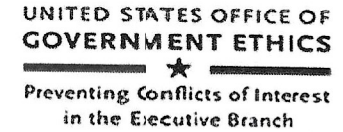


OGE Form 278e (Updated Nov. 2021) (Expires 11/30/24)

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

Report Type:	Annual
Year (Annual Report only):	2021
Date of Appointment/Termination:	January 20, 2021



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

Filer's Information				
Last Name	First Name	MI	Position	Agency
Tengco	Jason	B	White House Liaison	OPM
Other Federal Government Positions Held During the Preceding 12 Months:				
None				
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 JASON TENGCO Date: 2022.05.09 16:43:45 -04'00'		Date:
JASON TENGCO				05/09/2022

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:
	5-24-22
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	
Part 1: Filer's Positions Held Outside United States Government						
#	Organization Name	City/State	Organization Type	Position Held	From	To
1.	Biden-Harris Transition Team	Remote	Non-profit	AAPI Outreach Lead, OPM ART Mem.	Nov 2020	Jan 2021
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						
17.						
18.						
19.						
20.						

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	
Part 2: Filer's Employment Assets & Income and Retirement Accounts					
#	Description	EIF	Value	Income Type	Income Amount
1.	Biden Harris Transition Team			Salary	\$5,830.77
2.	IRA				
3.	iShares Core S&P Total U.S. Stock Market ETF (ITOT)	Yes	\$1,001 - \$15,000		
4.	iShares Core U.S. Aggregate Bond ETF (AGG)	Yes	\$1,001 - \$15,000		
5.	Vanguard FTSE Developed Markets ETF (VEA)	Yes	\$1,001 - \$15,000		
6.	Vanguard FTSE Emerging Markets ETF (VWO)	Yes	\$1,001 - \$15,000		
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					

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	
Part 3: Filer's Employment Agreements and Arrangements				
#	Employer or Party	City/State	Status and Terms	Date
1.	None			
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
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
--------------	-------------

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

#	Source Name	City/State	Brief Description of Duties
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			

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
--------------	-------------

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

#	Description	EIF	Value	Income Type	Income Amount
1.	Employer: PricewaterhouseCoopers				
2.	Morningstar Lifetime Moderate Index Fund	Yes	\$15,001 - \$50,000		
3.	Global Stock Fund	Yes	\$1,001 - \$15,000		
4.	Northern Trust S&P 500	Yes	\$1,001 - \$15,000		
5.	Northern Trust Small Company Index	Yes	\$1,001 - \$15,000		
6.	Northern Global Sustainability Index	Yes	\$1,001 - \$15,000		
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					

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
--------------	-------------

Part 6: Other Assets and Income

#	Description	EIF	Value	Income Type	Income Amount
1.	Walt Disney Company Common Stock (DIS)	Yes	\$1,001 - \$15,000	Dividends	None (or less than \$201)
2.	Bank of America Checking/Savings	Yes	\$1,001 - \$15,000	Interest	None (or less than \$201)
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					

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
Part 7: Transactions				
#	Description	Type	Date	Amount
1.	None			
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				

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
--------------	-------------

Part 8: Liabilities

#	Creditor Name	Type	Amount	Year Incurred	Rate	Term
1.	Missouri Higher Ed Loan Authority (MOHELA)	Graduate school loan	\$50,001 - \$100,000	2019	7%	10 years
2.	Missouri Higher Ed Loan Authority (MOHELA)	Graduate school loan (S)	\$50,001 - \$100,000	2015	7%	10 years
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						
17.						
18.						
19.						
20.						

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
--------------	-------------

Part 9: Gifts and Travel Reimbursements

#	Source Name	City/State	Brief Description	Value
1.	None			
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				