

Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Date of Appointment, Candidacy, Election, or Nomination (Month, Day, Year) 10/21/2013		Reporting Status (Check Appropriate Boxes)	Incumbent <input checked="" type="checkbox"/>	Calendar Year Covered by Report 2013	New Entrant, Nominee, or Candidate <input checked="" type="checkbox"/>	Termination Filer <input 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 COBERT		First Name and Middle Initial BETH F.				
Position for Which Filing		Title of Position Deputy Director of Management		Department or Agency (If Applicable) Office of Management and Budget				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.
Location of Present Office (or forwarding address)		Address (Number, Street, City, State, and ZIP Code) 1650 Pennsylvania Avenue NW Room 260; Washington, DC 20503			Telephone No. (Include Area Code) 202-395-1480			
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						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.
Presidential Nominees Subject to Senate Confirmation		Name of Congressional Committee Considering Nomination Committee on Homeland Security and Governmental Affairs		Do You Intend to Create a Qualified Diversified Trust? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Certification		Signature of Reporting Individual			Date (Month, Day, Year)			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.
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.					8-14-14			
Other Review (If desired by agency)		Signature of Other Reviewer			Date (Month, Day, Year)			
Agency Ethics Official's Opinion		Signature of Designated Agency Ethics Official/Reviewing Official			Date (Month, Day, Year)			
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).					8/15/2014			
Office of Government Ethics Use Only		Signature Barbara Mullen-Ross			Date (Month, Day, Year) 12-31-14			
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 <u>45</u>) <input checked="" type="checkbox"/>								
(Check box if comments are continued on the reverse side) <input type="checkbox"/>								
Agency Use Only								
OGE Use Only								
NOV 17 2014								

Reporting Individual's Name COBERT, BETH F.	SCHEDULE A continued (Use only if needed)	Page Number 5 of 12
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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.																								
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	Excepted Investment Fund	Excepted Trust	Qualified Trust	Type				Amount							Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria							
																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	401(k): McKinsey Inv Off: Profit-Sharing Retirement Plan: Special Situations Agg LT(div)											X																							
2	X												X						X																
3	X												X																						
4						X							X							X															
5						X							X																						
6					X								X																						
7					X																														
8			X										X																						
9	X												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 COBERT, BETH F.	SCHEDULE A continued (Use only if needed)	Page Number 7 of 12
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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.															
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	Excepted Investment Fund	Excepted Trust	Qualified Trust	Type				Amount						Date (Mo., Day, Yr.) Only if Honoraria
																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	
1																										
															-- CA Dept of Water Resources Bonds											
2																										
															-- City of Los Angeles Bonds 4%/5%											
3																										
															-- City of San Diego Bonds											
4																										
															-- El Monte Unified HSD bonds											
5																										
															-- Long Beach USD Bonds											
6																										
															-- Los Angeles County MT Bonds											
7																										
															-- Los Angeles Conv Bonds											
8																										
															-- Los Angeles USD Bonds											
9																										
															-- San Francisco City Bonds											

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Reporting Individual's Name COBERT, BETH F.	SCHEDULE A continued (Use only if needed)	Page Number 8 of 12
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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.																						
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	Excepted Investment Fund	Excepted Trust	Qualified Trust	Type				Amount						Date (Mo., Day, Yr.) Only if Honoraria							
																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)	
1	-- San Francisco USD Bonds																																
2	-- Santa Ana USD Bonds																																
3	-- State of CA VP Bonds																																
4	-- State of CA DB LTX Bonds																																
5	-- UC Regents Bonds																																
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

Reporting Individual's Name COBERT, BETH F.	SCHEDULE B	Page Number 9 of 12
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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

	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
	Example Central Airlines Common	x			2/1/99												
1	SPDR Dow Jones REIT		X		12/30/13					X							X
2	McKinsey Partnership Interest		X		10/18/13								X				
3	Nipun Asia Total Return Fund LP, San Mateo, CA (Asia hedge fund) (Divested)		X		12/19/13								X				
4	401(K): McKinsey Inv Off: Profit-Sharing Retirement Plan: Special Situations Agg LT(div)		X		12/31/13								X				
5	McKinsey Investment Office: USLife Variable Annuity (Special Situation Investment Fund)		X		11/30/13						X						

* 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	Airline ticket, hotel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty)	\$500
	Frank Jones, San Francisco, CA	Leather briefcase (personal friend)	\$350
1			
2			
3			
4			
5			

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

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Part I: Transactions

No.	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		
1	McKinsey Investment Office: Compass Special Situations Fund LLC (divested)		X		10/01/13												X		
2	McKinsey Investment Office: Compass Global Private Equity Capital (divested)		X		11/11/2013	X													
3	McKinsey Investment Office: Compass European Private Equity Capital (divested)		X		11/11/2013	X													
4																			
5																			
6																			
7																			
8																			
9																			
10																			
11																			
12																			
13																			
14																			
15																			
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
 COBERT, BETH F.

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

Examples	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					
	First District Bank, Washington, DC	Mortgage on rental property, Delaware	1991	8%	25 yrs.																
	John Jones, Washington, DC	Promissory note	1999	10%	on demand			x													
1	McKinsey & Company, New York, NY (now repaid)	Share Loan	1990	3%	on demand				X												
2	Wells Fargo Bank, San Francisco, CA	Mortgage on Primary Residence	2013	2.75%	30 yrs								X								
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.	Doe Jones & Smith, Hometown, State	7/85
1	Received a lump sum payment of capital account - paid in 10/13	McKinsey & Company, New York, NY	7/90
2	Received a lump sum payment of compensation and bonus earned during current year and a termination payment based on age and years of service - paid in November 2013, pursuant of standard partner agreement	McKinsey & Company, New York, NY	7/90
3	Will continue to receive medical, dental, vision benefits	McKinsey & Company, New York, NY	7/90
4	Received a lump sum payment representing accrued pension benefit - paid in 2013	McKinsey & Company, New York, NY	9/84
5	Will be covered by a McKinsey-paid personal lines umbrella insurance policy	McKinsey & Company, New York, NY	7/90
6			

Reporting Individual's Name COBERT, BETH F.	SCHEDULE D	Page Number 12 of 12
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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

	Organization (Name and Address)	Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)
Examples	Nat'l Assn. of Rock Collectors, NY, NY	Non-profit education	President	6/92	Present
	Doe Jones & Smith, Hometown, State	Law firm	Partner	7/85	1/00
1	McKinsey & Company	Management consulting firm	Director (previously Principal and Associate)	Sept 10, 1984	10/13
2	McKinsey & Company Master Retirement Trust	Defined Contribution Pension Plan for McKinsey & Company employees	Trustee (2005-present); Chair, Board of Trustees (Feb 06 to present)	May 2005	10/13
3	United Way of the Bay Area	Non-profit social service organization	Board member (2008-present); Board Chair (2009-2012)	2008	10/13
4	Stanford University Graduate School of Business	Private non profit university	Advisory Council Member	2012	10/13
5	San Francisco Ballet	Non profit performing arts organization	Board of Trustees member	1999	2011
6	Family Trust	Trust	Trustee	07/2011	Present

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 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

	Source (Name and Address)	Brief Description of Duties
Examples	Doe Jones & Smith, Hometown, State	Legal services
	Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services in connection with university construction
1	McKinsey & Company, New York, NY	Consulting services
2	CBRE Group Inc; Los Angeles, CA (client of McKinsey & Company)	Consulting services
3	AAA Northern California, Nevada and Utah; Emeryville, CA (client of McKinsey & Company)	Consulting services
4	AAA Insurance Exchange; Walnut Creek, CA (client of McKinsey & Company)	Consulting services
5	Union BanCal Corporation; San Francisco, CA (subsidiary of Mitsubishi UFJ Financial Group, Inc., based in Tokyo, JN) (client of McKinsey & Company)	Consulting services
6	CBRE Group Inc; Los Angeles, CA (client of McKinsey & Company)	Consulting services