

BLM Guide for conducting an Initial Review of the OGE Form 450, OGE Form 450a and DI-1993

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Introduction

When you perform an initial review, you are confirming that financial filers (employee) have properly completed all applicable portions of the form. If the employee has not provided all necessary information, you are asked to e-mail the financial filers to obtain the missing information or return the form to the employee so that the employee can provide additional information or make corrections. There are some instances, discussed below, where you are may add the additional information yourself.

An initial review is considered completed once you have reviewed the OGE Form 450, and you have determined whether any information is missing or requires clarification. Once this determination has been made you must initial and date the OGE Form 450 at the top of the report, just to the right of the "Date Received By Agency" Box. Write "IR" (initial review), your initials, and the date to indicate that you have completed the initial review. On the OGE Form 450a write "IR", your initials, and the date at the bottom of the form, under "Notes", to the left of the "Date Received By Agency" column. **If you determine that the form is incomplete: 1. Return the report to the employee, 2.) Collect all the missing information (by e-mail) or 3.) Make the necessary corrections to the form prior to mailing the reports to the NOC for final review and certification.**

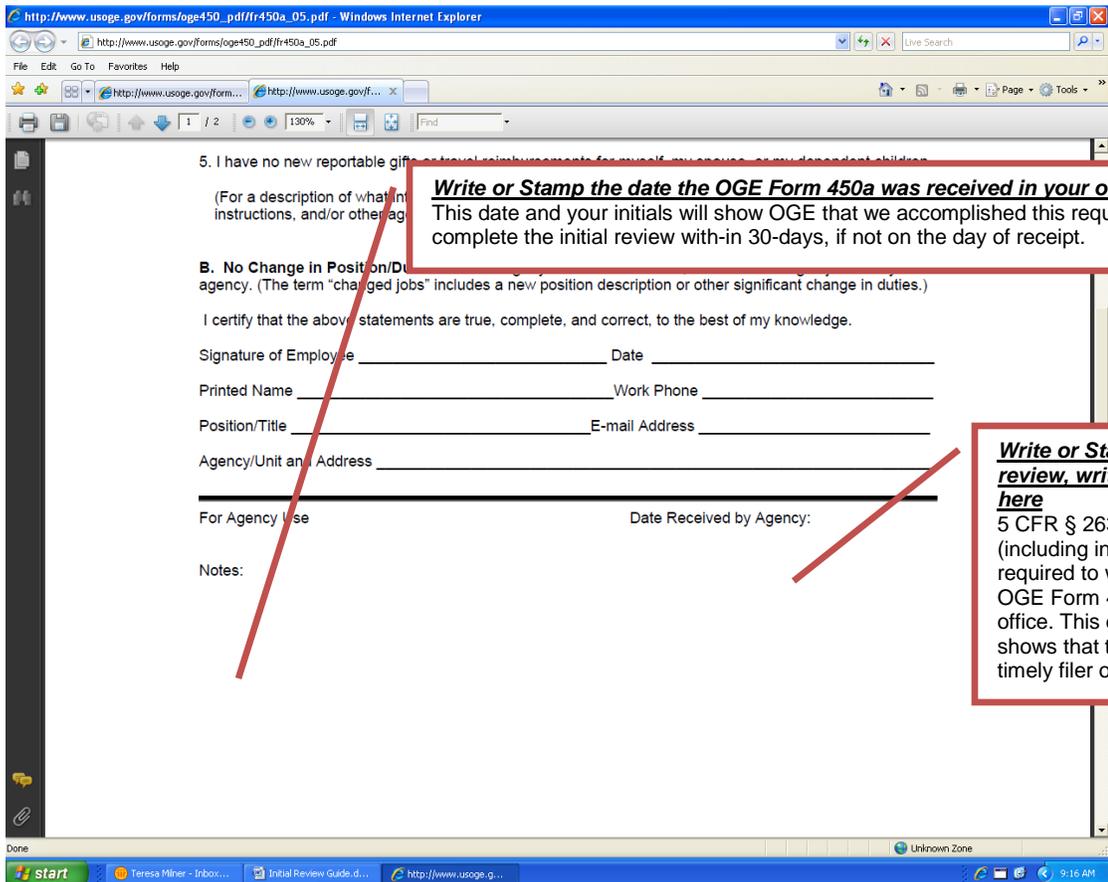
The screenshot shows the OGE Form 450 in a web browser. Two red callout boxes provide specific instructions:

- Callout 1 (top right):** **Write or Stamp the date the OGE Form 450 was received in your office here.** 5 CFR § 2634.605 reviewing offices (including initial reviewing offices) are required to write or stamp the date the OGE Form 450 was received in their office. This date is critical because it shows that the employee was either a timely filer or a late filer.
- Callout 2 (middle right):** **Write or Stamp the date of initial review, write "IR" and your initials here** You must complete the initial review with-in 30-days, if not on the day of receipt.

The form itself includes the following sections:

- Date Received by Agency** (with a callout pointing to the box)
- Page Number** (with a callout pointing to the box)
- CONFIDENTIAL FINANCIAL DISCLOSURE** (Executive Branch)
- Employee's Name (Print last, first, middle initial)**
- Position/Title**, **E-mail Address**, **Grade**
- Agency**, **Branch/Unit and Address**
- Work Phone**, **Reporting Status** (New Entrant Annual)
- If New Entrant, Date of Appointment to Position (mm/dd/yy)**
- Check box if Special Government Employee (SGE)** (with a definition: 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 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 type="checkbox"/> |
| III. I have reportable outside positions for myself. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| IV. I have reportable agreements or arrangements for myself. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |



Write or Stamp the date the OGE Form 450a was received in your office here.
This date and your initials will show OGE that we accomplished this requirement. You must complete the initial review with-in 30-days, if not on the day of receipt.

Write or Stamp the date of initial review, write "IR" and your initials here
5 CFR § 2634.605 reviewing offices (including initial reviewing offices) are required to write or stamp the date the OGE Form 450a was received in their office. This date is critical because it shows that the employee was either a timely filer or a late filer.

As the initial reviewer, you must ensure that any incomplete information is provided before the financial disclosure form is forwarded to the Confidential Financial Disclosure Lead (CFDL) at the National Operations Center.

Like This . . .

OGE Form 450, 5 CFR Part 2634, Subpart I
U.S. Office of Government Ethics (June 2009)
(Replaces January 2007 edition)

Date Received by Agency: JAN 04 2010 Form Approved OMB No. 3209-0006
Page Number

CONFIDENTIAL FINANCIAL DISCLOSURE REPORT
Executive Branch

| | | |
|--|--|---|
| Employee's Name (Print last, first, middle initial) | | E-mail Address |
| Position/Title | | Grade |
| Agency | | Branch/Unit and Address |
| Work Phone | Reporting Status New Entrant <input type="checkbox"/> Annual <input type="checkbox"/> | If New Entrant, Date of Appointment to Position (mm/dd/yy) |
| 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 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 type="checkbox"/> |
| III. I have reportable outside positions for myself. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

(Instructions and/or other agency guidance.)

B. No Change in Position/Duties. Since filing my last OGE Form 450, I have not changed jobs at my agency. (The term "changed jobs" includes a new position description or other significant change in duties.)
I certify that the above statements are true, complete, and correct, to the best of my knowledge.

Signature of Employee _____ Date: _____
Printed Name _____ Work Phone _____
Position/Title _____ E-mail Address _____
Agency/Unit and Address _____

For Agency Use _____ Date Received by Agency _____

Notes:
IR Adm
JAN 04 2010 JAN 04 2010

OGE Form 450

OGE Form 450a

We are requesting that you batch initially reviewed forms, and mail them via a secure means (FEDEX/UPS) to the NOC. Please send batched forms to the following address:

FEDEX/UPS address:
BLM / NOC / OC-201
Denver Federal Center Building 50
Denver, Colorado 80225
303-236-3569
Attn: CFDL Milner
Confidential Financial Disclosure Lead

Recordkeeping

With the large numbers of BLM confidential filers, quality record-keeping is essential to ensure that the process is run accurately, that records are maintained in compliance with Office of Government Ethics (OGE) audit standards, and that the private information of employees are safeguarded and secured. The following record-keeping practices are strongly recommended:

Protect employee privacy by locking the reports in a secure location at night, and don't leave them on your desk when you go to lunch, or are otherwise away from your desk.

If you email a filer to request additional information or return an employee's report, annotate, initial and date this on the OGE Form 450 in the "Comments of Reviewing Officials" section at the bottom of page 1 and on the OGE Form 450a in the "Notes" section at the bottom of the page. Retain copies of emails sent to filers requesting additional information and attach your e-mails and their response to the back to the form. All these records can be subject to review during an OGE audit.

Ensure that each employee's forms are stapled, **not paper clipped or loose**. Paper clipped and loose forms have a habit of commingling with other employee's forms. **Only forward to the NOC those pages of the form that have information on them, and do not send the instructions with the forms.**

Like this . . .

The image shows two forms from the Office of Government Ethics (OGE). The top form is OGE Form 450, which includes sections for filer information, a certification statement, and a section for reviewers' use only. The bottom form is OGE Form 450a, which includes sections for agency use and notes. Handwritten notes and annotations are present on both forms. A blue box labeled "OGE Form 450" points to the top form, and another blue box labeled "OGE Form 450a" points to the bottom form. A blue line is drawn across the middle of the forms.

OGE Form 450

OGE Form 450a

CFDL will update the log on a regular basis, and send you updates on a weekly basis. In this way, you will be able to confirm that the NOC actually receives all the reports that you have mailed.

Initial Review of the OGE Form 450

Page 1

Does the form look like this form? Is the OGE Form 450 dated June 2008? If not the employee has filed the wrong form.

Write or Stamp the date the OGE Form 450 was received in your office here.

OGE Form 450, 5 CFR Part 2634, Subpart I
U.S. Office of Government Ethics (June 2008)
(Replaces January 2007 edition)

Date Received by Agency

Form Approved
OMB No. 3209-0006

Page Number

CONFIDENTIAL FINANCIAL DISCLOSURE REPORT
Executive Branch

Employee's Name (Print last, first, middle initial)

Did the employee put the page number on each page of his/her report?

Position/Title

Grade

Write or Stamp the date of initial review and write your initials here

Branch/Unit and Address

A diagram of the OGE Form 450 with several callout boxes. A blue box at the top asks if the form is the correct version (dated June 2008). A red box points to the 'Date Received by Agency' field, asking for the date the form was received. Another red box points to the 'Page Number' field, asking if the employee numbered each page. A blue box points to the 'Employee's Name' field, asking if the employee put the page number on each page. A red box at the bottom left asks for the date of initial review and initials. The form itself is titled 'CONFIDENTIAL FINANCIAL DISCLOSURE REPORT Executive Branch' and includes fields for name, position, grade, and address.

When the employee filed the wrong OGE Report 450

If the employee submitted a previous version of the report or the wrong report, return the report to the employee for completion of the appropriate report. The correct report may be found at:

OGE Report 450 → http://www.usoge.gov/reports/oge450_pdf/oge450_automated.pdf

OGE Report 450-A → http://www.usoge.gov/reports/oge450_pdf/fr450a_05.pdf.

Any other versions of the report cannot be accepted.

What if the employee did not number the pages?

If the employee did not number the pages of their form you **may add page numbers to those pages of the report that have information on them** so long as they can clearly ascertain that all pages of the report belong to that specific employee.

OGE Form 450
U.S. Office of Government Ethics (June 2008)
(Replaces January 2007 edition)

Form Approved
OMB No. 3209-0006

Date Received by Agency Page Number

CONFIDENTIAL FINANCIAL DISCLOSURE REPORT
Executive Branch

| | | | |
|--|---|--|--|
| Employee's Name (Print last, first, middle initial) | | E-mail Address | |
| Position/Title | | Grade | |
| Agency | | Branch/Unit and Address | |
| Work Phone | Reporting Status New Entrant <input type="checkbox"/> Annual <input type="checkbox"/> | If New Entrant, Date of Appointment to Position (mm/dd/yy) | |
| 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 a | | |
| 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.

Did the employee print his/her full FPPS name on each page of the OGE Form 450?

Did the employee provide an e-mail address?

Did the employee provide position title and grade?

Did the employee provide an organization name and code (i.e., HR-710)?

Has the filer indicated whether he/she is a "New Entrant" or an "Annual Filer?" If the filer checked the "new entrant" box, did the employee enter the date (month, day, and year) that he/she occupied the confidential position?

Did the employee provide a work phone number?

Note: Filers do not need to fill out the sections pertaining to Special Government Employees.

What If the employee did not print their full FPPS name on their OGE Form 450?

There are several reasons we ask you to carefully check that the employee used the full FPPS name:

- OGE auditors expect a high level of detail when confidential reports are periodically reviewed during program reviews.
- Reviewing the name on the form helps to make certain that pages of other employees' reports are not mixed in with those of other employees.
- If the employee uses a name other than their FPPS name the CFDL will not know who they are and will treat their form as not received.

If the employee did not put their name on each page of the report or used a name other than the full FPPS name, **reviewers should add it to the pages so long as the reviewer can clearly ascertain that all the pages belong to that specific employee** (e.g., the report came in a blue envelope; it was stapled; the handwriting on all pages matches, etc.). Remember to note the actions you took, initial, and date on the OGE Form 450 in the "Comments of Reviewing Officials" section at the bottom of page 1.

What If the filer did not print their e-mail address, position title and grade, organization name and organization code, and work phone Number?

If the employee did not put their e-mail Address, position title and grade, organization name and organization code, and work phone number on the report, **reviewers should add the missing information to this page**. Remember to note the actions you took, initial, and date on the OGE Form 450 in the “Comments of Reviewing Officials” section at the bottom of page 1.

Who is a new entrant?

A “new entrant” is an employee new to the BLM; or an employee that was not identified as “confidential” during the last filing cycle, but has been designated as “confidential” for the 2009 filing cycle. **“New entrants” must file the OGE Report 450, not the OGE Form 450A.**

What if the employee did not select a reporting status?

You determine if the employee is a new entrant or an annual filer, check the appropriate box. If the employee is a new entrant you must also provide the date they entered into the financial filer’s position. Remember to note the actions you took, initial, and date on the OGE Form 450 in the “Comments of Reviewing Officials” section at the bottom of page 1.

Special Note

The employee does not need to fill out the sections pertaining to Special Government Employees.

Step 1: Read the instructions on pages 1 and 2.

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 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 type="checkbox"/> |
| III. I have reportable outside positions for myself. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| IV. I have reportable agreements or arrangements for myself. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| NOTE: Statement V is for annual 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 | Date (mm/dd/yy) |
| <input type="text"/> | <input type="text"/> |

FOR REVIEWERS' USE ONLY:

On the basis of information contained in this report, I conclude that the filer is in compliance with the ethics 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) |
| <input type="text"/> | <input type="text"/> |
| E-mail Address | Phone Number |
| <input type="text"/> | <input type="text"/> |
| Signature and Title of Agency's Final Reviewing Official | Date (mm/dd/yy) |
| <input type="text"/> | <input type="text"/> |
| Comments of Reviewing Officials | |
| <input type="text"/> | |
| (Check box if continued on additional page <input type="checkbox"/>) | |

Did the employee answer "Yes" or "No" to questions I, II, III, IV, and/or V?

Did the employee sign and date the first page of the OGE Report 450, and is the signature an original signature?

Supervisors are not required to sign and date the OGE Form 450. As a reviewer conducting an initial review, please do not sign and the OGE Form 450 here. Only write or Stamp the date of initial review, write "IR" and your initials at the top of this page.

What if the employee did not answer questions I through V?

You may e-mail the employee, let them know they did not answer the questions, ask them the questions and when you receive their response answer the questions according to their response. Remember to write your initials close to "step 2" and to note the actions you took, initial, and date on the OGE Form 450 in the "Comments of Reviewing Officials" section at the bottom of page 1. Finally, remember to staple a copy of your e-mail correspondence and their response to their form. Retain copies of emails sent to filers requesting additional information and attach your e-mails and their response to the back to the form.

OR

You may return the form to the employee and ask them to complete the form by answering the questions. Remember to note the actions you took, initial, and date on the OGE Form 450 in the "Comments of Reviewing Officials" section at the bottom of page 1.

Special Note

New entrant filers do not need to answer question V. Annual filers are require to answer questions I through V.

What if the employee answered “yes” to any of questions I through V?

If the employee answered “Yes” to questions I, II, III, IV **and/or** V on the first page they must also attach and complete the other corresponding portions of the report. For Example: If the filer checked “Yes” for Section II (reportable liabilities), the employee should submit a signed and completed page 1, and also complete and attach the corresponding Part II of the Report (Liabilities). Retain copies of emails sent to filers requesting additional information and attach your e-mails and their response to the back to the form.

What if the employee answers “no” to all of questions I through V?

If the employee answered “No” to all five questions, the filer only needs to **submit the first page of the report. Please forward to the NOC the completed first page of the report. Do not submit a copy of the instructions.**

What if the employee forgot to sign and date their OGE Form 450?

If the employee forgot to sign and/or date their form or the signature is not an original you must return the form to the employee, asking them to correct and complete the form. Remember to note the actions you took, initial, and date on the OGE Form 450 in the “Comments of Reviewing Officials” section at the bottom of page 1. Retain copies of emails sent to filers requesting additional information and attach your e-mails and their response to the back to the form.

| | |
|---|-------------|
| Employee's Name (Print last, first, middle initial) | Page Number |
|---|-------------|

Part I: Assets and Income

| | |
|---|---|
| Report for Yourself, Spouse, and Dependent Child: | |
| <p>Assets with a net value greater than \$10,000 held for investment during the reporting period, including:</p> <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 general family fund name) - Holdings of retirement plans, such as 401(k)s or IRAs (list each holding except diversified mutual funds) - Holdings of investment life insurance - Holdings of variable annuities - Defined benefit pension plans provided by a former employer (include the name of the employer) | <p>Did the employee put the page number on each page of his/her report?</p> <ul style="list-style-type: none"> • 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 • Diversified mutual funds, such as ABC Equity Value Fund or XYZ Large Capital Fund • U.S. Government Treasury bonds, bills, notes, and savings bonds • 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"> • For yourself: (1) all sources of salary, fees, commissions, and other earned income greater than \$200, (2) honoraria greater than \$200, and (3) other non-investment income such as scholarships, prizes, and gambling income greater than \$200 • For your spouse: (1) all sources of salary, fees, commissions, and other earned income greater than \$1,000, and (2) honoraria greater than \$200 | <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. |
| 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

Did the employee answer "yes" to question I on page 1? If they did they must complete this section.

| Specific stock, bond, sector mutual fund, or other asset or investment. You may add the ticker symbol to the full name. | held |
|---|--------------------------|
| Name of Employer or Business; Source of Fees, Commission, or Honoraria (You may distinguish any entry for a family member by adding S, W, or J for jointly 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"/> |

Did the employee provide the full, specific names of all assets, including full names of funds and stocks [not just their symbols (e.g., VBMFX), or the name of the family of funds, such as "Fidelity" or "Oppenheimer"]?

What if the employee answered “no” to question I on page 1?

If the employee has listed any stocks or funds in this section you must go back to page 1 and change their answer to question I from “no” to “yes”. Remember to note the actions you took, initial, and date on the OGE Form 450 in the “Comments of Reviewing Officials” section at the bottom of page 1. Retain copies of emails sent to filers requesting additional information and attach your e-mails and their response to the back to the form.

If the employee did not list any stocks or funds in this section you do not need to provide this page (with page 1) to the NOC. **Submit the first page of the report. Please forward to the NOC the completed first page of the report. Do not submit a copy of the instructions.**

What if the employee did not provide the full names of the funds and stocks or only provided the stock symbol?

Please email the employee for the additional information, or if there is a large number of holdings return the report and request that the additional information be provided. Remember to note the actions you took, initial, and date on the OGE Form 450 in the “Comments of Reviewing Officials” section at the bottom of page 1. Retain copies of emails sent to filers requesting additional information and attach your e-mails and their response to the back to the form.

Special Note

Employees should not provide annual financial statements or brokerage reports in lieu of completing part I. If they do, return the report to the employee so that Part 1 can be completed by the employee. Remember to note the actions you took, initial, and date on the OGE Form 450 in the “Comments of Reviewing Officials” section at the bottom of page 1. Retain copies of emails sent to filers requesting additional information and attach your e-mails and their response to the back to the form.

OGE Form 278e
U.S. Office of Government Ethics (2009-2010)
(Replaces January 2007 edition)

Form Approved
OMB No. 3209-0006

Did the filer print his/her full FPPS name on each page of the OGE Form 450?

Did the employee put the page number on each page of his/her report?

| | |
|---|-------------|
| Employee's Name (Print last, first, middle initial) | Page Number |
|---|-------------|

Part II: Liabilities

| | |
|--|--|
| Report for Yourself, Spouse, or Child: | Did the employee answer "yes" to question II on page 1? If they did they must complete this section. |
| <ul style="list-style-type: none"> A liability over \$10,000 during the reporting period, other than a loan from a financial institution or business entity granted on terms made available to the general public A loan over \$10,000 from such as a friend or a business | <ul style="list-style-type: none"> Account, from a financial institution or business entity granted on terms made available to the general public |
| Did the employee report the full name of any creditors/liabilities, a brief description of what the credit is for (e.g., an education loan) and the city and state where the creditors are located? | |

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 | |

Did the employee answer "yes" to question III on page 1? If they did they must complete this section.

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. You must report as an officer, trustee, general partner, or consultant of any of the following: <ul style="list-style-type: none"> Corporation, partnership, trust Non-profit or volunteer organization Educational institution | <ul style="list-style-type: none"> Any position with a religious entity |
| Did the employee report any paid or unpaid positions held outside of the US Government? Did the employee indicate if they are serving as an officer or board of directors' member of an outside organization, either in their private capacity or on behalf of the BLM? Did the employee report the name and type of the organization, the position held, and the city and state for any such positions? If the employee indicated that this is a paid position, did they also report it on page 2 as an asset? | |

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 | | | <input type="checkbox"/> |
| 2 | | | <input type="checkbox"/> |
| 3 | | | <input type="checkbox"/> |
| 4 | | | <input type="checkbox"/> |
| 5 | | | <input type="checkbox"/> |
| 6 | | | <input type="checkbox"/> |

What if the employee answered “no” to question II and/or III on page 1?

If the employee has listed any liabilities and/or outside positions in this section you must go back to page 1 and change their answer to question II and/or III from “no” to “yes”. Remember to note the actions you took, initial, and date on the OGE Form 450 in the “Comments of Reviewing Officials” section at the bottom of page 1. Retain copies of emails sent to filers requesting additional information and attach your e-mails and their response to the back to the form.

If the employee did not list any liabilities and/or outside positions in this section you do not need to provide this page (with page 1) to the NOC. **Submit the first page of the report. Please forward to the NOC the completed first page of the report. Do not submit a copy of the instructions.**

What if they employee did not provide the all of the requested information?

If the employee did not provide complete information, email the employee for additional information. Remember to note the actions you took, initial, and date on the OGE Form 450 in the “Comments of Reviewing Officials” section at the bottom of page 1. Retain copies of emails sent to filers requesting additional information and attach your e-mails and their response to the back to the form.

What if the employee indicated that they position is a paid position, but they did not report the position as an asset on page 2?

Contact the employee by e-mail; ask them to verify that the position is a paid position. If they affirm that it is a paid position, write the name of the company on page 2 under the assets section. Remember to note the actions you took, initial, and date on the OGE Form 450 in the “Comments of Reviewing Officials” section at the bottom of page 1. Retain copies of emails sent to filers requesting additional information and attach your e-mails and their response to the back to the form.

Did the filer print his/her full FPPS name on each page of the OGE Form 450?

Did the employee put the page number on each page of his/her report?

OGE Form 450, 5 CFR Part 2634, Subpart I
U.S. Office of Government Ethics (June 2008)
(Replaces January 2007 edition)

Form Approved
OMB No. 3209-0006

Employee's Name (Print last, first, middle initial)

Page Number

Part IV: Agreements or Arrangements

Report Yes Did the employee answer "yes" to question IV on page 1? If they did they must complete this section.

- Continued by a former employer
- A leave of absence
- Future employment
- Continuation of payments (severance)

Examples of an agreement are continuing participation in an employee pension or benefit plan maintained by a former employer, or a leave of absence, or can be with a Future employment, including date you accepted employment offer, or can for the continuation of payment by a former employer (including severance payments). Did the employee provide the name, city, state, and a brief description of the agreement or arrangement?

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

| Entity with which you have an agreement or arrangement (include city and state where entity is located) | Terms of Agreement or Arrangement |
|---|-----------------------------------|
| 1 | |
| 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"> Travel-related reimbursements (items such as lodging, transportation, meals, and other expenses) from any source during the reporting period Any other gifts totaling more than \$335* from any one source during the reporting period <p>*If you received more than one gift from any one source during the reporting period:</p> <ol style="list-style-type: none"> Determine the value of each item Ignore each item valued at \$134 or less Add the value of those items valued at more than \$134; if the total is more than \$335, then you must list those items on this form | <ul style="list-style-type: none"> Anything received from relatives, the U.S. or local governments, or inheritance Gifts given to your dependent child totally independent of their relationship to you Agency in connection with your official travel |

Did the employee answer "yes" to question V on page 1? If they did they must complete this section.

Did the employee describe the gift, and list the source of the gift? Did the employee briefly describe the travel expenses that were provided (e.g., airline tickets, hotel, meals?), the source of the travel reimbursement, and the dates/purpose of the travel?

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

| Source | Description |
|--------|-------------|
| 1 | |
| 2 | |
| 3 | |

What if the employee answered “no” to question IV and/or V on page 1?

If the employee has listed any agreements and arrangement and/or gift and travel reimbursements in this section you must go back to page 1 and change their answer to question IV and/or V from “no” to “yes”. Remember to note the actions you took, initial, and date on the OGE Form 450 in the “Comments of Reviewing Officials” section at the bottom of page 1. Retain copies of emails sent to filers requesting additional information and attach your e-mails and their response to the back to the form.

If the employee did not list any liabilities and/or outside positions in this section you do not need to provide this page (with page 1) to the NOC. **Submit the first page of the report. Please forward to the NOC the completed first page of the report. Do not submit a copy of the instructions.**

What if they employee did not provide the all of the requested information?

If the employee did not provide complete information, email the employee for additional information. Remember to note the actions you took, initial, and date on the OGE Form 450 in the “Comments of Reviewing Officials” section at the bottom of page 1. Retain copies of emails sent to filers requesting additional information and attach your e-mails and their response to the back to the form.

Initial Review of the OGE Optional Form 450-A

U.S. Office of Government Ethics
OGE Optional Form 450-A (08/2005)

Do these criteria apply to the employee, especially “B”?

Confidential Certificate of No New Interests (Executive Branch) In Lieu of Annual OGE Form 450

This optional form is to be used **only** by current employees of the executive branch (other than special Government employees), in accordance with 5 CFR 2634.905(d). If you have a previous OGE Form 450 on file with your agency and can certify to all of the following statements, your agency may permit you to use this OGE Optional Form 450-A instead of filing an annual OGE Form 450. If you cannot certify to all of the following statements or otherwise do not wish to use this OGE Optional Form 450-A, you must complete a new OGE Form 450 as your annual report. Consult your agency ethics office for more information.

After examining a copy of my last confidential financial disclosure report (OGE Form 450), I certify to the following:

A. No New Interests. Since filing my last OGE Form 450:

1. I have no new reportable assets or sources of income, for myself, my spouse, or my dependent children;
2. I have no new reportable liabilities (debts), for myself, my spouse, or my dependent children;
3. I have no new reportable outside positions for myself;
4. I have no new reportable agreements or arrangements concerning future, current, or past non-Government employment for myself;
5. I have no new reportable gifts or travel reimbursements for myself, my spouse, or my dependent children.

(For a description of what interests are reportable, see OGE Form 450 and its accompanying instructions, and/or other agency guidance.)

B. No Change in Position/Duties. Since filing my last OGE Form 450, I have not changed jobs at my agency. (The term “changed jobs” includes a new position description or other significant change in duties.)

What if the employee does not meet the criteria defined on the OGE Form 450-A?

If the employee does not meet the criteria defined on the OGE Form 450-A, they cannot use the OGE Form 450-A. Return the OGE Form 450-A to the employee with a copy of the OGE Form 450 and ask them to complete the OGE Form 450 and return it to your office.

What if has been more than 2 years since the employee last filed the OGE Form 450?

If it has been more than 2 years since the employee last filed the OGE Form 450 they cannot use the OGE Form 450-A. Return the OGE Form 450-A to the employee with a copy of the OGE Form 450 and ask them to complete the OGE Form 450 and return it to your office.

What if the employee has changed their name since they last filed the OGE Form 450?

Please write the name they last used when they filed the OGE Form 450 in the "Notes" section at the bottom of the page. This will help the CFDL find their previous folder.

ins Did the employee print his/her full FPPS

Did the employee sign and date their form, and is the signature an original signature?

B. No Change in Position/Duties. Since filing my last OGE Form 450, I have not changed jobs at my agency. (The term "changed jobs" includes a new position description or other significant change in duties.)

I certify that the above statements are true, complete, and correct, to the best of my knowledge.

Signature of Employee _____ Date _____

Printed Name _____ Work Phone _____

Position/Title _____ E-mail Address _____

Agency/Unit and Address _____

For Agency Use _____ Date Received by Agency: _____

Notes: Did the employee provide position title?

Did the employee provide an organization name and code (i.e., HR-710)?

Did the employee provide a work phone number?

Did the employee provide an e-mail address?

What If the employee did not print their full FPPS name on their OGE Form 450-A?

There are several reasons we ask you to carefully check that the employee used the full FPPS name:

- OGE auditors expect a high level of detail when confidential reports are periodically reviewed during program reviews.
- Reviewing the name on the form helps to make certain that pages of other employees' reports are not mixed in with those of other employees.
- If the employee uses a name other than their FPPS name the CFDL will not know who they are and will treat their form as not received.

If the employee did not put their name on each page of the report or used a name other than the full FPPS name, reviewers should add it to the page. Remember to note the actions you took, initial, and date on the OGE Form 450-A in the "Notes" section at the bottom of the page.

What If the filer did not print their e-mail address, position title and grade, organization name and organization code, and work phone Number?

If the employee did not put their e-mail address, position title, organization name and organization code, and work phone number on the report, **reviewers should add the missing information to this page**. Remember to note the actions you took, initial, and date on the OGE Form 450-A in the "Notes" section at the bottom of the page.

What if the employee forgot to sign and date their OGE Form 450-A?

If the employee forgot to sign and/or date their form or the signature is not an original you must return the form to the employee, asking them to correct and complete the form. Remember to note the actions you took, initial, and date on the OGE Form 450-A in the "Notes" section at the bottom of page.

Initial Review of the DI-1993

Employees who are designated as "K" confidential financial disclosure filers are required to file not only the OGE Form 450 or the OGE Form 450-A, but the DI-1993, Confidential Supplement to the Financial Disclosure Report OGE-450. The DI-1993 should be completed by the employee and attached to the OGE Form 450 or OGE Form 450-A.

The purpose of the DI-1993 is to capture the assets and liabilities that are not captured on the OGE Form 450, because they are below the reporting limits of the OGE Form 450.

What if an employee is a "K" filer, but did not provide the DI-1993?

If the employee did not provide the DI-1993 as required for their position, send an e-mail to the employee and request that they complete and send a DI-1993 to your office. When you receive the DI-1993, conduct an initial review of it and attach it to the original OGE Form 450 or Original OGE Form 450-A. Remember to note the actions you took, initial, and date on the OGE Form 450 in the "Comments of Reviewing Officials" section at the bottom of page 1, or on the OGE Form 450-A in the "Notes" section at the bottom of page. Retain copies of emails sent to filers requesting additional information and attach your e-mails and their response to the back of the form.

DI-1993 (1/07)
 Supplement to OGE-450

Did the employee provide their full FPPS name?

Did the employee provide their organization code?

United States Department of the Interior
CONFIDENTIAL SUPPLEMENT TO THE FINANCIAL DISCLOSURE REPORT OGE-450

| | |
|--|------------------|
| Type or Print your Name (Last, First, Initial) | Bureau or Office |
|--|------------------|

Important: This form only requires you to disclose information that you did not provide on your OGE-450 Report.

Your position is covered by one or more conflict of interest laws or regulations unique to certain bureaus and offices within this Department. To comply with these provisions, you must complete Part I of this form. If the box next to Part II is checked, you must also complete Part II of this form. Use the reverse side of this report if more space is needed to complete either Part. **Your signature is required on the back of this form.**

Part I. List each interest held by you, your spouse, or minor or dependent child(ren) for the production of income which had a fair market value of \$1,000 or more during the reporting period. This includes but is not limited to any interest in a checking, savings, certificate of deposit or money market account in a financial institution, or investments in a diversified mutual fund. If you have nothing to report, write None in the table below.

Did the employee provide information in part I or write "none" in part I?

| (E) Employee; (S) Spouse; (J) Joint; (D) Dependent/Minor Child(ren) | Name of Organization | Briefly describe type of Interest (e.g. common stock, bond, royalty payments, etc.) |
|---|----------------------|---|
| | | |
| | | |
| | | |
| | | |
| | | |



Part II. Complete this part **ONLY** if this Box is checked. If box is checked, it means that your position has been identified as having duties or responsibilities that fall under the Surface Mining Control and Reclamation Act of 1977. As a result, you must comply with the filing requirements of this law. In the table below, report information concerning all liabilities of \$10,000 or less that are owed by you, your spouse or minor or dependent child(ren). Also, if you have relatives residing full time in your household, you must report any interest (whether through investment, employment or debt) the relative(s) have in a company or organization that operates an underground or surface mining operation. Do not report mortgages for residential properties, personal loans from a relative, or debts owed to financial institutions that are chartered to provide consumer credit. Do not report pension plans where the recipient receives a fixed or guaranteed income. If you have nothing to report, write None in the table below.

What if the employee did not provide their full FPPS name or their organization code?

Write in the full FPPS name and/or the organization, Remember to note the actions you took, initial, and date on the OGE Form 450 in the “Comments of Reviewing Officials” section at the bottom of page 1, or on the OGE Form 450-A in the “Notes” section at the bottom of page. Retain copies of emails sent to filers requesting additional information and attach your e-mails and their response to the back to their forms.

What if the employee did not provide information or write “none” in part 1?

Send an e-mail to the employee, verify whether they intended to provide additional information or if they intended to write “none”. If the employee intended to provide additional information either return their forms to them request completion of the DI-1993, or obtain the additional information from them by e-mail to be added to their DI-1993. If the employee intended to write “none”, write “none” in the first line of part 1. Remember to note the actions you took, initial, and date on the OGE Form 450 in the “Comments of Reviewing Officials” section at the bottom of page 1, or on the OGE Form 450-A in the “Notes” section at the bottom of page. Retain copies of emails sent to filers requesting additional information and attach your e-mails and their response to the back to their forms.

Did the employee provide information in part 2 or write "none" in part 2?

Page 2
Form OI-1992

| (E) Employee; (S) Spouse; (J) Joint; (D) Dependent/Minor Child(ren) | Name of Organization | Briefly Describe Interest or Liability |
|---|----------------------|--|
| | | |
| | | |
| | | |
| | | |
| | | |

Additional space if needed for Parts I and II

| Part ? | Who Holds the Interest? | Name of Organization | Describe Interest or Liability |
|--------|-------------------------|----------------------|--------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Did the employee sign and date?

I CERTIFY that the information I reported on this form is true, correct and complete to the best of my knowledge and belief.

Signature of Filer

Date

Privacy Act Notice

The primary use of the information on this form is for review by Government officials of your agency, to determine compliance with applicable Federal conflict of interest laws and regulations. Additional disclosures of the information on this report may be made to: (1) to a Federal, State or local law enforcement agency if the disclosing agency becomes aware of a violation or potential violation of federal law or regulation; (2) to a court or party in a court or Federal administrative proceeding if the Government is a party or in order to comply with a Judge-issued subpoena; (3) to a source when necessary to obtain information relevant to a conflict of interest investigation or decision; (4) to the National Archives and Records Administration or the General Services Administration in records management inspections; (5) to the Office of Management and Budget during legislative coordination on private relief legislation; and (6) in response to a request for discovery or for the appearance of a witness in a judicial or administrative proceeding, if the information is relevant to the subject matter. This confidential report will not be disclosed to any requesting person unless authorized by law.

What if the employee did not provide information or write “none” in part 2?

Send an e-mail to the employee, verify whether they intended to provide additional information or if they intended to write “none”. If the employee intended to provide additional information either return their forms to them for completion of the DI-1993, or obtain the additional information by e-mail from them to be added to their DI-1993. If the employee intended to write “none”, write “none” in the first line of part 2. Remember to note the actions you took, initial, and date on the OGE Form 450 in the “Comments of Reviewing Officials” section at the bottom of page 1, or on the OGE Form 450-A in the “Notes” section at the bottom of page. Retain copies of emails sent to filers requesting additional information and attach your e-mails and their response to the back to their forms.

What if the employee did not sign and date their DI-1993?

Return their forms to the employee requesting that review the DI-1993 for completeness, sign and date it, return all of their forms to your office. Remember to note the actions you took, initial, and date on the OGE Form 450 in the “Comments of Reviewing Officials” section at the bottom of page 1, or on the OGE Form 450-A in the “Notes” section at the bottom of page. Retain copies of emails sent to filers requesting additional information and attach your e-mails and their response to the back to their forms.

Appendix A

Checklist for Initial Review of the OGE Form 450 and DI-1993 (if applicable)

Introduction and Recordkeeping:

When you perform an initial review, you are confirming that financial filers have properly completed all applicable portions of the form. If the financial filer has not provided all necessary information, you are asked to: e-mail the financial filers to obtain the missing information; or return the form so that the employee can provide additional information or make corrections. There are some instances, discussed below or in the checklist, where initial reviewers are permitted to add the additional information themselves.

With the large numbers of BLM confidential filers, quality record-keeping is essential to ensure that the process is run accurately, that records are maintained in compliance with Office of Government Ethics (OGE) audit standards, and that the private information of confidential filers is safeguarded and secured. The following record-keeping practices are strongly recommended:

Protect employee privacy by locking the reports in a secure location at night, and don't leave them on your desk when you go to lunch, or are otherwise away from your desk.

Ensure that each employee's form is stapled, not paper clipped. Paper clipped reports have a habit of commingling with other filers' reports. Only forward those pages of the form to the NOC that have information on them, and do not include the instructions.

If you email a filer to request additional information or return an employee's form, annotate this in the "Comments of Reviewing Officials" section at the bottom of page 1 and also provide your initials and the date. Annotate your actions in the Excel log that CFDL Milner has provided to us. Retain copies of emails sent to filers requesting additional information. All these records can be subject to review during an OGE audit.

An initial review is considered completed once you have reviewed a financial disclosure report, and you have determined whether any information is missing or requires clarification. Once this determination has been made, you may initial and date the OGE Form 450 at the top of the form, just to the right of the "Date Received By Agency" Box and add an IR (for initial review); you may initial, date, and add an IR on the OGE Form 450-A at the bottom of the form, under "Notes" to the left of the "Date Received By Agency" column. However, we ask that you attempt to collect all the missing information prior to mailing the forms to the NOC for final review and certification.

Once a relatively large quantity of reports has been received and initially reviewed, it is suggested that you batch them together, and mail them via a secure means (FEDEX/UPS) to the NOC. **(Preferred recommendation is that everyone mails their forms to the NOC by COB Friday afternoons.)** Please send batched reports to the following address:

FEDEX/UPS address:

BLM / NOC / OC-201
Denver Federal Center Building 50
Denver, Colorado 80225
303-236-3569
Attn: CFDL Milner

The CFDL has agreed to update the Excel log on a regular basis after receiving a number of reports, and sending you updates on a regular basis (biweekly). In this way, you will be able to confirm that the NOC actually receives all the forms that you have mailed.

The following checklist has been put together to assist you in conducting initial reviews.

Did you: indicate the date of receipt of the report and your initials in the "Date Received by Agency" box at the top of page 1 of the OGE Form 450; or below the "Date Received by Agency" column at the bottom of the page of the OGE Form 450-A; and also update the Excel log with the date of receipt? Yes No

Did the financial filer complete an OGE Form 450 dated June 2008? Yes No

If the employee submitted a previous version of the report, return the report to the employee for completion of the appropriate form. The correct report may be found at:

OGE Form 450 → http://www.usoge.gov/forms/oge450_pdf/oge450_automated.pdf

| | |
|--|---|
| | OGE Form 450-A → http://www.usoge.gov/forms/oqe450_pdf/fr450a_05.pdf . |
| | Any other versions of the report cannot be accepted. |
| | Did the filer print his/her full name on each page of the OGE Form 450 or the OGE Form 450-A? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Note: This may sound picky. However, OGE auditors expect this is level of detail when confidential forms are periodically reviewed during program reviews. Additionally, it helps to make certain that pages of other employees' forms are not mixed in with those of other employees. If the employee did not put their name on each page of the report, reviewers may add it to the other pages so long as the reviewer can clearly ascertain that all the pages belong to that specific employee (e.g., the report came in a blue envelope; it was stapled; the handwriting on all pages matches, etc.). |
| | Did the employee put the page number on each page of his/her report? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Again, reviewers may add page numbers so long as they can clearly ascertain that all pages of the report belong to that specific employee. |
| | Has the employee indicated that their name has changed in the last year or since he/she last filed an OGE Form 450 or OGE Form 450-A? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | IF YES, did the employee indicate the full name he/she used on the last OGE Form 450 that was filed? <input type="checkbox"/> Yes <input type="checkbox"/> No Reviewer may add full name (as it appears in FPPS) or full names as they formerly appeared in FPPS. This will help the CFDL find their folder from previous years and help the CFDL find their current folder. |
| | Did the employee provide: an e-mail address; position title and grade; organization name and code (i.e., HR-710); and work phone number? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Note: If a Filer sent the OGE Form 450-A, where the employee has had a Change in Position/Duties since filing their last OGE Form 450, (the term "changed jobs" includes a new position description or other significant change in duties) they may not file the OGE Form 450-A. Please return the 450-A to the employee and ask them to complete and send the OGE Form 450. |
| | Note: Filers do not need to fill out the sections pertaining to Special Government Employees. |
| | Has the filer indicated whether he/she is a "New Entrant" or an "Annual Filer" (see definitions below)? <input type="checkbox"/> New Entrant <input type="checkbox"/> Annual Filer |
| | A "new entrant" is: an employee new to the BLM; or an employee that was not identified as "confidential" during the last filing cycle, but has been designated as "confidential" for the 2009 filing cycle. If an employee doesn't meet these criteria, he/she should be classified as an "annual" filer. "New entrants" must file the OGE Form 450. |
| | If the filer checked the "new entrant" box, did the employee enter the date (month, day, and year) that he/she occupied the confidential position? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Did the financial filer answer "Yes" to questions I, II, III, IV, and/or V on the first page of the OGE Form 450? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | If the filer answered "Yes" to questions I, II, III, IV and/or V on the first page, did the individual also attach the other corresponding portions of the form? |
| | Example: If the filer checked "Yes" for Section II (reportable liabilities), the employee should submit a signed and completed page 1, and also attach the corresponding Part II of the Form (Liabilities). If the individual answered "No" to all five questions, the filer only needs to submit the first page of the form. Do not submit a copy of the instructions. |
| | Did the financial filer sign and date the first page of the OGE Form 450, and is the signature an original signature? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | If the employee's signature is not an original, the Form 450 should be returned to the employee. |
| Part I: Assets and Income | |
| Note for the Initial Reviewer: | |
| Employees should not provide annual statements or brokerage reports in lieu of completing part I. If they do, return the form so that Part 1 can be completed by the filer. | |
| | Did the financial filer provide the full, specific names of all assets, including full names of funds and stocks [not just their symbols (e.g., VBMFX), or the name of the family of funds, such as "Fidelity" or "Oppenheimer"]? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | If the answer to this question is "No", please email the employee for the additional information (if there are not many holdings), or return the form if there is a large number of holdings. |
| Part II: Liabilities | |
| | Did the employee report the full name of any creditors/liabilities, a brief description of what the credit is for (e.g., an education loan) and the city and state where the creditors are located? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | If the employee did not provide complete information, email the employee for additional information. |
| Part III: Outside Positions | |
| | Did the employee report any positions held outside of the US Government? <input type="checkbox"/> Yes <input type="checkbox"/> No |

| | |
|--|--|
| | <p>If the financial filer answered "Yes", did the employee report the name and type of the organization, the position held, and the city and state for any such positions? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Did the employee indicate that he/she is serving as an officer or board of directors' member of an outside organization, either in their private capacity or on behalf of the BLM? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| | <p>If the employee responded "Yes" to this question but did not provide complete information (as described above) email the employee for more complete information.</p> |
| Part IV: Agreements or Arrangements | |
| | <p>Did the financial filer report any agreements or arrangements (such as a pension plan with a former employer, or an agreement for future employment)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| | <p>If the answer to this question is "Yes", did the employee provide the name, city, state, and a brief description of the agreement or arrangement? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| | <p>If the employee did not provide this information email the employee for further clarification.</p> |
| Part V: Gifts and Travel Reimbursements | |
| | <p>Did the financial filer report any gifts received exceeding \$134 per occasion from one source, or \$335 from the same source? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| | <p>If the answer to this question is "Yes", did the employee describe the gift, and list the source of the gift?</p> |
| | <p>Did the filer list any travel-related reimbursements (not including official BLM travel) exceeding \$335? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| | <p>If the answer is "Yes", did the employee briefly describe the travel expenses that were provided (e.g., airline tickets, hotel, meals?), the source of the travel reimbursement, and the dates/purpose of the travel? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| | <p>If the answer to this question is "No", email the employee for additional information.</p> |
| DI-1993 | |
| | <p>If the financial filer received a DI-1993 attached to their notification email, he/she has BLM duties related to coal mining operations.</p> |
| | <p>If the employee is required to fill out a DI-1993, did the employee provide: his/her full name and office (clearly typed or printed); provided information or printed "None" in both parts of the form; and provided an original signature and date on the bottom of page 2?</p> |