni Fund		х			11/7/13			х									
10	Eaton Vance Muni Fund			х		11/12/13			x							_		
	First Trust Ex Traded Fund Large Valu	че	х			11/22/13					х		-					
12	Vanguard Wellesley Income Fund - Mi	lutual Fund	×			11/29/13			•	.х							-	
13	Vanguard Wellesley Income Fund - M	iutual Fund	х			12/17/13	х									_		
	FPA Crescent Fund - Mutual Fund		х			12/18/13	х											
15	FPA Crescent Fund - Mutual Fund		×			12/27/13				х	<del>-  </del>							
	Yacktman Focused - Mutual Fund		х			12/27/13				х								<u></u>
Th v t	his category applies only if the underlying a the filer or jointly held by the filer with the	asset is solely that of the filer's spouse or de	pende	ent ch	ildren	. If the under	lying a	sset is	either l	neld	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	L						$\dashv$

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

	eporting Individual's Name	SCF	TEL	NT IT	T I	2 continu	<u></u>	P	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>				Page 1	Number	P	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	-	
Comey, James B.			SCHEDULE B continued (Use only if needed)								14 of 16							
P	art I: Transactions												<u></u>					
			Transaction															
		,	<u>Typ</u>			Date	Amount of Ti											
	Identific	and an a C A analysis	Purchase	Sale	Exchange	(Mo., Day, Yr.)	.001 -	5,001 -	\$50,001 - \$100,000	30,001 -	50,001 -	\$1,000,000	Over \$1,000,000*	000,001 -	- 100,000,	\$25,000,001	er 1 000 000	Certificate of divestiture
Identification of Assets  Royce Pennslyvania Fund - Mutual Fund		X	Δÿ	Ėί	12/27/13	\$1.	\$3.	\$30	× \$10	\$25	\$5( \$1,	<u>§</u> 0	\$1,	\$5,	\$25	§§ õ	<del>Ğ</del> <u>Ğ</u>	
2	Wisdomtree Emerging Mkt Income F	Fund	<del>                                     </del>	x		12/27/13		х				_	<del>                                     </del>				-	+
3	Lockheed Martin ESOP Fund		<del>                                     </del>	х		9/24/13			х				-		<u> </u>		<del></del>	<del>                                     </del>
4	American Century Growth Fund			x		11/29/13	×	 								<del>                                     </del>		
5	New Perspective Fund			х		11/29/13	×				<b></b>					<u> </u>	<u> </u>	<del> </del>
6	US Equity Fund		x			11/29/13	×	,										<del> </del>
7	Global Equity Fund		х			11/29/13	х											<del> </del>
8											-	<del>                                     </del>				<b> </b>		
8																	·	-
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16				ļ														
' Th 2 <u>2 t</u>	nis category applies only if the underlying the filer or jointly held by the filer with the	g asset is solely that of the filer's spouse or de the spouse or dependent children, use the other	pende	ent ch	ildren egorie	. If the under	lying a	sset is	either	held								-

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Reporting Individual's Name											To .	<del></del>			
Comey, James B.	SCHEDULE C					Page Number 15 of 16									
Part I: Liabilities											<u> </u>		<u> </u>	<del></del> -	
Report liabilities over \$10,000 owed to any one creditor at any time during the reporting period	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 X			Category of Amo						int or Value (x)				
by you, your spouse, or dependent children. Check the highest amount owed during the reporting period. Exclude a mortgage on your		Date	Interest	t Term if	\$10,001 - \$15,000	\$50,000	0001	0,001	\$250,001 -	\$500,001-	Over \$1,000,000*	\$1,000,000 - \$5,000,000	00,001	\$25,000,001 -	7,2
Creditors (Name and Address)	Type of Liability	Incurred		applicable	\$10	\$15	520	10.22	\$250	82 5.	O Ver	5 5	25,50	ន្ត្រី ន្ត្រី	Ş
mples First District Bank, Washington, DC  John Jones, Washington, DC	Mortgage on rental property, Delaware	1991	8%	25 yrs.	$\mathbf{L}_{-}$		_x_	L			1	122.07	1 27 47	1 47 47	<del> </del>
John Jones, Washington, DC	Promissory note	1999	10 %	on deman	d			<u> </u>	x	<del>                                     </del>				-	<del> </del>
2					-	-	<u> </u>	<u> </u>	<u> </u>	<del> </del>	<del> </del>		<del> </del>	├	<del> </del>
3			<b> </b>	<del> </del>						<u> </u>	<del> </del>	ļ	├	<del> </del>	
		<u>.</u>													
4														1	
5											<del>                                     </del>		<del> </del>		$\vdash$
* This category applies only if the liability is solely that with the spouse or dependent children, mark the other	at of the filer's spouse or dependent children. If the liability higher categories, as appropriate.	y is that of th	ne filer or	a joint lial	oility of	the file	er	<u>.                                    </u>	<u> </u>	<u>.                                    </u>	Щ.	<del>                                     </del>	Щ.	<u>.l</u>	
Part II: Agreements or Arranger Report your agreements or arrangements for: (1) contin		-								***					
employee benefit plan (e.g. pension, 401k, deferred color payment by a former employer (including severance	mnensation): (2) continuation	of absen	ice; and (	(4) future en or any of the	nployme ese arrar	ent. Se ngemei	e instr nts or b	ruction benefit	s rega s.	rding t	he rep	orting			
										ì	Vone		]		
Dispusant to manta analysis and the state of	and Terms of any Agreement or Arrangement							Pa	arties					D	ate
Example calculated on service performed through 1/0	ive lump sum payment of capital account & partnership share 0.			Do	e Jones	& Smit	h, Hom	etown,	State					7.	/85
I	Pension Plan, will receive lump sum payout on 55th	-			ockhee	d Mar	tin Co	rp., B	ethes	da, M	D		-	9/	/05
2 Lockheed Martin Salaried Savings Plan, 401K, assets reported on Sched A; no further contributions to be made by former employer					Lockheed Martin Corp., Bethesda, MD							9/	05		
3											-				
4								-	_	<u>,                                     </u>					
5														_	
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Reporting Individual's Name			Page Number				
Comey, James B.	SCHEDULE D	SCHEDULE D					
Part I: Positions Held Outside U.S. Gover Report any positions held during the applicable reporting period, whe compensated or not. Positions include but are not limited to those of director, trustee, general partner, proprietor, representative, employee	ther consultant of any corporation, firm, pr	artnership, or other business enterprise or I institution. Exclude positions with relign those solely of an honorary nature.	any ious. Non	e			
Organization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)			
Examples Nat'l Assn. of Rock Collectors, NY, NY Doe Jones & Smith, Hometown, State	Non-profit education Law firm	President Partner	- <u>6/92</u> - 7/85	Present 1/00			
Columbia Univ. Law School, NY NY	Law School	Senior Research Scholar	2/13	9/13			
HSBC Group plc, London UK	Bank	Director	3/13	9/13			
Bridgewater Associates, LP, Westport, CT	Investment Manager	General Counsel	9/10	1/13			
4				<del> </del>			
5							
8	-1	,					
Part II: Compensation in Excess of \$5,000 Report sources of more than \$5,000 compensation received by you or business affiliation for services provided directly by you during any of the reporting period. This includes the names of clients and customer corporation, firm, partnership, or other business enterprise, or any other	ryour non-profit organization when you one year of directly provided the services generating of a fee or payment of more than \$5,000.	ing Incumbent, Te	te this part if you a remination Filer, or Presidential Canc	r Vice didate.			
Source (Name and Address)		Brief Description of Duties	11011	<u> </u>			
Bxamples Doe Jones & Smith, Hometown, State  Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services  Legal services in connection with university	rsity construction					
2							
3			· · · · · · · · · · · · · · · · · · ·	77			
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