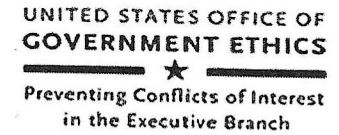


OGE Form 278e (Updated Nov. 2021) (Expires 11/30/24)

U.S. Office of Government Ethics; 5 C.F.R. part 2634 | Form Approved: OMB No. (3209-0001)

Report Type:	Annual <input checked="" type="checkbox"/>
Year (Annual Report only):	2021
Date of Appointment/Termination:	2/4/21



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

Filer's Information				
Last Name	First Name	MI	Position	Agency
Cho	Jim	J	Deputy Dir, CLIA	OPM
Other Federal Government Positions Held During the Preceding 12 Months:				
NA				
Name of Congressional Committee Considering Nomination (Nominees only):				
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:		Digitally signed by JIM CHO Date: 2022.05.03 10:33:24 -04'00'		Date:
JIM CHO				
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:		
		5-26-22		
Other Review Conducted By:				
Signature:		Date:		
U.S. Office of Government Ethics Certification (if required):				
Signature:		Date:		
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
Jim Cho						2
Part 1: Filer's Positions Held Outside United States Government						
#	Organization Name	City/State	Organization Type	Position Held	From	To
1.	None					
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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
Jim Cho		3

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

#	Description	EIF	Value	Income Type	Income Amount
1.	FAMM Foundation 403B -- Equity Income Fund	Yes <input type="checkbox"/>	\$15,001 - \$50,000 <input type="checkbox"/>		
2.	FAMM Foundation 403B - Global Tech Fund	Yes <input type="checkbox"/>	\$1,001 - \$15,000 <input type="checkbox"/>		
3.	FAMM Foundation 403B-New Income Fund	Yes <input type="checkbox"/>	\$1,001 - \$15,000 <input type="checkbox"/>		
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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	
Jim Cho			4	
Part 3: Filer's Employment Agreements and Arrangements				
#	Employer or Party	City/State	Status and Terms	Date
1.	FAMM Foundation	Wash DC	I will continue to participate in this 403(b) plan, but he plan sponsor no longer contributes	8/2002
2.				
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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
Jim Cho	5

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

#	Source Name	City/State	Brief Description of Duties
1.	None		
2.			
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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
Jim Cho				6
Part 5: Spouse's Employment Assets & Income and Retirement Accounts				
#	Description	EIF	Value	Income Type
1.	Alteon Health	N/A <input type="checkbox"/>		Salary
2.	USACS PS 401K plan 28639: FID FDM IDX 2040 RPM	Yes <input type="checkbox"/>	\$100,001 - \$250,000 <input type="checkbox"/>	
3.	Alteon Health LLC 401(k) Retirement Plan:	Yes <input type="checkbox"/>		<input type="radio"/>
4.	Fidelity large cap growth Idx	Yes <input checked="" type="checkbox"/>	\$1,001 - \$15,000 <input type="checkbox"/>	<input checked="" type="radio"/>
5.	Fidelity 500 index	Yes <input checked="" type="checkbox"/>	\$1,001 - \$15,000 <input type="checkbox"/>	<input checked="" type="radio"/>
6.	Putnam Large Cap Value R6	Yes <input checked="" type="checkbox"/>	\$1,001 - \$15,000 <input type="checkbox"/>	<input checked="" type="radio"/>
7.	NFS Mid Cap Value R6	Yes <input checked="" type="checkbox"/>	\$1,001 - \$15,000 <input type="checkbox"/>	<input checked="" type="radio"/>
8.	Vanguard RS Small Cap Growth R6	Yes <input checked="" type="checkbox"/>	\$1,001 - \$15,000 <input type="checkbox"/>	<input checked="" type="radio"/>
9.	Fidelity Total International index	Yes <input checked="" type="checkbox"/>	\$1,001 - \$15,000 <input type="checkbox"/>	<input checked="" type="radio"/>
10.	MFS Int Diversification R6	Yes <input checked="" type="checkbox"/>	\$1,001 - \$15,000 <input type="checkbox"/>	<input checked="" type="radio"/>
11.	TIAA-CREF Real Estate Sec Instl	Yes <input checked="" type="checkbox"/>	\$1,001 - \$15,000 <input type="checkbox"/>	<input checked="" type="radio"/>
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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 Jim Cho	Page Number 7
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Part 6: Other Assets and Income

#	Description	EIF	Value	Income Type	Income Amount
1.	Congressional Federal Credit Union (Cash)	N/A <input type="checkbox"/>	\$50,001 - \$100,000	<input type="checkbox"/> Interest	
2.	Fidelity IRA--Freedom 2035	Yes <input type="checkbox"/>	\$15,001 - \$50,000	<input type="checkbox"/> Dividends	
3.	Fidelity IRA: Fidelity Government Cash Reserves	Yes <input type="checkbox"/>	\$1,001 - \$15,000	<input type="checkbox"/> Dividends	
4.	Fidelity IRA: Fidelity Contrafund	Yes <input type="checkbox"/>	\$1,001 - \$15,000	<input type="checkbox"/> Dividends	
5.	Fidelity IRA: Fidelity 500 Index Fund	Yes <input type="checkbox"/>	\$1,001 - \$15,000	<input type="checkbox"/> Dividends	
6.	Fidelity IRA: Fidelity Stock Selector Mid Cap FD	Yes <input type="checkbox"/>	\$1,001 - \$15,000	<input type="checkbox"/> Dividends	
7.	Fidelity IRA: Stock Selector All Cap FD	Yes <input type="checkbox"/>	\$1,001 - \$15,000	<input type="checkbox"/> Dividends	
8.	T Rowe Price: Communications and Tech Fund	Yes <input type="checkbox"/>	\$15,001 - \$50,000	<input type="checkbox"/> Dividends	
9.	Ukrainian Self Reliance Federal Credit Union (cash)	Yes <input type="checkbox"/>	\$1,001 - \$15,000	<input type="checkbox"/> Interest	
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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
Jim Cho				8

Part 7: Transactions

#	Description	Type	Date	Amount
1.	T Rowe Price -- Communications and Technology Fund	Purchase <input type="checkbox"/>	9/29/21	\$1,001 - \$15,000 <input type="checkbox"/>
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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
Jim Cho						9
Part 8: Liabilities						
#	Creditor Name	Type	Amount	Year Incurred	Rate	Term
1.	Moehela	Student Loan	\$250,001 - \$500,000 <input type="checkbox"/>	2019	4.693	15 years
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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
Jim Cho		10

Part 9: Gifts and Travel Reimbursements

#	Source Name	City/State	Brief Description	Value
1.	None			
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