

CERTIFICATION OF ETHICS AGREEMENT COMPLIANCE

Senate Confirmed Presidential Appointee

| | | |
|----------------------------------|---|--|
| 1. Appointee's Information | a. Appointee's Name: | to be completed by OGE James W. Carroll Jr. |
| | b. Position Title: | to be completed by OGE Director of the National Drug Control Policy |
| | c. Agency: | to be completed by OGE Executive Office of the President |
| | d. Date Ethics Agreement Signed: | to be completed by OGE April 25, 2018 |
| | e. Date Confirmed: | to be completed by OGE January 2, 2019 |
| | f. Due Date for Certification of Ethics Agreement Compliance: | to be completed by OGE April 9, 2019 |
| 2. Resignations | <i>I completed all of the resignations indicated in my ethics agreement before I assumed the duties of my current government position.</i> | <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A |
| 3. Divestitures | a. <i>I have completed all of the divestitures indicated in my ethics agreement. I also understand that I may not repurchase these assets during my appointment without OGE's prior approval.</i> | <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A |
| | b. <i>I have filed a period transaction report, or periodic transaction reports, (OGE Form 278-T) to disclose the completion of these agreed upon divestitures.</i> | <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A Filing Date(s) of OGE Form 278-T Report(s): |
| 4. Managed Accounts | <i>If I have a managed account or use the services of an investment professional, I have notified the manager or professional of the limitations indicated in my ethics agreement. In addition, I am continuing to monitor purchases.</i> | <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A |
| 5. Interim Recusals | <i>I complied with my interim recusal obligations pending the divestitures required by my ethics agreement.</i> | <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A |

| | | |
|--|--|---|
| <p>6. Recusals</p> <p><i>(Note: These factual statements describe the appointee's current status. They are not intended to modify ethics agreement commitments or create new recusal obligations.)</i></p> | <p>a. I am recusing from particular matters in which I know I have a <u>personal or imputed</u> financial interest directly and predictably affected by the matter, unless I have received a waiver or qualify for a regulatory exemption.</p> | <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> |
| | <p>b. I am recusing from particular matters in which any former employer or client I served in the past year is a party or represents a party, unless I have been authorized under 5 C.F.R. § 2635.502(d).</p> | <p><input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A</p> |
| | <p>c. I am recusing from particular matters in which any former employer or client I served in the two years prior to my appointment is a party or represents a party, unless I have received a waiver under Exec. Order 13770.</p> | <p><input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A</p> |
| <p>7. Waivers and Authorizations</p> | <p>a. I received a waiver pursuant to 18 U.S.C. § 208.</p> | <p><input type="radio"/> Yes <input checked="" type="radio"/> No</p> |
| | <p>If yes, indicate the date of the waiver and indicate the financial interest covered by the waiver.</p> | <p>Date: Financial interest:</p> |
| | <p>b. I received a waiver pursuant to Executive Order 13770.</p> | <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> |
| | <p>If yes, indicate the date of the waiver and the subject of the waiver (i.e., applicable paragraph of the ethics pledge, parties, particular matters, specific issue areas, as applicable).</p> | <p>Date: Subject: Paragraph six for certain Covered Political Organizations before service at OIG DCP</p> |
| <p>c. I received an authorization pursuant to 5 C.F.R. § 2635.502(d).</p> | <p><input type="radio"/> Yes <input checked="" type="radio"/> No</p> | |
| <p>If yes, indicate date of authorization and identify the covered person(s) as to whom you have been authorized (e.g., former employer, former client, spouse's employer, spouse's current client, etc.).</p> | <p>Date: Covered person(s):</p> | |
| <p>d. I received a waiver pursuant to 5 C.F.R. § 2635.503(c).</p> | <p><input type="radio"/> Yes <input checked="" type="radio"/> No</p> | |
| <p>If yes, indicate the date of the waiver and identify the former employer or payer.</p> | <p>Date: Former employer or payer:</p> | |

James W. Carroll Jr.

| | | | |
|--|--|---|--|
| <p>8. Payments, Accelerations, or Divestitures Required to be Completed Prior to Entering Government Service</p> | <p>Mark this box if not applicable:</p>  | <p>a. <i>If I committed that I would forfeit a financial interest or payment, unless it was received or accelerated prior to my assumption of the duties of the government position:</i></p> | <p><input type="radio"/> <i>I received it (or it was accelerated) prior to my assumption of the duties of the position.</i></p> <p><input type="radio"/> <i>I received it (or it was accelerated) after my assumption of the duties of the position.</i></p> <p><input type="radio"/> <i>I forfeited it.</i></p> |
| <p>9. Requirements for Regular Appointees</p> | <p><i>I have completed my initial ethics briefing, pursuant to 5 C.F.R. § 2638.305.</i></p> <p>If you are a Special Government Employee (SGE) or career Foreign Service Officer (FSO), select N/A.</p> | <p><input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A</p> | |
| <p>Requirements for Regular Appointees</p> | <p><i>I have signed the ethics pledge pursuant to Executive Order 13770.</i></p> <p>If you are a SGE or career FSO or previously signed the pledge, select N/A.</p> | <p><input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A</p> | |
| <p>10. Additional Ethics Agreement Requirements</p> | <p>to be completed by OGE</p> | <p>to be completed by appointee</p> <p><i>I am complying with these requirements as described in the adjacent box.</i></p> <p><input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A</p> | |
| <p>11. Comments of Appointee</p> | <p></p> | | |
| <p>Any intentionally false or misleading statement or response provided in this certification is a violation of law punishable by a fine or imprisonment, or both, under 18 U.S.C. § 1001.</p> | | | |
| <p><i>I certify that the information I have provided is complete and accurate.</i></p> | <p>Appointee's Signature:</p>  | <p>Date:</p> <p><i>April 1, 2019</i></p> | |

**OGE STATEMENT REGARDING
CERTIFICATION OF ETHICS AGREEMENT COMPLIANCE**
Senate Confirmed Presidential Appointee

| | | |
|----------------------------|--|--|
| Appointee's Information | Appointee's Name: | James W. Carroll, Jr. |
| | Position Title: | Director of the National Drug Control Policy |
| | Agency: | Executive Office of the President |
| | Date Ethics Agreement Signed: | April 25, 2018 |
| | Date Confirmed: | January 2, 2019 |
| | Due Date for Certification of Ethics Agreement Compliance: | April 9, 2019 |

Statement

Director Carroll indicated that he received a waiver pursuant to Executive Order 133770, but did not provide the date the waiver was granted. OGE returned the Director's Certification of Ethics Agreement Compliance asking that the date be added. OGE was advised by ethics officials that the waiver was undated.

Date of Statement: April 4, 2019