

ACE PARTICIPANT GUIDE

2025

Institute for Ethics in Government
U.S. Office of Government Ethics

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ACE Unit 1:
Ethics Program Purpose,
Structure, and Legal Foundation

Ethics Program Purpose, Roles, and Functions Exercise

Part 1

Instructions: Imagine you are designing an ethics program for a large executive branch agency from scratch. Consider what your goals would be, who you would involve in the program, and which functions you would charge the program with carrying out.

Purpose:

What are the negative consequences that an ethics program should protect against?

What are the goals of your ethics program?

Who, inside and outside of government, should care about your ethics program?

Functions:

What policies and practices will you put in place to achieve your goals?

Policies:

Practices:

Roles and Responsibilities:

Who will have responsibilities within your program? What will their responsibilities be?

Role:

Responsibilities:

Role:

Responsibilities:

Role:

Responsibilities:

Role:

Responsibilities:

Role:

Responsibilities:

Role:

Responsibilities:

Ethics Program Purpose, Roles, and Functions Exercise

Part 2

Instructions:

Step 1: Review the activities described in 5 CFR 2638 Subparts B, C, and D. If there is a regulatory requirement corresponding to an activity you have identified in Part 1, annotate your Part 1 plan to include the citation to the requirement.

Step 2: Review the authorities at 5 CFR 2638 Subpart A. If Subpart A provides authorities and/or responsibilities for persons you identified in Part 1, annotate your Part 1 plan with citations to the corresponding regulation.

Step 3: If you have identified activities and/or roles that are not included in 5 CFR 2638, consider whether there are any barriers that would prevent your agency from enacting your plan anyway.

Step 4: If there are activities or roles included in 5 CFR 2638 but not in your plan from Part 1, consider whether you would like to add them. If not, please explain why.

The Costs of Ethical Failure Exercise

Instructions:

Step 1: Conduct a broad Internet search for the “scandal” you’ve been assigned. Note the quantity and breadth of media coverage:

- The number and variety of the sources of articles relating to the scandal and
- The way the headlines depict the story.

(10 minutes)

Step 2: Using articles you find (and those provided on the next page), discuss the following:

- What was the nature of the “scandal?” How did it happen?
- Who were the primary actors and what were their roles?
- What was the “fallout” from the “scandal?” Who was held accountable and how?
- How did the headlines portray/describe the story?
- Who or what got the blame?

(20 minutes)

Step 3: Using the worksheet, be prepared to provide a brief summary of your discussion to the large group. (5 minutes max/group)

Scandals:

GSA Western Regional Conference Scandal

<https://www.govexec.com/management/2015/01/looking-back-gsa-scandal-did-administration-overreact/103764/>

<https://www.npr.org/sections/itsallpolitics/2012/04/03/149930467/gsa-clown-conference-scandal-could-result-in-counterproductive-reaction>

Minerals Management Service Scandal (DOI)

<https://www.cbsnews.com/news/sex-for-oil-scandal-at-interior-department/>

<http://www.cnn.com/2010/POLITICS/05/27/mms.salazar/index.html>

<https://www.ucsusa.org/resources/attacks-on-science/minerals-management-service-bad-science-name-private-interests>

NLRB Conflict of Interest Scandal

<https://www.propublica.org/article/william-emanuel-nlr-member-is-under-investigation-for-a-conflict-of-interest>

<https://www.reuters.com/legal/government/us-labor-board-says-trump-era-member-had-conflict-exxon-case-2022-08-22/>

<https://www.nlr.gov/cases-decisions/weekly-summaries-decisions/summary-of-nlr-decisions-for-week-of-october-24-28-2022>

Fat Leonard Scandal

<https://foreignpolicy.com/2022/10/24/fat-leonard-us-navy-corruption-scandal/>

<https://theconversation.com/a-navy-scandal-sheds-light-on-the-nature-of-bribery-and-the-limits-of-free-speech-128834>

EPA Scandal

<https://thehill.com/policy/energy-environment/4852219-epa-watchdog-air-official-conflict/>

<https://www.msn.com/en-us/news/us/head-of-epa-air-office-violated-ethics-rules-agency-watchdog-says/ar-AA1pBuKA>

<https://www.eenews.net/articles/watchdog-hits-epa-air-chief-over-ethics-breaches/>

Legal Geography Assignments

Part 1

Team Name:

Public Financial Disclosure Legal Origins

Instructions: Using the Compilation of Federal Ethics Laws and OGE's regulations in the Code of Federal Regulations, locate citations for the authorities that establish and inform the public financial disclosure system. Please fill out the form below.

1. In the Compilation of Federal Ethics Laws, the public financial disclosure provisions are found at:

2. In the Code of Federal Regulations, the public financial disclosure provisions are found at:

3. How similar are the provisions in the Ethics in Government Act to the provisions in the Code of Federal Regulations?

4. Why do you think that is?

5. Bonus: Some of the ethics provisions are found in Title 5 of the U.S. Code and others are found in Title 5 of the Code of Federal Regulations. Do you know the significance of this difference?

Team Name:

Financial Conflicts of Interest Legal Origins

Instructions: Using the Compilation of Federal Ethics Laws and OGE's regulations in the Code of Federal Regulations, locate citations for the authorities that prohibit "acts affecting a personal financial interest." Please fill out the form below.

1. In the Compilation of Federal Ethics Laws, the criminal conflict of interest provisions related to "acts affecting a personal financial interest" are found at:
2. In the Code of Federal Regulations, the rules concerning "acts affecting a personal financial interest" are found at Parts:
3. How similar are the provisions in the Ethics in Government Act to the provisions in the Code of Federal Regulations?
4. Why do you think that is?
5. Bonus: Can you find the part of the conflict of interest law that authorizes OGE to issue exemptions to that law?

Team Name:

Office of Government Ethics Legal Origins

Instructions: Using the Compilation of Federal Ethics Laws and OGE's regulations in the Code of Federal Regulations, locate the citations for the authorities that establish and empower OGE. Please fill out the form below.

1. In the Compilation of Federal Ethics Laws, the law that establishes OGE can be found at:
2. In the Code of Federal Regulations, the rules establishing the authorities and responsibilities of OGE are found at Part:
3. How similar are the provisions in the Ethics in Government Act to the provisions in the Code of Federal Regulations?
4. Why do you think that is?
5. Bonus: Other than OGE and its director, who or what is given powers under the law?

Legal Geography Assignments

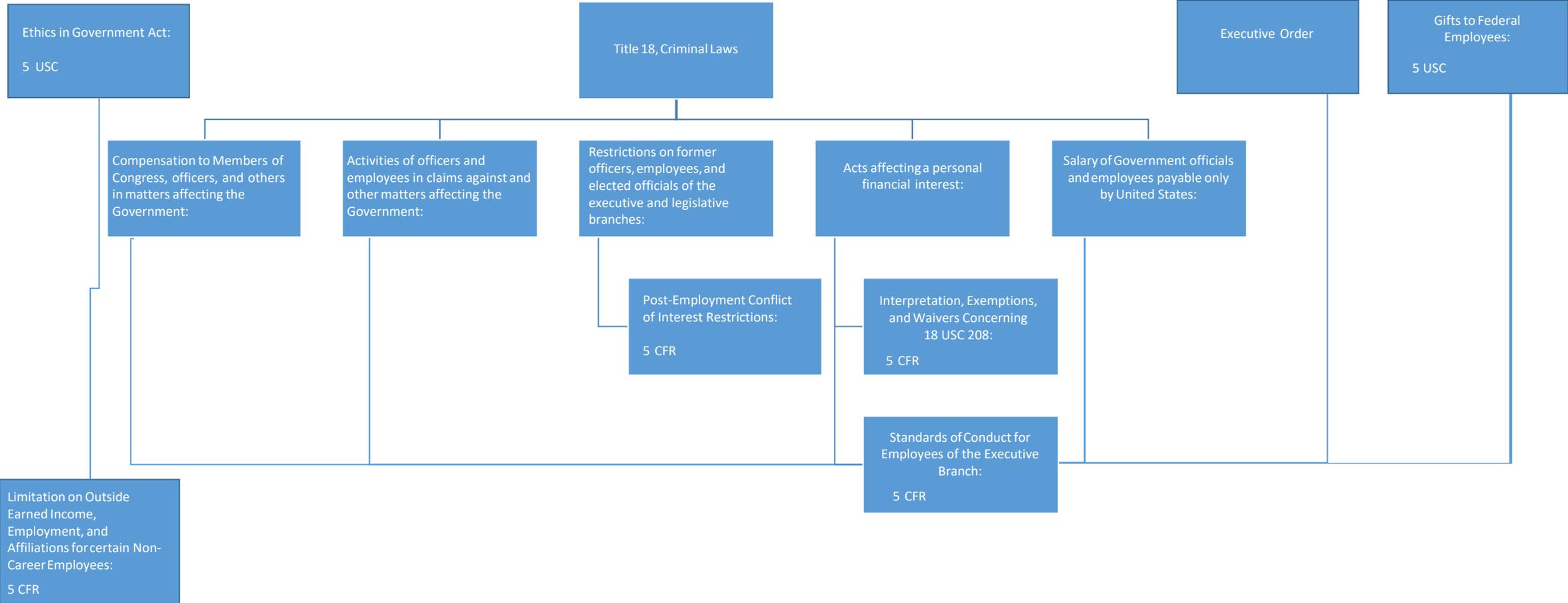
Part 2

Instructions: Fill in the following charts with the appropriate citations.

Ethics Program Laws and Regulations



Restrictions on Federal Employees

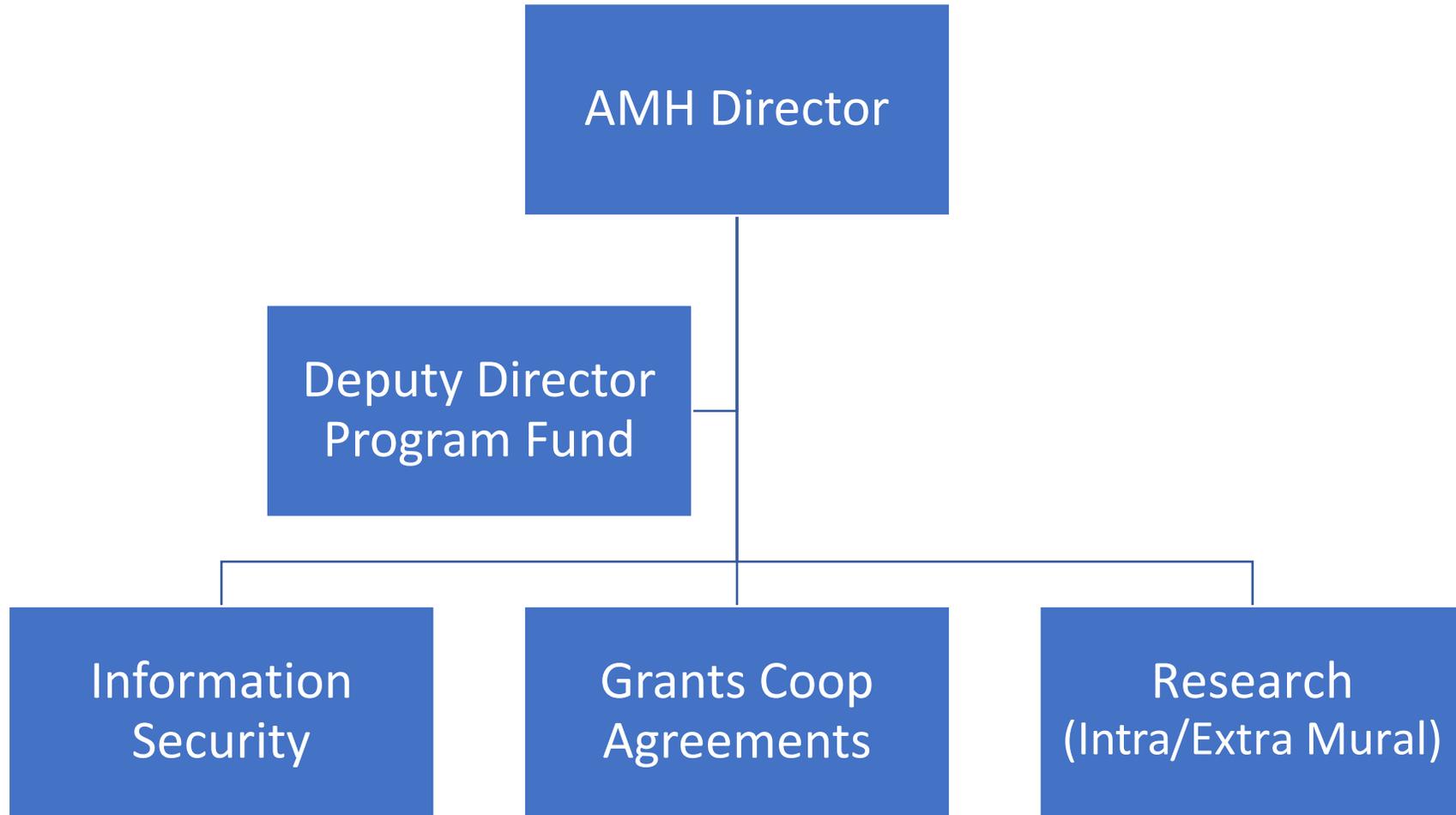


Our Agency

Intro to Agency for Mental Health

Agency Name:	Agency for Mental Health
Agency Profile:	Broadly similar in mission to the National Institute of Mental Health but not an agency of the Department of Health and Human Services.
Supplemental Regs:	Outside activity requires prior approval.
Cast of Characters:	Deborah Ortiz — DAEO Dr. Rory Singh-Smith — Deputy Director, Budget and Program Funding Naomi Guzman — Chief, Medical Information Security Keshia Marsteller — Prospective Candidate for Deputy Director, Programs Funding
Narrative:	<p>You are a new ethics official at the Agency for Mental Health (AMH) working under the direction of Deborah Ortiz, a member of Senior Management and the DAEO.</p> <p>Your primary client for the next 16 weeks is the Office of Programs Funding. You will be responding to questions and providing advice and counsel, financial disclosure review, and ethics education to various employees within that office. You will also be learning the ropes with respect to the policies and administration of the AMH ethics program.</p>
Description of Office:	<p>The Office of Programs Funding supports a range of research, research training, career development, and scientific resource and technology transfer programs, through grants, cooperative agreements and contracts.</p> <p>Programs funded include:</p> <ul style="list-style-type: none">• Treatment and preventive interventions research;• Mental health services research to develop and test service delivery strategies for improving the quality, effectiveness, continuity, and value of mental health services;• Research training, education, and career development grant mechanisms to cultivate a mental health research workforce that is diverse, skilled in innovative treatment, prevention, and services; and• Application of innovative technologies, supported through the Small Business Innovation Research (SBIR) and Small Business Technology Transfer (STTR) Programs, to improve screening, diagnosis, clinical assessment, data collection, and quality monitoring tools for clinical trials and services research studies; advance the treatment of mental disorders; and for new approaches to training, supervision, and continuing education for researchers and evidence-based practitioners.

Organizational Chart



ACE Unit 2:
Introduction to
Advice and Counsel

Gifts Research Exercise

Hello New Ethics Officials,

Welcome to the ethics team at the Agency on Mental Health. The whole team is grateful that you have joined us, and we're looking forward to helping you develop in the ethics profession. We have a lot going on right now, and we're hoping you can help us with a recent influx of gift questions. It would be a big help to our senior ethics officials if you could do some preliminary research into the questions below.

Thanks in advance!

Deborah Ortiz
Designated Agency Ethics Official

Step 1: Is It a Gift?

Instructions: Using the definition of “gift” and exclusions from the definition at 5 CFR 2635.203(b), determine whether each of the items below qualifies as a gift.

1. A rental car company offers a 5% discount for all government employees, teachers, and first responders.

Is it a gift? Yes. No.

2. Passed hors d'oeuvres and a champagne toast.

Is it a gift? Yes. No.

3. A ticket to a minor league baseball game.

Is it a gift? Yes. No.

4. An employee’s pension and retirement savings account from a previous job.

Is it a gift? Yes. No.

Step 2: Is It Prohibited?

Instructions: Using the general prohibition at 5 CFR 2635.202, determine if the gifts below would meet the general prohibition.

1. A gift to an agency employee from a clinic AMH regulates.

Is it prohibited? Yes. No.

2. A gift to an AMH employee from a citizen grateful for the service she received from the AMH employee.

Is it prohibited? Yes. No.

3. A birthday present to an AMH employee from his 8-year-old daughter.

Is it prohibited? Yes. No.

Step 3: Does an Exception Apply?

Instructions: Using the exceptions to the general prohibition on gifts at 5 CFR 2635.204, identify if an exception might apply, and if so which one(s).

1. An agency employee has been invited, by a prospective employer that is a prohibited source for AMH, to fly to the company headquarters for an interview and a meet and greet dinner with the executive team.

Which, if any, exception(s) would you consider applying?

2. An agency employee has been offered a box lunch valued at \$12 by an AMH contractor.

Which, if any, exception(s) would you consider applying?

3. A division head at AMH has recently been publicly recognized for outstanding service to the country. Her next-door neighbor, who is not a prohibited source, has invited the employee and her family for a garden party to celebrate her accomplishment. Food, alcoholic beverages, and entertainment will be provided at the party.

Which, if any, exception(s) would you consider applying?

Gift Opinion Exercises

Exercise 1

Instructions: Using the fact pattern below, determine if there is a gift, if it is prohibited, if an exception may apply, and consider the factors for declining an otherwise permissible gift. Provide the citations for the portion of the rule you use to answer each question. Then, using the BFLAC format, draft an ethics opinion to the employee.

Dear Ethics,

My brother in-law, who works at TWLOHA, a grantee of AMH, has access to TWLOHA's executive suite for an Arlington Raiders hockey game. He would like take my daughter to the game for her birthday because she is a huge Raiders fan. I don't know how much the suite costs, but the best seats for the game, not in private suites, cost about \$150. Is it okay if my daughter goes to the game?

1. Is it gift? Yes. No.

Citation:

2. Is it prohibited? Yes. No.

Citation:

3. Does an exception apply? Yes. No.

Citation:

4. Using the factors at 5 CFR 2635.201, are there any considerations that would work in favor of declining the gift?

Opinion Template

Bottom Line:

Facts:

Laws/Regulations:

Analysis:

Conclusion:

Other Considerations/Recommendation:

Exercise 2

Ethics Clearance Requests for This Week

Dear Ethics Team,

I have two ethics clearance requests for this week. We have a lot going on, so the quicker you can clear these the better.

1. Document Management Strategic Partnership

As you know, AMH is looking for a strategic partner to help with some of our medical information security and accessibility needs. We need to upscale our capabilities to comply with new privacy and security requirements. It is one of the Secretary's urgent management priorities. Naomi Guzman, the Chief in charge of medical information security, has scheduled some information gathering meetings with prospective partners. She has asked that I attend the meetings with NextGen Health and Cerner Corp to make sure we are asking the right questions. As I think you know, NextGen is one of my spouse's clients. They aren't currently working on a project together, but I believe they have a retainer agreement. She might also have some stock in NextGen from a previous project. My 278e/PTRs are all up to date. Please advise.

2. Youth Mental Health Grant

As you know, the grants folks are considering applications for a large grant for youth mental health support. I had a brief chat with Jen Snow from NAMI in a pull-aside at IAYMH. I don't think the grants team has the visibility into NAMI they need to make the best decision with this grant. I'd like to schedule a meeting with them to fill in some of the gaps. If we get this wrong, I'm afraid it will hurt the administration's progress on this issue and jeopardize youth who could otherwise receive care. Because I did some work with NAMI before coming to AMH, I wanted to get clearance from you.

As always, please Cc Grant on your response, so he can get these on my calendar.

Best,

Dr. Rory M. Singh-Smith
Deputy Director, Programs Funding
Agency on Mental Health

Opinion Template

Bottom Line:

Facts:

Laws/Regulations:

Analysis:

Conclusion:

Other Considerations/Recommendation:

ACE Unit 3:
Confidential Financial Disclosure
and Outside Activities Approval

Review of New Entrant OGE Form 450 Exercise

Instructions: Read the email threads below and review the OGE Form 450. Complete the worksheet that follows.

To: Ethics@amh.gov

From: Rory Singh-Smith

Cc: Naomi Guzman

Date: May 7, 2025

Subject: Naomi's 450

Dear Ethics Team,

I took a quick look at Naomi's 450. I didn't have any serious concerns, but I did want to flag a few things.

1. DocuSign is a major stakeholder for our digital health initiative that Naomi is involved with. I guess it is good she no longer works there.
2. Not sure what FDHT is, so I didn't review that.
3. I know our IT folks are talking about moving to the cloud, and Amazon is potential vendor. I don't think Naomi would be involved, but you never know.
4. I know from training that we have a policy for outside jobs. I don't know how that works, but let me know if you need anything from me.

Best,

Rory

To: Ethics@amh.gov
From: Naomi Guzman
Cc: Rory Singh-Smith
Date: May 7, 2025
Subject: My OGE Form 450

Please find attached my OGE Form 450.

Tx,

N

To: Naomi Guzman
From: Ethics@amh.gov
Cc: Rory Singh-Smith
Date: April 30, 2025
Subject: Reminder: Filing Your Confidential Financial Disclosure Report

Dear Naomi,

We'd really like to finish your ethics in-processing. If you could complete your OGE Form 450 as soon as possible, that would be a great help. When you send it in, please Cc Rory so he can conduct the intermediate supervisory review.

You can download the form here:

[https://www.oge.gov/web/OGE.nsf/0/2026049D943E0C34852585B6005A23CE/\\$FILE/OGE%20Form%20450%20Confidential%20Financial%20Disclosure%20Report.pdf?open](https://www.oge.gov/web/OGE.nsf/0/2026049D943E0C34852585B6005A23CE/$FILE/OGE%20Form%20450%20Confidential%20Financial%20Disclosure%20Report.pdf?open).

If you have any questions, feel free to reach out to any of the ethics team. Thank you for your cooperation.

Deborah Ortiz
Designated Agency Ethics Official Agency on Mental Health

To: Naomi Guzman
From: Ethics@amh.gov
Cc: Rory Singh-Smith
Date: April 24, 2025
Subject: Overdue: Filing Your OGE Form 450

Dear N. Guzman

You are required by 5 CFR 2634 to file an OGE Form 450 as a condition of your employment. Your form is overdue.

You can download the form here:

[https://www.oge.gov/web/OGE.nsf/0/2026049D943E0C34852585B6005A23CE/\\$FILE/OGE%20Form%20450%20Confidential%20Financial%20Disclosure%20Report.pdf?open](https://www.oge.gov/web/OGE.nsf/0/2026049D943E0C34852585B6005A23CE/$FILE/OGE%20Form%20450%20Confidential%20Financial%20Disclosure%20Report.pdf?open).

To: Naomi Guzman
From: Ethics@amh.gov
Date: April 13, 2025
Subject: Overdue: Filing Your OGE Form 450

Dear N. Guzman,

You are required by 5 CFR 2634 to file an OGE Form 450 as a condition of your employment. Your report is overdue.

You can download the form here:

[https://www.oge.gov/web/OGE.nsf/0/2026049D943E0C34852585B6005A23CE/\\$FILE/OGE%20Form%20450%20Confidential%20Financial%20Disclosure%20Report.pdf?open](https://www.oge.gov/web/OGE.nsf/0/2026049D943E0C34852585B6005A23CE/$FILE/OGE%20Form%20450%20Confidential%20Financial%20Disclosure%20Report.pdf?open).

To: Naomi Guzman
From: Ethics@amh.gov
Date: March 27, 2025
Subject: Reminder: Filing Your OGE Form 450

Dear N. Guzman,

You are required by 5 CFR 2634 to file an OGE Form 450 as a condition of your employment. You have 1 day to file the report.

You can download the form here:

[https://www.oge.gov/web/OGE.nsf/0/2026049D943E0C34852585B6005A23CE/\\$FILE/OGE%20Form%20450%20Confidential%20Financial%20Disclosure%20Report.pdf?open](https://www.oge.gov/web/OGE.nsf/0/2026049D943E0C34852585B6005A23CE/$FILE/OGE%20Form%20450%20Confidential%20Financial%20Disclosure%20Report.pdf?open).

To: Naomi Guzman
From: Ethics@amh.gov
Date: March 12, 2025
Subject: Reminder: Filing Your OGE Form 450

Dear N. Guzman,

You are required by 5 CFR 2634 to file an OGE Form 450 as a condition of your employment. You have 15 days to file the report.

You can download the form here:

[https://www.oge.gov/web/OGE.nsf/0/2026049D943E0C34852585B6005A23CE/\\$FILE/OGE%20Form%20450%20Confidential%20Financial%20Disclosure%20Report.pdf?open](https://www.oge.gov/web/OGE.nsf/0/2026049D943E0C34852585B6005A23CE/$FILE/OGE%20Form%20450%20Confidential%20Financial%20Disclosure%20Report.pdf?open).

To: Naomi Guzman

From: Ethics@amh.gov

Date: February 27, 2025

Subject: Filing Your OGE Form 450

Dear N. Guzman,

You are required by 5 CFR 2634 to file an OGE Form 450 as a condition of your employment. You have 30 days to file the report.

You can download the form here:

[https://www.oge.gov/web/OGE.nsf/0/2026049D943E0C34852585B6005A23CE/\\$FILE/OGE%20Form%20450%20Confidential%20Financial%20Disclosure%20Report.pdf?open](https://www.oge.gov/web/OGE.nsf/0/2026049D943E0C34852585B6005A23CE/$FILE/OGE%20Form%20450%20Confidential%20Financial%20Disclosure%20Report.pdf?open).

Date Received by Agency
 May 7, 2025

Page Number

CONFIDENTIAL FINANCIAL DISCLOSURE REPORT

Executive Branch

Employee's Name (Print last, first, middle initial) Naomi Guzman		E-mail Address nguzma@amh.gov	
Position/Title Chief, Medical Information Security			Grade GS-15
Agency Agency on Mental Health		Branch/Unit and Address 1234 Main Street, Washington, DC 20001	
Work Phone 555-555-5555	Reporting Status New Entrant <input checked="" type="checkbox"/> Annual <input type="checkbox"/>		If New Entrant, Date of Appointment to Position (mm/dd/yy) 1/23/25
Check box if Special Government Employee (SGE) <input type="checkbox"/>	An SGE is an executive branch officer or employee who is retained, designated, appointed, or employed to perform temporary duties either on a full-time or intermittent basis, with or without compensation, for a period not to exceed 130 days during any consecutive 365-day period.		
If an SGE, Mailing Address (Number, Street, City, State, ZIP Code)			

Step 1: Read the instructions for Parts I through V on the following pages.

Step 2: For each statement below, check Yes or No to describe your situation.

I. I have reportable assets or sources of income for myself, my spouse, or my dependent children.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
II. I have reportable liabilities (debts) for myself, my spouse, or my dependent children.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
III. I have reportable outside positions for myself.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
IV. I have reportable agreements or arrangements for myself.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
NOTE: Statement V is for <u>annual</u> filers only. It does not apply to new entrants and SGEs.		
V. I have reportable gifts or travel reimbursements for myself, my spouse, or my dependent children.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Step 3: If you selected Yes for any statement, you must describe the reportable interests that you have in the corresponding Part (I, II, III, IV, or V) of the form.

Step 4: Sign and date the form.

Step 5: Submit the completed form to your ethics office.

I certify that the statements I have made on this form and all attached statements are true, complete, and correct to the best of my knowledge.

Signature of Employee <i>Naomi Guzman</i>	Date (mm/dd/yy) 4/25/25
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FOR REVIEWERS' USE ONLY:

On the basis of information contained in this report, I conclude that the filer is in compliance with applicable laws and regulations, except as noted in the "comments" box below.	
Signature and Title of Supervisor/Other Intermediate Reviewer (if required by the agency)	Date (mm/dd/yy)
E-mail Address	Phone Number
Signature and Title of Agency's Final Reviewing Official	Date (mm/dd/yy)
Comments of Reviewing Officials	
(Check box if continued on additional page <input type="checkbox"/>)	

Employee's Name (Print last, first, middle initial) Naomi Guzman	Page Number
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Part I: Assets and Income

Report for Yourself, Spouse, and Dependent Child:	Do Not Report:
<ul style="list-style-type: none"> Assets held for investment or the production of income that ended the reporting period with a value greater than \$1,000. In addition, annual filers must report assets from which more than \$1,000 in income was received during the reporting period. Reportable assets include, but are not limited to: <ul style="list-style-type: none"> Assets such as stocks, bonds, annuities, trust holdings, partnership interests, life insurance, investment real estate, or a privately-held trade or business Sector mutual funds: those funds invested in a particular industry, business, or location, such as ABC Electronics Fund or XYZ Canada Fund (report the full name of the fund, not just the family fund name) Holdings of retirement plans, such as 401(k)s or IRAs, investment life insurance, or variable annuities (report each holding unless listed in the Do Not Report section) Defined benefit pension plans provided by a former employer (include the name of the employer) 	<ul style="list-style-type: none"> Federal Government retirement benefits Thrift Savings Plan Certificates of deposit, savings or checking accounts Term life insurance Money market mutual funds and money market accounts Your personal residence, unless you rent it out U.S. Government Treasury bonds, bills, notes, and savings bonds Diversified mutual funds, such as ABC Equity Value Fund or XYZ Large Capital Fund Diversified funds within an employee benefit plan Money owed to you, your spouse, or dependent child by a spouse, parent, sibling, or child
Also Report:	Do Not Report:
<ul style="list-style-type: none"> <u>For yourself:</u> (1) all sources of salary, fees, commissions, and other earned income greater than \$1,000, (2) honoraria greater than \$1,000, and (3) other non-investment income such as scholarships, prizes, and gambling income greater than \$1,000 <u>For your spouse:</u> (1) all sources of salary, fees, commissions, and other earned income greater than \$1,000, and (2) honoraria greater than \$1,000 	<ul style="list-style-type: none"> Dependent child's earned income Veterans' benefits Federal Government salary Social Security benefits

Important Definitions

Diversified Mutual Fund – A mutual fund that does not have a stated policy of concentrating its investments in one industry, business, or single country other than the United States.
Sector Mutual Fund – A mutual fund that concentrates its investments in an industry, business, single country other than the United States, or bonds of a single state within the United States.
Diversified Fund within an Employee Benefit Plan – An employee benefit plan fund that has a written policy of varying investments without concentration in one industry, business, or single country other than the United States.
Dependent Child – A son, daughter, stepson or stepdaughter who is either unmarried and under age 21 and living in the filer's house, or considered dependent under the U.S. tax code.

Reportable Information – Go to the last page to see examples of how to report assets and income.

Specific stock, bond, sector mutual fund, type/location of real estate, etc. (Indicate the full name of each specific asset or investment. You may add the ticker symbol to the full name.) Name of Employer or Business; Source of Fees, Commissions, or Honoraria (Include brief description.) You may distinguish any entry for a family member by preceding it with S for spouse, DC for dependent child, or J for jointly held.	No longer held
¹ DocuSign (salary)	<input checked="" type="checkbox"/>
² FDHT	<input type="checkbox"/>
³ Alphabet (GOOGL)	<input type="checkbox"/>
⁴ AMZN	<input type="checkbox"/>
⁵	<input type="checkbox"/>

Employee's Name (<i>Print last, first, middle initial</i>)	Page Number
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Part I: Assets and Income
Continuation Page

Specific stock, bond, sector mutual fund, type/location of real estate, etc. (<i>Indicate the full name of each specific asset or investment. You may add the ticker symbol to the full name.</i>) Name of Employer or Business; Source of Fees, Commissions, or Honoraria (<i>Include brief description.</i>) You may distinguish any entry for a family member by preceding it with S for spouse, DC for dependent child, or J for jointly held.	No longer held
1	<input type="checkbox"/>
2	<input type="checkbox"/>
3	<input type="checkbox"/>
4	<input type="checkbox"/>
5	<input type="checkbox"/>
6	<input type="checkbox"/>
7	<input type="checkbox"/>
8	<input type="checkbox"/>
9	<input type="checkbox"/>
10	<input type="checkbox"/>
11	<input type="checkbox"/>
12	<input type="checkbox"/>
13	<input type="checkbox"/>
14	<input type="checkbox"/>
15	<input type="checkbox"/>
16	<input type="checkbox"/>
17	<input type="checkbox"/>
18	<input type="checkbox"/>
19	<input type="checkbox"/>
20	<input type="checkbox"/>

Employee's Name (Print last, first, middle initial)	Page Number
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Part II: Liabilities

Report for Yourself, Spouse, and Dependent Child:	Do Not Report:
<ul style="list-style-type: none"> If you are a new entrant filer, liabilities that exceeded \$10,000 at the end of the reporting period If you are an annual filer, liabilities that exceeded \$10,000 during the reporting period 	<ul style="list-style-type: none"> Any liability, such as a mortgage, a student loan, or a credit card account, from a financial institution or business entity granted on terms made available to the general public Loans secured by automobiles, household furniture, or appliances, unless the loan exceeds the purchase price of the item it secures Liabilities that you owe to your spouse or to the parent, sibling, or child of you, your spouse, or your dependent child

Reportable Information – Go to the last page to see examples of how to report liabilities.

Name of creditor (include city and state where creditor is located)	Type of liability (personal loan, margin account, etc.)
1	
2	

Part III: Outside Positions

Report for Yourself:	Do Not Report:
<ul style="list-style-type: none"> All positions outside the U.S. Government held at any time during the reporting period, whether or not you were compensated and whether or not you currently hold that position. Positions include an officer, director, employee, trustee, general partner, proprietor, representative, executor, or consultant of any of the following: <ul style="list-style-type: none"> Corporation, partnership, trust, or other business entity Non-profit or volunteer organization Educational institution State or Local Government 	<ul style="list-style-type: none"> Any position with a <ul style="list-style-type: none"> Religious entity Social entity Fraternal entity Political entity Any position held by your spouse or dependent child Any position that you hold as part of your official duties

Reportable Information – Go to the last page to see examples of how to report outside positions.

Organization (include city and state where organization is located)	Type of organization	Position	No longer held
1 DocuSign	Technology Corporation	Marketing Liason, Medical Stakeholders	<input checked="" type="checkbox"/>
2 Autism Society of America	Non-Profit	Consultant	<input type="checkbox"/>
3			<input type="checkbox"/>
4			<input type="checkbox"/>
5			<input type="checkbox"/>
6			<input type="checkbox"/>

Employee's Name (Print last, first, middle initial) Naomi Guzman	Page Number
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Part IV: Agreements or Arrangements

Report Your Agreements or Arrangements for:	Do Not Report:
<ul style="list-style-type: none"> Continuing participation in an employee pension or benefit plan maintained by a current or former employer A leave of absence Future employment, including date you accepted employment offer Continuation of payment by a current or former employer (including severance payments) 	<ul style="list-style-type: none"> Any agreement or arrangement related to your employment by the Federal Government Spouse's and dependent child's agreements or arrangements Continuing participation in a defined contribution plan, such as a 401(k) plan, to which an employer is no longer making contributions

Reportable Information – Go to the last page to see examples of how to report agreements and arrangements.

Entity with which you have an agreement or arrangement (include city and state where entity is located)	Terms of Agreement or Arrangement
¹ DocuSign	I maintain a 401(k) from my former employer. DocuSign no longer makes contributions.
²	
³	
⁴	

Part V: Gifts and Travel Reimbursements

Fill out this part only if you are filing an Annual Report. If you are a new entrant or an SGE, skip this part.

Report for Yourself, Spouse, and Dependent Child:	Do Not Report:
<ul style="list-style-type: none"> Any gifts or travel reimbursements (items such as lodging, transportation, and food) totaling more than \$415* from any one source during the reporting period; include where you traveled, the purpose, and date(s) of the trip for travel gifts and reimbursements <p>*If you received more than one gift from one source:</p> <ol style="list-style-type: none"> Determine the value of each item you received from that source Ignore each item valued at \$166 or less Add the value of those items valued at more than \$166; if the total is more than \$415, then you must list those items on this form 	<ul style="list-style-type: none"> Anything received from relatives, the U.S. Government, D.C., state, or local governments Bequests and other forms of inheritance Gifts and travel reimbursements given to your agency in connection with your official travel Gifts of hospitality (food, lodging, entertainment) at the donor's residence or personal premises Anything received by your spouse or dependent child totally independent of their relationship to you

Reportable Information – Go to the last page to see examples of how to report gifts and travel reimbursements.

Source	Description
¹	
²	
³	

Worksheet for Review of OGE Form 450 for Naomi Guzman Exercise

Part I: Assets/Income	Questions/More Information	Substantive Issues
DocuSign (salary)		
FDHT		
Alphabet (GOOGL)		
AMZN		

Part II Liabilities	Questions/More Information	Substantive Issues
Part III Outside Positions	Questions/More Information	Substantive Issues
DocuSign		
Autism Society of America		

Part IV Agreements and Arrangements	Questions/More Information	Substantive Issues
DocuSign 401k		
Part V Gifts and Travel Reimbursements	Questions/More Information	Substantive Issues
N/A		

Instructions: Draft a set of questions to Naomi about her OGE Form 450.

STOP HERE

Naomi's Responses to Questions

Dear Ethics Office,

Please see my answers in red below.

Questions:

1. Do you have any residual equity interests in DocuSign? For example, does your DocuSign 401(k) contain DocuSign stock, bonds, phantom shares, or option? **Yes, I have approximately \$5,000 in stock in DocuSign.**
2. Does your DocuSign 401(k) contain any other reportable assets like sector mutual funds or stocks or bonds issued by single companies? **I also have a few mutual funds, but they are all broad-based index funds that I believe are diversified.**
3. Please share the current value of your holding in FDHT. This is a sector mutual fund which may produce a potential conflict of interest, and we need the value to determine if a regulatory exemption applies or if you might need to sell your interest in the fund. **The current value of my interest in FDHT is \$32,600.**
4. Please share the current value of your Alphabet and Amazon stocks. We need to determine if they qualify for a regulatory exemption, and that affects how we will monitor for conflicts of interest. **The current value of my Alphabet shares is \$17,000, and Amazon is \$11,000.**
5. Please complete the attached form to begin the approval process for outside employment/activities. **Please find my form attached. [Click to view form, or go to page 63.](#)**

Thanks, Naomi

Instructions: Draft a set of questions to Rory about Naomi's OGE Form 450.

STOP HERE

Rory's Responses to Questions

Dear Ethics Office,

Please see my answers in red, below.

-R

Dear Rory,

Thank you for reviewing the financial disclosure report filed by Naomi Guzman. We would like your input on the likelihood that Naomi will be assigned to certain matters so we can properly identify necessary remedies for potential conflicts of interest.

Questions:

1. Do you reasonably anticipate that Naomi will be involved in AMH work that would involve or affect DocuSign? If so, would holding Naomi out of that work adversely affect the work of AMH? **Yes, DocuSign is a major stakeholder in several of our telehealth initiatives, and Naomi's work on these initiatives is vital. Naomi doesn't work there anymore. Why would this be a problem? That this might be an issue is very concerning.**
2. Do you reasonably anticipate that Naomi will be involved in AMH work that would involve or affect Alphabet (Google)? If so, would holding Naomi out of that work adversely affect the work of AMH? **Not immediately. I did attend a webinar a few days ago about Google's plans to enter the telehealth and healthcare administration space, so I could see Google becoming an important stakeholder in the relatively near future.**
3. Do you reasonably anticipate that Naomi will be involved in AMH work that would involve or affect Amazon? If so, would holding Naomi out of that work adversely affect the work of AMH? **We currently have a contract with Amazon for cloud IT services, but it is being run out of the CIO's office. I don't think Naomi will be needed on the contract, and if she were, I have others I could assign to share the needs of the MIS office.**

Thank you for your cooperation with this important matter.

V/r

Ethics Office

Date Received by Agency May 7, 2023

Page Number

CONFIDENTIAL FINANCIAL DISCLOSURE REPORT
 Executive Branch

Employee's Name (Print last, first, middle initial) Naomi Guzman		E-mail Address nguzma@amh.gov	
Position/Title Chief, Medical Information Security			Grade GS-15
Agency Agency on Mental Health		Branch/Unit and Address 1234 Main Street, Washington, DC 20001	
Work Phone 555-555-5555	Reporting Status New Entrant <input checked="" type="checkbox"/> Annual <input type="checkbox"/>		If New Entrant, Date of Appointment to Position (mm/dd/yy) 1/23/23
Check box if Special Government Employee (SGE) <input type="checkbox"/>	An SGE is an executive branch officer or employee who is retained, designated, appointed, or employed to perform temporary duties either on a full-time or intermittent basis, with or without compensation, for a period not to exceed 130 days during any consecutive 365-day period.		
If an SGE, Mailing Address (Number, Street, City, State, ZIP Code)			

Step 1: Read the instructions for Parts I through V on the following pages.

Step 2: For each statement below, check Yes or No to describe your situation.

I. I have reportable assets or sources of income for myself, my spouse, or my dependent children.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
II. I have reportable liabilities (debts) for myself, my spouse, or my dependent children.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
III. I have reportable outside positions for myself.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
IV. I have reportable agreements or arrangements for myself.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
NOTE: Statement V is for <u>annual</u> filers only. It does not apply to new entrants and SGEs.		
V. I have reportable gifts or travel reimbursements for myself, my spouse, or my dependent children.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Step 3: If you selected Yes for any statement, you must describe the reportable interests that you have in the corresponding Part (I, II, III, IV, or V) of the form.

Step 4: Sign and date the form.

Step 5: Submit the completed form to your ethics office.

I certify that the statements I have made on this form and all attached statements are true, complete, and correct to the best of my knowledge.

Signature of Employee <i>Naomi Guzman</i>	Date (mm/dd/yy) 4/25/2023
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FOR REVIEWERS' USE ONLY:

On the basis of information contained in this report, I conclude that the filer is in compliance with applicable laws and regulations, except as noted in the "comments" box below.	
Signature and Title of Supervisor/Other Intermediate Reviewer (if required by the agency)	Date (mm/dd/yy)
E-mail Address	Phone Number
Signature and Title of Agency's Final Reviewing Official	Date (mm/dd/yy)
Comments of Reviewing Officials	
(Check box if continued on additional page <input type="checkbox"/>)	

Employee's Name (Print last, first, middle initial) Naomi Guzman	Page Number
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Part I: Assets and Income

Report for Yourself, Spouse, and Dependent Child:	Do Not Report:
<ul style="list-style-type: none"> Assets held for investment or the production of income that ended the reporting period with a value greater than \$1,000. In addition, annual filers must report assets from which more than \$1,000 in income was received during the reporting period. Reportable assets include, but are not limited to: <ul style="list-style-type: none"> Assets such as stocks, bonds, annuities, trust holdings, partnership interests, life insurance, investment real estate, or a privately-held trade or business Sector mutual funds: those funds invested in a particular industry, business, or location, such as ABC Electronics Fund or XYZ Canada Fund (report the full name of the fund, not just the family fund name) Holdings of retirement plans, such as 401(k)s or IRAs, investment life insurance, or variable annuities (report each holding unless listed in the Do Not Report section) Defined benefit pension plans provided by a former employer (include the name of the employer) 	<ul style="list-style-type: none"> Federal Government retirement benefits Thrift Savings Plan Certificates of deposit, savings or checking accounts Term life insurance Money market mutual funds and money market accounts Your personal residence, unless you rent it out U.S. Government Treasury bonds, bills, notes, and savings bonds Diversified mutual funds, such as ABC Equity Value Fund or XYZ Large Capital Fund Diversified funds within an employee benefit plan Money owed to you, your spouse, or dependent child by a spouse, parent, sibling, or child
Also Report:	Do Not Report:
<ul style="list-style-type: none"> <u>For yourself:</u> (1) all sources of salary, fees, commissions, and other earned income greater than \$1,000, (2) honoraria greater than \$1,000, and (3) other non-investment income such as scholarships, prizes, and gambling income greater than \$1,000 <u>For your spouse:</u> (1) all sources of salary, fees, commissions, and other earned income greater than \$1,000, and (2) honoraria greater than \$1,000 	<ul style="list-style-type: none"> Dependent child's earned income Veterans' benefits Federal Government salary Social Security benefits

Important Definitions

Diversified Mutual Fund – A mutual fund that does not have a stated policy of concentrating its investments in one industry, business, or single country other than the United States.
Sector Mutual Fund – A mutual fund that concentrates its investments in an industry, business, single country other than the United States, or bonds of a single state within the United States.
Diversified Fund within an Employee Benefit Plan – An employee benefit plan fund that has a written policy of varying investments without concentration in one industry, business, or single country other than the United States.
Dependent Child – A son, daughter, stepson or stepdaughter who is either unmarried and under age 21 and living in the filer's house, or considered dependent under the U.S. tax code.

Reportable Information – Go to the last page to see examples of how to report assets and income.

Specific stock, bond, sector mutual fund, type/location of real estate, etc. (Indicate the full name of each specific asset or investment. You may add the ticker symbol to the full name.) Name of Employer or Business; Source of Fees, Commissions, or Honoraria (Include brief description.) You may distinguish any entry for a family member by preceding it with S for spouse, DC for dependent child, or J for jointly held.	No longer held
¹ DocuSign (salary)	<input checked="" type="checkbox"/>
² FDHT	<input type="checkbox"/>
³ Alphabet (GOOGL)	<input type="checkbox"/>
⁴ AMZN	<input type="checkbox"/>
⁵ DocuSign 401(K): DocuSign Stock	<input type="checkbox"/>

Employee's Name (<i>Print last, first, middle initial</i>)	Page Number
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Part I: Assets and Income
Continuation Page

<p>Specific stock, bond, sector mutual fund, type/location of real estate, etc. (<i>Indicate the full name of each specific asset or investment. You may add the ticker symbol to the full name.</i>) Name of Employer or Business; Source of Fees, Commissions, or Honoraria (<i>Include brief description.</i>) You may distinguish any entry for a family member by preceding it with S for spouse, DC for dependent child, or J for jointly held.</p>	<p>No longer held</p>
1 ASA (fees)	<input type="checkbox"/>
2	<input type="checkbox"/>
3	<input type="checkbox"/>
4	<input type="checkbox"/>
5	<input type="checkbox"/>
6	<input type="checkbox"/>
7	<input type="checkbox"/>
8	<input type="checkbox"/>
9	<input type="checkbox"/>
10	<input type="checkbox"/>
11	<input type="checkbox"/>
12	<input type="checkbox"/>
13	<input type="checkbox"/>
14	<input type="checkbox"/>
15	<input type="checkbox"/>
16	<input type="checkbox"/>
17	<input type="checkbox"/>
18	<input type="checkbox"/>
19	<input type="checkbox"/>
20	<input type="checkbox"/>

Employee's Name (Print last, first, middle initial)	Page Number
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Part II: Liabilities

Report for Yourself, Spouse, and Dependent Child:	Do Not Report:
<ul style="list-style-type: none"> If you are a new entrant filer, liabilities that exceeded \$10,000 at the end of the reporting period If you are an annual filer, liabilities that exceeded \$10,000 during the reporting period 	<ul style="list-style-type: none"> Any liability, such as a mortgage, a student loan, or a credit card account, from a financial institution or business entity granted on terms made available to the general public Loans secured by automobiles, household furniture, or appliances, unless the loan exceeds the purchase price of the item it secures Liabilities that you owe to your spouse or to the parent, sibling, or child of you, your spouse, or your dependent child

Reportable Information – Go to the last page to see examples of how to report liabilities.

Name of creditor (include city and state where creditor is located)	Type of liability (personal loan, margin account, etc.)
1	
2	

Part III: Outside Positions

Report for Yourself:	Do Not Report:
<ul style="list-style-type: none"> All positions outside the U.S. Government held at any time during the reporting period, whether or not you were compensated and whether or not you currently hold that position. Positions include an officer, director, employee, trustee, general partner, proprietor, representative, executor, or consultant of any of the following: <ul style="list-style-type: none"> Corporation, partnership, trust, or other business entity Non-profit or volunteer organization Educational institution State or Local Government 	<ul style="list-style-type: none"> Any position with a <ul style="list-style-type: none"> Religious entity Social entity Fraternal entity Political entity Any position held by your spouse or dependent child Any position that you hold as part of your official duties

Reportable Information – Go to the last page to see examples of how to report outside positions.

Organization (include city and state where organization is located)	Type of organization	Position	No longer held
1 DocuSign	Technology Corporation	Marketing Liason, Medical Stakeholders	<input checked="" type="checkbox"/>
2 Autism Society of America	Non-Profit	Consultant	<input type="checkbox"/>
3			<input type="checkbox"/>
4			<input type="checkbox"/>
5			<input type="checkbox"/>
6			<input type="checkbox"/>

Employee's Name (Print last, first, middle initial) Naomi Guzman	Page Number
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Part IV: Agreements or Arrangements

Report Your Agreements or Arrangements for:	Do Not Report:
<ul style="list-style-type: none"> Continuing participation in an employee pension or benefit plan maintained by a current or former employer A leave of absence Future employment, including date you accepted employment offer Continuation of payment by a current or former employer (including severance payments) 	<ul style="list-style-type: none"> Any agreement or arrangement related to your employment by the Federal Government Spouse's and dependent child's agreements or arrangements Continuing participation in a defined contribution plan, such as a 401(k) plan, to which an employer is no longer making contributions

Reportable Information – Go to the last page to see examples of how to report agreements and arrangements.

Entity with which you have an agreement or arrangement (include city and state where entity is located)	Terms of Agreement or Arrangement
¹ DocuSign	I maintain a 401(k) from my former employer. DocuSign no longer makes contributions.
²	
³	
⁴	

Part V: Gifts and Travel Reimbursements

Fill out this part only if you are filing an Annual Report. If you are a new entrant or an SGE, skip this part.

Report for Yourself, Spouse, and Dependent Child:	Do Not Report:
<ul style="list-style-type: none"> Any gifts or travel reimbursements (items such as lodging, transportation, and food) totaling more than \$415* from any one source during the reporting period; include where you traveled, the purpose, and date(s) of the trip for travel gifts and reimbursements <p>*If you received more than one gift from one source:</p> <ol style="list-style-type: none"> Determine the value of each item you received from that source Ignore each item valued at \$166 or less Add the value of those items valued at more than \$166; if the total is more than \$415, then you must list those items on this form 	<ul style="list-style-type: none"> Anything received from relatives, the U.S. Government, D.C., state, or local governments Bequests and other forms of inheritance Gifts and travel reimbursements given to your agency in connection with your official travel Gifts of hospitality (food, lodging, entertainment) at the donor's residence or personal premises Anything received by your spouse or dependent child totally independent of their relationship to you

Reportable Information – Go to the last page to see examples of how to report gifts and travel reimbursements.

Source	Description
¹	
²	
³	

Communications Exercises

Exercise 1: Confidential Financial Disclosure Remedies

Instructions:

1. With your team, review the corrected OGE Form 450 filed by Naomi Guzman and the responses to the follow-up questions to Rory Singh-Smith and Naomi Guzman, and then create a plan or plans for preventing conflicts of interest and other ethics concerns. You may refer to this list of [available remedies and exemptions](#).
2. Create a strategy for a meeting or meetings with Rory and Naomi to present your plan(s) and to negotiate a mutually acceptable resolution to the potential conflicts and appearance issues.
3. When you next meet with your team, you will present your plans to Rory and Naomi in the meeting format of your choosing. You may meet with them together, separately, or both.
4. After your meeting, you will each draft a cautionary memo memorializing the agreed-upon plan for avoiding conflicts of interest and other ethics concerns. You may use the [OGE Ethics Agreement Guide](#) for model format and language.

Note: You will be evaluated and receive feedback on your plans, your approach to the meeting(s), and your cautionary memos.

Exercise 2: Improving Communications in the Confidential Financial Disclosure Program

Naomi Guzman filed her OGE Form 450 well after the filing deadline. If the facts had been slightly different, we could have had a serious problem on our hands. In this exercise, work together with your team to create a plan to improve communications with new hires that will help uncover and prevent conflicts of interest.

Part 1 – Request to File: Develop a communications strategy to more effectively encourage new employees to file. You should draft communications using Monroe’s Motivated Sequence, identify appropriate officials to deliver those communications, and develop a plan for when those communications will be made.

Part 2 – Leveraging Initial Ethics Orientation: For many employees, the only ethics intervention they are required to receive is Initial Ethics Orientation. And for filers, this is often the first intervention they receive. With your team, create a module that can be used during an Initial Ethics Orientation briefing that can help employees identify potential conflicts of interest themselves and seek help from the ethics office if/when they identify potential conflicts.

In our next ACE session, each group will have an opportunity to present their work.

Outside Activity Analysis Exercise

REQUEST FOR APPROVAL OF OUTSIDE ACTIVITY

Part I - EMPLOYEE INFORMATION

1. EMPLOYEE'S NAME (Last, First, MI)		
Naomi Guzman		
2. AGENCY/PROGRAM (Address)		3. TELEPHONE & E-MAIL
1234 Main Street. Washington, DC		Phone: 555-555-5555 E-Mail: nguzma@amh.gov
4. TITLE OF POSITION	5. GRADE/STEP	6. SALARY
Chief, Medical Information Security	GS-15	\$ 145,758
7. FINANCIAL DISCLOSURE FILING STATUS	<input type="checkbox"/> Public (SF 278) <input checked="" type="checkbox"/> Confidential (OGE 450 or other)	
8. NAME OF IMMEDIATE SUPERVISOR	9. SUPERVISOR'S TELEPHONE, & E-MAIL	
Rory Singh-Smith	Phone: 555-555-5555 E-Mail: rsing@amh.gov	

ii. **Outside Employer**

a. **Name and address of outside employer:**

Autism Society of America
6110 Executive Boulevard, Suite 305, Rockville, Maryland 20852

b. **Nature of business:**

Non-profit

c. **Contact person, phone number, and email:**

B. Knowles, XXX.555.5555
bknowles@asa.org

iii. **Compensation and Related Expenses**

a. **Compensation**

1. **Will the activity be compensated?**

Yes

No

2. **Method or basis of compensation** (Check all that apply):

Fee

Honorarium

Retainer

Salary

Advance

Royalty

Stock

Stock
Options

Other (Describe):

Non-Travel Related Expenses (Describe):

3. **Compensation amount** (Estimated):

\$55,000/yr

4. **Is Payor the same source as the employer identified above?**

Yes

No (Explain):

b. Travel and related expenses: Indicate whether travel is involved, and if so, whether the related expenses will be at your own expense or provided by the outside employer either in-kind or through reimbursement.

1. Will outside activity require travel?

Yes (Check one): At own expense In-kind or reimbursed
 No

2. If employer is providing travel related benefits, please describe those benefits:

The Society will pay for any travel and lodging expenses associated with training its employees and volunteers.

c. Time: Provide details with respect to the duration of the activity.

1. Duration of activity: From: To:

2. Estimated time devoted to the proposed activity
(e.g. hours/day; days/week; weeks/year):

Approximately 15 hours/week developing work product and training employees and volunteers, plus one full week for the ASA retreat.

3. Will work be performed entirely outside of your normal official duty hours?

Yes No

If "no," estimate number of hours/days of leave:

7-14 days per year.



Outside Activity Analysis Sheet

Name of Employee: Naomi Guzman
Position: Chief, Medical Information Security

Proposed Outside Activity: Consult with the Autism Society of America

I. Ethics Review Conclusions

Request may be approved.

Request may be approved subject to conditions noted in Comments section below.

Request must be denied for reasons noted in Comments section below.

II. Comments

III. Legal Analysis

Applicable Authority	Analysis, Key Questions, Additional Information
<p>18 USC 203 Compensation for representational services before the US</p> <p> 203 likely an issue</p> <p> 203 is a risk</p> <p> 203 not likely an issue</p>	
<p>18 USC 205 Representation on behalf of 3rd party before US</p> <p> 205 likely an issue</p> <p> 205 is a risk</p> <p> 205 not likely an issue</p>	
<p>18 USC 208 Conflicting Financial Interest</p> <p> 208 likely an issue</p> <p> 208 is a risk</p> <p> 208 not likely an issue</p>	

Applicable Authority	Analysis, Key Questions, Additional Information
<p>18 USC 209 Supplementation of Salary</p> <p> 209 likely an issue</p> <p> 209 is a risk</p> <p> 209 not likely an issue</p>	
<p>5 CFR 2635.201-205 Gifts from Outside Sources</p> <p> Gifts likely an issue</p> <p> Gifts are a risk</p> <p> Gifts not likely an issue</p>	
<p>5 CFR 2635.502 Impartiality</p> <p> .502 likely an issue</p> <p> .502 is a risk</p> <p> .502 not likely an issue</p>	

Applicable Authority	Analysis, Key Questions, Additional Information
<p>5 CFR 2635.702-705 Misuse of Position</p> <p> .702 likely an issue</p> <p> .702 is a risk</p> <p> .702 not likely an issue</p>	
<p>5 CFR 2635.802 Conflicting Outside Employment and Activities</p>	<p>If 208 and/or .502 analyses result in  then .802 should be considered.</p>
<p>5 CFR 2635.805 Service as an Expert Witness</p>	<p>Not applicable.</p>
<p>2635.807 Teaching, Speaking and Writing</p> <p> .807 likely an issue</p> <p> .807 is a risk</p> <p> .807 not likely an issue</p>	
<p>5 CFR 2635.808 Fundraising Activities</p>	<p>Not applicable.</p>

ACE Unit 4:
**Part 1 – Seeking and Negotiating
for Employment**

Seeking Employment and Notification Exercise

Team —

Rory pulled me aside after the Director's meeting. He's had some conversations with Active Mind about a soon-to-be vacant position in their state and federal advocacy program. He needs information about the notification requirement and everything that flows from that, guidance-wise.

We should treat this as a priority.

Tx Deborah

Step 1: Identify Programmatic and Substantive Issues

Instructions: Together with your team, review Deborah's email. Then, identify and discuss:

1. All administrative and policy matters this question raises and how, as an agency, we propose to handle this process (e.g., developing policies and procedures for filing and review, deadlines, follow-up, formats). (Note: AMH does not currently have any formal policies or procedures for the STOCK Act notification/recusal requirements.)
2. All substantive legal and regulatory issues this question raises (i.e., which authorities may apply) and how we will address them with Rory in our response.
3. Additional information you need. You will have access to Rory and Deborah for questions during your group meetings.

Use the worksheet on the next page to capture what your team discusses.

Step 2: Resolve Programmatic and Substantive Issues

Instructions: Your team should prepare for two meetings.

Meeting 1 – This will be a 20-minute conversation with Deborah Ortiz (DAEO) to propose a set of policies and procedures for administering Subpart F of the Standards of Conduct. Your conversation should address all administrative aspects of the requirements in Subpart F, including forms, policies for collection and review, etc. Again, you may borrow from ideas and extant resources your agencies may currently be using.

You should develop a one-pager or a presentation to facilitate the conversation.

Meeting 2 – This will be a 20-minute meeting with Rory Singh-Smith to deliver preliminary seeking employment advice and gather information to provide more thorough advice in the future. Be prepared to discuss what he will need to know and do to comply with all of the requirements in Subpart F, both substantive and administrative requirements.

Use the worksheet on the next page to prepare for these meetings.

Seeking Employment and Notification Exercise Worksheet

Programmatic Issues (policy, administrative)		Substantive Legal Issues	
Issues			
Questions			

Step 3: Use Education/Communications

Instructions: Each team must create an education/communications plan regarding seeking employment for at least two different audiences.

One audience must be Senior Executive Service (SES) employees. The other may be any audience of your choosing.

You must plan for at least two different products/methods of delivery. Get creative!

Consult the Program Advisory (PA), [PA-19-05](#), and [Developing and Delivering Effective Ethics Education and Communications document](#) included on page 79 when developing your plan.

Together with your team, use the guiding questions below and the chart on the next page to develop your plan.

1. Who is your audience?
2. What are the objectives of the educational offering/communication (i.e., what does your audience most need to know and be able to do as a result of your educational offering/communication)?
3. What content is most relevant (i.e., what content will help employees mitigate any risks associated with the topic)?
4. What timing and method of delivery would be most effective (i.e., when, how, and by whom should the educational offering/communication be delivered)?

Planning Document

Audience	Objectives	Content	Methods

Developing and Delivering Effective Ethics Education and Communications

1. Who is your audience?

To create effective ethics education and communications, you must begin with your audience. Knowing who you are addressing is critical to establishing appropriate objectives for your ethics education and communications and to ensuring that participants see themselves in them.

Consider who you will be addressing before building your materials and when deciding upon delivery methods. Think through the following questions:

- What work environments/experiences and personal perspectives do your participants bring with them?
- What ethics risks do they face in the work they perform?
- How do they encounter “ethical issues” in their day-to-day lives?
- What are the actual (or likely) demographics of the group?
- What is the actual (or likely) level of education of the group?
- What learning, physical, or other accessibility challenges might members of the group have?

2. How relevant and engaging is your content and delivery?

Ethics education and communications are most effective when they meet people where they are. Your audience should see themselves and their needs reflected in the content and in the delivery.

Questions to consider include:

- Are the topics you choose, the examples you create, and the questions you ask relevant to the work being performed? Do they reflect the experiences of your audience?
- Is your audience reflected in the content (e.g., names, images, examples, professions, language used)?
- Do you and other instructors understand the needs of the audience, and are you all able to effectively and credibly communicate with them?
- Do your delivery methods vary to accommodate different learning styles?
- Are the materials accessible?

- Do you provide materials in advance, especially for those using accessibility tools or those who learn better with an opportunity to pre-read?

When you build your content, build intentionally for accessibility and to engage your audience. Before you deliver your content, identify any individuals who may desire or require accessibility accommodations. This should never be an afterthought.

3. How effective is your program?

An effective ethics education and communications program relies as much on listening and learning as it does on talking and teaching. Seek input before you develop, and feedback after you deliver, ethics education and communications.

Sources of input and feedback could include:

- Needs assessment surveys of supervisors and employees;
- Informal discussions with groups of managers and groups of employees;
- Meetings with a Section 508 compliance coordinator to discuss the accessibility of materials;
- Post-education evaluations that assess content relevance, audience engagement, and accessibility; and
- Discussions with agency leaders and employees to evaluate whether the education and communications they receive support them in managing ethics risks.

ACE Unit 4:
Part 2 – Post-Government
Employment

Termination from Government Service Exercise

Team —

Rory Singh-Smith's last day at AMH will be September 2nd. He's accepted a position with Active Mind. Please advise him on everything we need from him and prepare for any meetings we need to schedule with him.

Deborah

Step 1: Identify Programmatic and Substantive Issues

Instructions: Together with your team, review Deborah's email. Then, identify and discuss:

1. All programmatic matters this email raises. This includes all policy and administrative considerations that flow from the notification of his termination from government service.
2. All substantive legal and regulatory issues and any immediate questions you have for him. You will be collecting more information and advising the employee on his post-employment restrictions in a later exercise.

To assist you in your discussion, consult these Legal Advisories (LAs), [LA-16-08](#) and [LA-22-07](#), among others.

Use the worksheet on the next page to capture what your team discusses.

Termination from Government Service Exercise Worksheet

Programmatic Issues (policy, administrative)		Substantive Legal Issues	
Issues			
Questions			

Step 2: Review of Post-Employment Resources

Instructions: Review the [Post-Employment Curriculum](#) and [LA-16-08](#).

For 207(a)(1), (a)(2) and (c), record the following in the chart on the next page:

1. The purpose of each restriction,
2. To whom the restriction applies,
3. The activities that are restricted, and
4. The length of the restriction.

If time allows, fill in this information for 207(f) as well.

Post-Employment Authorities

PE Restriction	Purpose	Who Covered	Activity Restricted	How Long
18 USC 207(a)(1)				
18 USC 207(a)(2)				
18 USC 207(c)				
18 USC 207(f)				

Step 3: Collect Information and Begin Analysis

Email To Dr. Singh-Smith:

Dr. Singh-Smith —

We understand your last day of service at AMH will be September 2nd. In order to prepare your post-employment briefing and memo, we will need some additional information from you. Once we have this information, we will schedule a time to meet and go over the memo with you.

1. Can you please confirm that your rate of pay in 2025 was equal to or greater than \$195,231?
2. Can you please provide us with a list of any specific party matters you have worked on during your tenure with us?

This would include things such as contracts, grants, and cooperative agreements — anything where there are named parties. It doesn't have to be exhaustive, but at least representative of the types of things you have worked on.

3. Can you please provide us with a description of the types of duties you expect to perform for your prospective employer?

We are particularly interested in identifying any duties that might involve you communicating with the federal government on behalf of your employer, and any that might involve a foreign government.

Thanks very much for your assistance with this.

The Ethics Team

Response from Dr. Singh-Smith:

Ethics Team —

Please let me know if you need additional information.

1. Can you please confirm that your rate of pay in 2025 was equal to or greater than \$195,231? **Yes, it is.**
2. Can you please provide us with a list of any specific party matters you or your staff have worked on during your tenure with us? This would include things such as contracts, grants, and cooperative agreements – anything where there are named parties. It doesn't have to be exhaustive, but at least representative of the things you have worked on.

As you know from previous requests for advice, I have been involved in the grants portal project build along with Naomi, as well as tangentially in other information security contracts and audits. I have mostly been involved at the Exec level in discussions among the various Deputy Directors about grant program policy objectives and budget priorities, as well as ones involving our cooperative agreements with various universities and other organizations.

My staff works directly with our various funding programs mostly on budget and performance measures, which can sometimes involve the disposition of particular grants and agreements.

3. Can you please provide us with a description of the types of duties you expect to perform for your prospective employer? We are particularly interested in identifying any duties that might involve you communicating with the federal government on behalf of your employer, and any that might involve a foreign government.

Below is a list of duties as described to me by Active Mind. I have already informed them that I may not be able to do all of these things immediately.

None will involve a foreign government.

Exec VP, State and Federal Advocacy, Active Mind

- **Provides expertise on a wide range of topics in behavioral health to local, state, and federal policymakers.**
- **Works with national legislator groups as topic expert.**

- Provides background and is critical spokesperson for Active Mind with the media.
- Provides leadership for grassroots and legislative advocacy across the Active Mind affiliate network.
- Coordinates the efforts of the Regional Policy Council (RPC), which focuses on state-level initiatives for equal access to behavioral health care, a full continuum of treatment and services, criminal justice diversion, and the value of prevention and early intervention.

Happy to answer any additional questions.

Best,

Rory

Dr. Rory M. Singh-Smith

Deputy Director for Programs Funding Agency on Mental Health

18 U.S.C. 207 Post-Employment Analysis Worksheet

Employee Name:

18 U.S.C. 207(a)(1) and (a)(2)				
1. Did the employee’s duties involve any specific party matters?	Yes List them under #2.	No No restrictions apply.		
2. List specific party matters. <i>For each, indicate whether the employee participated personally and substantially in a specific party matter or had such a matter pending under their official responsibility as a supervisor or manager during the last year of service.</i>	Personal and Substantial Participation	Pending Under Official Responsibility During Last Year		
3. Identify the employee’s post-government employer.				
4. List post-employment matters. <i>For any matters identified, indicate whether they are the same particular matters as any listed above. If the same, decide whether any proposed activities would involve a prohibited communication/appearance.</i>	Same particular matter? Yes, or no?	Communication Appearance with Intent to Influence	To or Before U.S.	On Behalf of Third Party

5. Is there an exception that applies? <i>List matter/activity.</i>	5 CFR 2641.301						
	(a)	(b)	(e)	(f)			
18 U.S.C. 207(c)							
1. Is the employee a “senior employee?”	Yes Skip to #3.		No 207(c) does not apply.				
2. If not a current employee, did the employee terminate service as a senior employee more than one year ago?	Yes They are no longer subject to 207(c).		No Termination of Service Date:				
3. Identify post-government employment matters/activities, if known. <i>For each, indicate whether it may involve communicating or appearing, with the intent to influence, to or before an employee of the former agency on behalf of a third party.</i>	Communication Appearance with Intent to Influence	To or Before Former Agency	On Behalf of Third Party				
4. Is there an exception that applies? <i>List matter/activity.</i>	5 CFR 2641.301						
	(a)	(b)	(c)	(d)	(e)	(f)	(g)

Step 4: Give Post-Employment Advice

This is an individual assignment.

Instructions:

Each participant should prepare an email to AMH leadership, advising them of Rory's post-employment restrictions.

Communication should address the specific post-employment restrictions affecting Rory, implications for the agency, and a communication strategy for advising staff members.

Assignments should be submitted to ace@oge.gov.

ACE Unit 5:
Part 1 – Initial Review of
Draft New Entrant
Public Financial Disclosure

Unit 5 Resources

Curricula/Recorded Trainings

1. [Public Financial Disclosure Curriculum](#)
2. [Nominee Financial Disclosure Curriculum](#)
 - Video 1: Conflicts of Interest Exemptions for Mutual Funds
 - Video 3: Ethics Issues for Professors
 - Video 4: Reporting and Conflicts Analysis for Employee Benefits
3. [How to Research Financial Instruments for Public Financial Disclosure Reviewers](#)
4. [18 USC 208 and Public Financial Disclosure: Distinguishing EIFs v. Exemptions for Mutual Funds \(2016\)](#)
5. [18 USC 208: Applying Commonly Used Exemptions \(2017\)](#)
6. [Training Series on 18 USC 208\(b\)\(1\) Waivers](#)
7. [How to Request a Certificate of Divestiture](#)

Documents

1. [The Public Financial Disclosure Guide](#)
2. [Analyzing Potential Conflicts of Interest](#)
3. [PAS Nominee Ethics Agreement Guide](#)
4. [Determining if an Investment Fund is Registered under the 1940 Act: Job Aid](#)
5. [List of Conflict of Interest Remedies and Exemptions](#)
6. [Waivers Under 18 USC 208 – OGE 07 x 4](#)
7. [Certificate of Divestiture Fact Sheet](#)

Ethics Program Points of Intervention in Hiring and Onboarding Process Exercise

Instructions: Consult this site for ideas: <https://ethics.od.nih.gov/PreEmp278>. Then, fill in the chart below.

Pre- and Post-Hire Phases <i>Examples: job announcement; interviews; etc.</i>	Offices/ Personnel Involved	Advantages	Disadvantages

Initial Review of Draft New Entrant 278e

Instructions: Conduct a line-by-line review of Keshia Marsteller's draft New Entrant (NE) public financial disclosure report (OGE Form 278e, or 278e) for the position of Deputy Director for Programs Funding. You will use the following resources to identify technical reporting issues (e.g., missing information), substantive ethics issues, and additional questions you have for the filer.

- a. [Worksheet for Initial Review of Draft New Entrant 278e](#)
- b. [Draft NE 278e](#)
- c. [Keshia Marsteller's Resume](#)
- d. [Position Description for Deputy Director for Programs Funding](#)
- e. [The Public Financial Disclosure Guide](#)
- f. [Analyzing Potential Conflicts of Interest](#)
- g. Various Internet Sites (e.g., webpages for organizations and financial instruments)

Worksheet for Initial Review of Draft New Entrant 278e

Part 1 Filer's Positions Held Outside U.S. Government <i>(Reporting period is the preceding two calendar years to the filing date.)</i>	Questions/More Information	Substantive Issues
<p>Johns Hopkins Bloomberg School of Public Health</p> <p>Tenured Professor – Health Policy and Management</p> <p><i>Note: This is also reported in Parts 2 and 3.</i></p>		
<p>National Council for Mental Wellbeing</p> <p>Consultant</p> <p><i>Note: This is also reported in Part 2.</i></p>		
<p>Information from Resume Not Included on Draft</p>		

Part 2 Filer's Employment Assets & Income and Retirement Accounts <i>(Reporting period is the preceding calendar year to the filing date.)</i>	Questions/More Information	Substantive Issues
Johns Hopkins Salary and TIAA		
National Council for Mental Wellbeing Fees		
Information from Resume Not Included on Draft		

Part 3 Filer's Employment Agreements and Arrangements <i>(Reporting period is as of the filing date.)</i>	Questions/More Information	Substantive Issues
Johns Hopkins Bloomberg School of Public Health Tenured Professor – Health Policy and Management		
National Council for Mental Wellbeing <i>Note: This is not reported in Part 3.</i>		
Information from Resume Not Included on Draft		

Part 4 Filer's Sources of Compensation Exceeding \$5,000 in a Year <i>(Reporting period is the preceding two calendar years to the filing date.)</i>	Questions/More Information	Substantive Issues
Johns Hopkins Bloomberg School of Public Health Tenured Professor – Health Policy and Management		
National Council for Mental Wellbeing Consultant		
Information from Resume Not Included on Draft		

Part 5 Spouse's Employment Assets & Income and Retirement Accounts <i>(Reporting period is the preceding calendar year to the filing date.)</i>	Questions/More Information	Substantive Issues
Johns Hopkins Bloomberg School of Public Health		
TIAA – Johns Hopkins		
Medidata Solutions Consulting Fees		
Dassault Systèmes Restricted Stock		
Any Additional Assets/Income		

Part 6 Other Assets and Income <i>(Reporting period is the preceding calendar year to the filing date.)</i>	Questions/More Information	Substantive Issues
M&T Bank		
Fidelity Select Pharmaceuticals		
First Trust Nasdaq Pharma		
Any Additional Assets/Income		

Part 7 Transactions

(This Part is not applicable for NE filing.)

Part 8 Liabilities <i>(Reporting period is the preceding calendar year to the filing date.)</i>	Questions/More Information	Substantive Issues
M&T Bank Mortgage		
Any Other Reportable Liabilities		

Part 9 Gifts and Travel Reimbursements

(This Part is not applicable for NE filing.)



Type of Report	New Entrant
Year (Annual Report only):	
Date of Appointment/Termination:	

Executive Branch Personnel Public Financial Disclosure Report (OGE Form 278e)

Filer's Information				
Last Name	First Name	MI	Position	Agency
Marsteller	Keshia		Deputy Director--Programs Funding	Agency for Mental Health

Other Federal Government Positions Held During the Preceding 12 Months:
 N/A

Name of Congressional Committee Considering Nomination (Nominees only):
 N/A

Filer's Certification - I certify that the statements I have made in this report are true, complete and correct to the best of my knowledge:

Signature:	Date:
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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 (subject to any comments below)

Signature:	Date:
------------	-------

Other Review Conducted By:

Signature:	Date:
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U.S. Office of Government Ethics Certification (if required):

Signature:	Date:
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Comments of Reviewing Officials:

[Instructions for Part 1](#)

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name						Page Number
Marsteller, Keshia						1
Part 1: Filer's Positions Held Outside United States Government						
#	Organization Name	City/State	Organization Type	Position Held	From	To
1.	Johns Hopkins University	Baltimore, MD	University	Professor	6/2014	present
2.	National Council for Mental Wellbeing	Washington, DC	Non-profit	Consultant	1/2021	present
3.						
4.						
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20.						105

[Instructions for Part 2](#)

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name	Page Number
Marsteller, Keshia	2

Part 2: Filer's Employment Assets & Income and Retirement Accounts

#	Description	EIF	Value	Income Type	Income Amount
1.	Johns Hopkins University			Salary	\$223,000
2.	National Council for Mental Wellbeing			Fees	\$83,650
3.	TIAA--Johns Hopkins	Yes	\$250,001 - \$500,000		None (or less than \$201)
4.					
5.					
6.					
7.					
8.					
9.					
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[Instructions for Part 3](#)

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name			Page Number	
Marsteller, Keshia			3	
Part 3: Filer's Employment Agreements and Arrangements				
#	Employer or Party	City/State	Status and Terms	Date
1.	Johns Hopkins University	Baltimore, MD	I will be on a leave of absence from my tenured position with Johns Hopkins Bloomberg School of Public Health. I will continue to participate in the TIAA retirement plan during my leave.	9/2025
2.				
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12.				

[Instructions for Part 4](#)

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name	Page Number
Marsteller, Keshia	4

Part 4: Filer's Sources of Compensation Exceeding \$5,000 in a Year

#	Source Name	City/State	Brief Description of Duties
1.	Johns Hopkins University	Baltimore, MD	Tenured Professor of Health and Policy Management with the Bloomberg School of Public Health
2.	National Council for Mental Wellbeing	Washington, DC	Provide integrated health consulting services to mental healthcare service providers
3.			
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[Instructions for Part 5](#)

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name	Page Number
Marsteller, Keshia	5

Part 5: Spouse's Employment Assets & Income and Retirement Accounts

#	Description	EIF	Value	Income Type	Income Amount
1.	Johns Hopkins Bloomberg School of Public Health			Salary	
2.	TIAA-Johns Hopkins	Yes	\$250,001 - \$500,000		None (or less than \$201)
3.	Medidata Solutions			Consulting fees	
4.	Dassault Systèmes restricted stock				
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[Instructions for Part 6](#)

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name	Page Number
Marsteller, Keshia	6

Part 6: Other Assets and Income

#	Description	EIF	Value	Income Type	Income Amount
1.					
2.	M&T Bank		\$15,001 - \$50,000	interest	\$201 - \$1,000
3.	Fidelity Select Pharmaceuticals		\$1,001 - \$15,000		None (or less than \$201)
4.	First Trust Nasdaq Pharma		\$15,001 - \$50,000		\$201 - \$1,000
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[Instructions for Part 7](#)

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name	Page Number
Marsteller, Keshia	7

Part 7: Transactions

#	Description	Type	Date	Amount
1.				
2.				
3.				
4.				
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6.				
7.				
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[Instructions for Part 8](#)

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name						Page Number
Marsteller, Keshia						8
Part 8: Liabilities						
#	Creditor Name	Type	Amount	Year Incurred	Rate	Term
1.	M&T Bank	Mortgage	\$500,001 - \$1,000,000	2016	4.2	30 yrs
2.						
3.						
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[Instructions for Part 9](#)

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name	Page Number
Marsteller, Keshia	9

Part 9: Gifts and Travel Reimbursements

#	Source Name	City/State	Brief Description	Value
1.				
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KESHIA MARSTELLER, PhD

EMPLOYMENT

Johns Hopkins University, Professor, Department of Health and Policy Management 2014-present
National Council for Mental Wellbeing 2021-present

EDUCATION AND TRAINING

Postdoctoral Fellowship – Harvard University 2012-2014
PhD, Public Health – Johns Hopkins University - Bloomberg School of Public Health 2009-2012
MPH - Yale University School of Public Health 2007-2009
BA, Sociology – Mount Holyoke College 2003-2007

GRANTS AND FELLOWSHIP

NIH Intramural Support Grant 2018-present
Chan Zuckerberg Initiative 2019-2020
AMH Intramural Support Grant 2010-2015

HONORS AND AWARDS

Society for Public Health Education Outstanding Mentor Award January 2025
American Public Health Association Young Researcher Award 2013

PROFESSIONAL SERVICE

Executive Board Member, American Public Health Association 2022-present
Director of Health Policy Research Scholars, Robert Wood Johnson Foundation 2019-2021
Advisory Council member, Agency for Mental Health 2018-2019
Johns Hopkins Student Life Advisory Chair 2016-2020

INVITED TALKS

“Aging, mental illness and COVID-19” American Public Health Association Annual Meeting	May 2025
“Treatment resistant depression: A multi-scale approach” University of North Carolina, Chapel Hill	November 2024
“Choosing appropriate language to reduce the stigma around mental illness” European Psychiatric Association Spring Conference	2022
Suicide Prevention Research Priorities in Health Care American Public Health Association Annual Meeting (virtual)	2020
Collaborative Approaches to the Clinical High-Risk State University of California, San Francisco	2015
A Novel Method for Chronic Social Defeat Stress Agency on Mental Health Seminar – Stress and the Brain	2014
A Collaborative Research Agenda for Posttraumatic Stress Disorder European Psychiatric Association Winter Conference	2012

Deputy Director for Programs Funding — Agency for Mental Health

The Deputy Director for Programs Funding engages in policy making and budgetary and performance management oversight in support of a range of AMH-supported research, research training, career development, and scientific resource and technology transfer programs through grants, cooperative agreements, and contracts.

Programs funded include:

- Treatment and preventive interventions research;
- Mental health services research to develop and test service delivery strategies for improving the quality, effectiveness, continuity, and value of mental health services;
- Research training, education, and career development grant mechanisms to cultivate a mental health research workforce that is diverse, skilled in innovative treatment, prevention, and services; and
- Application of innovative technologies, supported through the Small Business Innovation Research (SBIR) and Small Business Technology Transfer (STTR) Programs, to improve screening, diagnosis, clinical assessment, data collection, and quality monitoring tools for clinical trials and services research studies; advance the treatment of mental disorders; and for new approaches to training, supervision, and continuing education for researchers and evidence-based practitioners.

ACE Unit 5:
Part 2 – NE 278 Review
Questions, Answers, and
Remedies

Questions

Johns Hopkins Bloomberg School of Public Health Questions

Salary: Is the amount of salary reported on Part 2 (\$223,000) the amount you received for all of 2024 and 2025 until now?

Leave of Absence: You have indicated that you will be on a leave of absence (LOA) from Johns Hopkins. Can you please provide us with a brief description of the terms of that LOA? Are these terms customary policy?

For purposes of the 278e in particular:

- indicate whether the leave is paid or unpaid;
- specify the duration of the leave; and
- indicate whether your employer will continue to make contributions to any retirement or benefit plan.

Will you have commitments to retain any university responsibilities during your LOA, such as research, teaching, mentoring students, etc.?

TIAA Retirement: You have indicated that you participate in a TIAA sponsored by Johns Hopkins. Please identify the product(s) you hold in the account and the respective asset and income values of each.

Other Associated Interests: Do you have any other assets/sources of income, such as intellectual property, publication royalties, book deals, etc.?

NIH Intramural Support Grant: While this is not reportable on your form, please answer the following:

- What type of grant is this? What does it support?
- Do you personally receive financial support through the grant, such as your salary?
- Are you a PI or Project Lead on the grant?
- Will you have any ongoing responsibilities with respect to this grant?
- What is the duration of the grant?

National Council for Mental Wellbeing Questions

Employment Status:

- What is your employment relationship with this organization?
- Is this ongoing?
- Are you an employee or an independent contractor?
- Is the fee reported on Part 2 reflective of all of 2024 and 2025 until now?

Termination Agreements:

- Will you be terminating your service with NCMW?
- If so, will you have any agreements for severance or other payments owed?

Retirement:

- Are there any additional benefits you receive such as retirement?

Services/Clients:

- What types of services do you provide?
- Do you have clients?
- Are you paid directly by NCMW or by clients?
- Who were your clients in CY 2024 to the present?
- Did any client pay more than \$5,000 to NCMW for your personal services during that time? For any client that paid more than \$5,000 to NCMW for your personal services during that time, please provide their name, city, and state.

Other Items Listed on Resume Questions

Society for Public Health Education Outstanding Mentor Award: Please provide the dollar amount of that award, if any.

Executive Board Member, American Public Health Association: This position is reportable on Part 1.

- Is this a compensated position?
 - If so, what is the type and exact amount of compensation?
- What are the dates and duration of this position?

Advisor Health Policy Research Scholars, Robert Wood Johnson Foundation: This position is reportable on Part 1. Please provide the month/year when you began and when you ended your service in this position.

- Was this position compensated?
 - If so, did it exceed \$5000 in a year?
- Did you receive any employment benefits from this position such as a pension or retirement?

Talk – “Aging, mental illness and COVID-19,” American Public Health Association:

- Did you receive any honorarium for this talk, and if so, what was the exact date of the talk and the exact amount of the honorarium?

Talk – “Treatment resistant depression: A multi-scale approach,” University of North Carolina, Chapel Hill:

- Did you receive any honorarium for this talk, and if so, what was the exact date of the talk and the exact amount of the honorarium?

Spouse's Employment and Related Assets Questions

Johns Hopkins Bloomberg School of Public Health:

- What position does your spouse hold with Johns Hopkins?
- You have indicated that your spouse also participates in a TIAA. Specifically, please indicate which type of product(s) your spouse holds and their respective asset and income values.
- Can you please confirm whether your spouse has any additional financial interests associated with their employment at Johns Hopkins? For example, any awards, honoraria, intellectual property, publication royalties, book deals, etc.?
- Does your spouse personally receive funding from any U.S. government grants or cooperative agreements?

Medidata Solutions:

- What is your spouse's employment relationship with this organization? Specifically, is this ongoing, and is your spouse an employee or an independent contractor?
- Are there any additional benefits your spouse receives such as a pension/retirement?
- What types of services does your spouse provide and to whom?
- How is your spouse paid – by clients, if any, or by Medidata Solutions?

Dassault Systèmes: You indicated that your spouse holds restricted stock units.

- Are these vested or unvested?
- Please report asset and income amounts.
- What employment is this related to? Is this compensation for services?

Other Assets and Income Questions

M&T Bank: With permission, we will remove the name of the bank and replace it with a generic indicator – U.S. Bank. Please confirm this is a cash account.

Fidelity Select Pharmaceuticals and First Trust Nasdaq Pharma:

- Are these the only funds you hold?
- For each of these funds, can you please provide us with the most current actual value of the asset? *Actual values are not reportable*, but we need to know in order to make a conflict of interest determination.

Additional Question: Do you have any other reportable assets/investment income (e.g., life insurance (other than term), real estate, stocks, virtual currency, a college savings plan (529 plan))?

Liabilities Questions

M&T Bank Mortgage: Do you receive rental income from your personal residence? If so, you should report that income on Part 6. If not, you do not have to report the mortgage, and we will remove it with your permission.

Additional Question: Do you have any other reportable liabilities (e.g., student loans for yourself or others)? See the [Part 8 section of the Public Financial Disclosure Guide](#) for examples of reportable liabilities and instructions for reporting them.

Answers

On the following pages are Keshia's answers to the questions we asked.

Step 1: Technical Reporting

Instructions: With your team, review the answers to the questions, and revise Keshia's NE draft. You can add comments in the PDF version included in this Guide, use the Excel version on the ACE course page, or print and revise the draft by hand.

Johns Hopkins Bloomberg School of Public Health Questions

Salary: Is the amount of salary reported on Part 2 (\$223,000) the amount you received for all of 2024 and 2025 until now? **Yes.**

Leave of Absence: You have indicated that you will be on a leave of absence (LOA) from Johns Hopkins. Can you please provide us with a brief description of the terms of that LOA? Are these terms customary policy? **Per the University's standard policy for LOAs, I will be allowed up to 2 years of unpaid sabbatical, during which time I will retain my employment status, my participation in the retirement plan, and certain benefits such as tuition remission and access to university facilities.**

For purposes of the 278e in particular:

- indicate whether the leave is paid or unpaid; **Unpaid.**
- specify the duration of the leave; and **2 years, may request extension.**
- indicate whether your employer will continue to make contributions to any retirement or benefit plan. **No TIAA contributions during LOA.**

Will you have commitments to retain any university responsibilities during your LOA, such as research, teaching, mentoring students, etc.? **The only continuing responsibilities I will have are to continue to advise my PhD students in the Department of Health Policy and Management.**

TIAA Retirement: You have indicated that you participate in a TIAA sponsored by Johns Hopkins. Please identify the product(s) you hold in the account and the respective asset and income values of each.

TIAA Traditional, 100 – 250k

TIAA Access Champlain MidCap Institutional, 15 – 50k

Income values for each are none or < \$201.

Other Associated Interests: Do you have any other assets/sources of income, such as intellectual property, publication royalties, book deals, etc.? **No IP, royalties, or book deals.**

NIH Intramural Support Grant: While this is not reportable on your form, please answer the following:

- What type of grant is this? What does it support? **This is a 5-year grant to support the work of the Department of Health Policy and Management. It provides monies to**

support pre- and post-doctoral students in conducting research to identify and promulgate solutions for reducing and eliminating health disparities.

- Do you personally receive financial support through the grant, such as your salary?

No, I do not. But it does support some of the doctoral students I advise.

- Are you a PI or Project Lead on the grant?

No, the Chair of the Department is named.

- Will you have any ongoing responsibilities with respect to this grant?

Some of my doctoral students are engaged in research being funded under the grant.

- What is the duration of the grant? It is a 5-year grant.

National Council for Mental Wellbeing Questions

Employment Status:

- What is your employment relationship with this organization? **I have a renewable contract with NCMW to provide consulting services.**
- Is this ongoing? **See above.**
- Are you an employee or an independent contractor? **I am not an employee and do not receive any benefits from them.**
- Is the fee reported on Part 2 reflective of all of 2024 and 2025 until now? **The amount listed in Part 2 does represent fees for '24 until now.**

Termination Agreements:

- Will you be terminating your service with NCMW?
- If so, will you have any agreements for severance or other payments owed?

Upon my appointment as Deputy Director, I will terminate my consulting contract with the Council. Per my current contract, upon termination, I will receive any fees owed as of the date of termination. I believe the fees owed will likely be in the range of \$2,000 – \$3,000.

Retirement:

- Are there any additional benefits you receive such as retirement? **No.**

Services/Clients:

- What types of services do you provide?
- Do you have clients?

I provide advisory consultations to a variety of mental healthcare service providers on ways they can improve delivery of services to their patients.

- Are you paid directly by NCMW or by clients? **NCMW.**
- Who were your clients in CY 2024 to the present?
- Did any client pay more than \$5,000 to NCMW for your personal services during that time? For any client that paid more than \$5,000 to NCMW for your personal services during that time, please provide their name, city, and state.

My clients are listed below and all paid more than \$5000 to NCMW.

Mental Health America – Frederick, MD

Sheppard Community Services – Catonsville, MD

Healthcare Living for Families – Windsor Mill, MD

Other Items Listed on Resume Questions

Society for Public Health Education Outstanding Mentor Award: Please provide the dollar amount of that award, if any. **The award was \$5,000.**

Executive Board Member, American Public Health Association: This position is reportable on Part 1.

- Is this a compensated position?
 - If so, what is the type and exact amount of compensation?

I receive no compensation, only travel reimbursements.

- What are the dates and duration of this position?

It is a 2-year term. It began 2/2024. I would like to retain this position, if possible.

Advisor Health Policy Research Scholars, Robert Wood Johnson Foundation: This position is reportable on Part 1. Please provide the month/year when you began and when you ended your service in this position. **7/2019 – 6/2021.**

- Was this position compensated?
 - If so, did it exceed \$5000 in a year? **Yes.**
- Did you receive any employment benefits from this position such as a pension or retirement? **No benefits or retirement.**

Talk – “Aging, mental illness and COVID-19,” American Public Health Association:

- Did you receive any honorarium for this talk, and if so, what was the exact date of the talk and the exact amount of the honorarium? **05/03/2025. I received \$1,000.**

Talk – “Treatment resistant depression: A multi-scale approach,” University of North Carolina, Chapel Hill:

- Did you receive any honorarium for this talk, and if so, what was the exact date of the talk and the exact amount of the honorarium? **No honorarium. Executive Board Members are not compensated for talks.**

Spouse's Employment and Related Assets Questions

Johns Hopkins Bloomberg School of Public Health:

- What position does your spouse hold with Johns Hopkins? **Professor of Biostatistics.**
- You have indicated that your spouse also participates in a TIAA. Specifically, please indicate which type of product(s) your spouse holds and their respective asset and income values.

TIAA Traditional, 100 – 250k

TIAA Access Champlain MidCap Institutional, 15 – 50k

Income values for each are none or < \$201.

- Can you please confirm whether your spouse has any additional financial interests associated with their employment at Johns Hopkins? For example, any awards, honoraria, intellectual property, publication royalties, book deals, etc.? **None.**
- Does your spouse personally receive funding from any U.S. government grants or cooperative agreements? **The Biostatistics department participates in cooperative agreements and other partnerships (clinical trials) with various U.S. government health agencies, and my spouse participates in one with the Department of Health and Human Services. My spouse does not personally receive any funding through that agreement, or through any grants.**

Medidata Solutions:

- What is your spouse's employment relationship with this organization? Specifically, is this ongoing, and is your spouse an employee or an independent contractor? **My spouse has a 3-year, renewable contract to provide consulting services on an as-needed basis. My spouse is not an employee.**
- Are there any additional benefits your spouse receives such as a pension/retirement? **No.**
- What types of services does your spouse provide and to whom? **My spouse provides advisory and data analytics services directly to Medidata.**
- How is your spouse paid – by clients, if any, or by Medidata Solutions? **By Medidata Solutions.**

Dassault Systèmes: You indicated that your spouse holds restricted stock units.

- Are these vested or unvested? **Unvested.**
- Please report asset and income amounts. **Asset, 1 – 15k; Income, none.**
- What employment is this related to? Is this compensation for services? **This is part of the compensation my spouse received for services to Medidata.**

Other Assets and Income Questions

M&T Bank: With permission, we will remove the name of the bank and replace it with a generic indicator – U.S. Bank. Please confirm this is a cash account. **This is a checking account. Please remove the name.**

Fidelity Select Pharmaceuticals and First Trust Nasdaq Pharma:

- Are these the only funds you hold? **Yes, currently.**
- For each of these funds, can you please provide us with the most current actual value of the asset? *Actual values are not reportable*, but we need to know in order to make a conflict of interest determination.

Fidelity Select Pharmaceuticals, \$12, 859

First Trust Nasdaq Pharma, \$41, 649

Additional Question: Do you have any other reportable assets/investment income (e.g., life insurance (other than term), real estate, stocks, virtual currency, a college savings plan (529 plan)))? **None.**

Liabilities Questions

M&T Bank Mortgage: Do you receive rental income from your personal residence? If so, you should report that income on Part 6. If not, you do not have to report the mortgage, and we will remove it with your permission. **Okay. Please remove. No rental income.**

Additional Question: Do you have any other reportable liabilities (e.g., student loans for yourself or others)? See the [Part 8 section of the Public Financial Disclosure Guide](#) for examples of reportable liabilities and instructions for reporting them. **None.**

Remedies

Email from Deborah Ortiz, DAEO

Ethics Team —

We're currently working with Keshia to resolve some concerns that we had from her pre-clearance documents. We wanted to keep you in the loop:

1. Johns Hopkins

The Deputy Director of Programs Funding will not be able to avoid all matters affecting Johns Hopkins, particularly the Bloomberg School. JHU is a key stakeholder in all of our programs. The Deputy Director has to establish funding priorities, based upon evaluation of performance measures of existing programs and new directives for future funding, as well as Congressional appropriations. Funding decisions from this office can have direct effects on stakeholders individually and as a group.

Be prepared to provide information about all options for dealing with any ethics issues related to JHU, from recusal to waivers/authorizations.

2. NCMW and Clients

NCMW and Mental Health America are significant players amongst our grantees. Issues are similar to JHU but not as far reaching. Other NCMW clients, no issues.

Same brief – all options.

3. Medidata and Dassault

In FY 25-26 we have committed to creating funding mechanisms/opportunities to support some virtual technology research and projects. Medidata and Dassault Systèmes are currently key players in this area. Keshia will have to be involved at the program level at the very least.

Same brief – all options.

4. Divestiture of Assets

Pharma is involved in/affected by all of our extramural programs. Pharma is a critical component of many research programs. The Chief of Staff wants to know if total divestiture is necessary or if there are alternatives.

Options – including relief if we ask for total divestiture.

5. Continued Service on Executive Board of American Public Health Association

The Director does not see this as an issue we have to resolve immediately. They would like to discuss this with Keshia once she is on board. There are advantages to having her in that position.

Same brief – all options.

Group Exercises

Group 1: 18 USC 208 COI Analysis and Remedies for Johns Hopkins University and the National Council for Mental Wellbeing

Instructions: Follow the instructions below. Draft/prepare responses on the following page.

1. Describe the 208 COI with each entity:
 - JHU and
 - NCMW.
2. Identify and explain any applicable regulatory exemptions. (See 5 CFR 2640.)
3. For any proposed recusals, identify and discuss:
 - Scope (types of matters/types of participation),
 - Duration,
 - How identified/effectuated, and
 - Gatekeeping.
4. For potential 208(b)(1) waivers, explain:
 - Scope of proposed coverage (types of matters/participation),
 - Legal standard for issuance,
 - Approval process/timing, and
 - Records/reporting requirements.
5. When considering the pros and cons of each remedy, considerations should include:
 - Effects on the programs and operations of the agency,
 - Potential for reputational harm to the employee or agency,
 - Complexity of implementing a given remedy,
 - Stakeholders required to assist with and/or approve the remedy, and
 - Transparency and reporting requirements.

Group 2: 5 CFR 2635.502 Analysis and Remedies for Johns Hopkins University, the National Council for Mental Wellbeing, and Clients

Instructions: Follow the instructions below. Draft/prepare responses on the following page.

1. Describe the impartiality analysis for each entity:
 - JHU,
 - NCMW, and
 - Former clients, especially Mental Health America.
2. Identify and explain the effect of any applicable regulatory exemption or 208(b)(1) waiver on the above analysis.
3. For any proposed recusals, identify and discuss:
 - Scope (types of matters/types of participation),
 - Duration,
 - How identified/effectuated, and
 - Gatekeeping.
4. For potential 2635.502 authorizations, explain:
 - Scope of proposed coverage (types of matters/participation),
 - Legal standard for issuance,
 - Approval process/timing, and
 - Records/reporting requirements.
5. When considering the pros and cons of each remedy, considerations should include:
 - Effects on the programs and operations of the agency,
 - Potential for reputational harm to the employee or agency,
 - Complexity of implementing a given remedy,
 - Stakeholders required to assist with and/or approve the remedy, and
 - Transparency and reporting requirements.

Group 3: Ethics Analysis and Remedies for Continued Participation on Executive Board, American Public Health Association

Instructions: Follow the instructions below. Draft/prepare responses on the following page.

1. Describe the COI analysis for each:
 - Service in a personal capacity and
 - Service in an official capacity.
2. Identify and explain the effect of any applicable regulatory exemption on the above analysis.
3. For any proposed recusals, identify and discuss:
 - Scope (types of matters/types of participation),
 - Duration,
 - How identified/effectuated, and
 - Gatekeeping.
4. For any potential 208(b)(1) waivers, explain:
 - Scope of proposed coverage (types of matters/participation),
 - Legal standard for issuance,
 - Approval process/timing, and
 - Records/reporting requirements.
5. Address any other ethics concerns arising from this service.
6. When considering the pros and cons of each remedy, considerations should include:
 - Effects on the programs and operations of the agency,
 - Potential for reputational harm to the employee or agency,
 - Complexity of implementing a given remedy,
 - Stakeholders required to assist with and/or approve the remedy, and
 - Transparency and reporting requirements.

Group 4: Ethics Analysis and Remedies for Spousal Employment and Related Holdings

Instructions: Follow the instructions below. Draft/prepare responses on the following page.

1. Describe the 208 COI analysis, and where applicable, the 2635.502 analysis, for:
 - Medidata Solutions and
 - Dassault Systèmes.
2. Identify and explain any applicable regulatory exemptions. (See 5 CFR 2640.)
3. For any proposed 208 and .502 recusals, identify and discuss:
 - Scope (types of matters/types of participation),
 - Duration,
 - How identified/effectuated, and
 - Gatekeeping.
4. For any proposed divestiture, explain:
 - Scope (partial/complete),
 - Timing,
 - Availability of certificate of divestiture,
 - Process for acquiring, and
 - Any limitations on future investments.
5. For any proposed 208(b)(1) waiver or 2635.502 authorization, explain:
 - Scope of proposed coverage (types of matters/participation),
 - Legal standard for issuance,
 - Approval process/timing, and
 - Records/reporting requirements.
6. When considering the pros and cons of each remedy, considerations should include:
 - Effects on the programs and operations of the agency,

- Potential for reputational harm to the employee or agency,
- Complexity of implementing a given remedy,
- Stakeholders required to assist with and/or approve the remedy, and
- Transparency and reporting requirements.

Group 5: Ethics Analysis and Remedies for Sector Fund Holdings

Instructions: Follow the instructions below. Draft/prepare responses on the following page.

1. Describe the 208 COI analysis for the sector fund holdings.
2. Identify and explain the effect of any applicable regulatory exemption on the above analysis.
3. For any proposed recusals, identify and discuss:
 - Scope (types of matters/types of participation),
 - Duration,
 - How identified/effectuated, and
 - Gatekeeping.
4. For any proposed divestiture explain:
 - Scope (partial/complete),
 - Timing,
 - Availability of certificate of divestiture,
 - Process for acquiring, and
 - Any limitations on future investments.
5. When considering the pros and cons of each remedy, considerations should include:
 - Effects on the programs and operations of the agency,
 - Potential for reputational harm to the employee or agency,
 - Complexity of implementing a given remedy,
 - Stakeholders required to assist with and/or approve the remedy, and
 - Transparency and reporting requirements.

