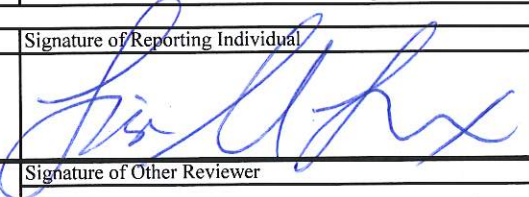
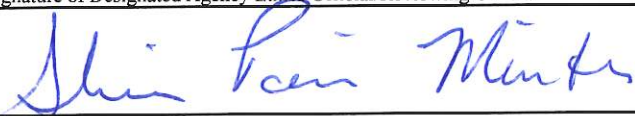



Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Date of Appointment, Candidacy, Election, or Nomination (Month, Day, Year)	Reporting Status (Check Appropriate Boxes)	Incumbent <input type="checkbox"/>	Calendar Year Covered by Report	New Entrant, Nominee, or Candidate <input checked="" type="checkbox"/>	Termination Filer <input type="checkbox"/>	Termination Date (If Applicable) (Month, Day, Year)	Fee for Late Filing Any individual who is required to file this report and does so more than 30 days after the date the report is required to be filed, or, if an extension is granted, more than 30 days after the last day of the filing extension period, shall be subject to a \$200 fee. Reporting Periods Incumbents: The reporting period is the preceding calendar year except Part II of Schedule C and Part I of Schedule D where you must also include the filing year up to the date you file. Part II of Schedule D is not applicable. Termination Filers: The reporting period begins at the end of the period covered by your previous filing and ends at the date of termination. Part II of Schedule D is not applicable. Nominees, New Entrants and Candidates for President and Vice President: Schedule A --The reporting period for income (BLOCK C) is the preceding calendar year and the current calendar year up to the date of filing. Value assets as of any date you choose that is within 31 days of the date of filing. Schedule B --Not applicable. Schedule C, Part I (Liabilities) --The reporting period is the preceding calendar year and the current calendar year up to any date you choose that is within 31 days of the date of filing. Schedule C, Part II (Agreements or Arrangements) --Show any agreements or arrangements as of the date of filing. Schedule D --The reporting period is the preceding two calendar years and the current calendar year up to the date of filing.
Reporting Individual's Name	Last Name Fairfax		First Name and Middle Initial Lisa M.				
Position for Which Filing	Title of Position Commissioner		Department or Agency (If Applicable) Securities and Exchange Commission				
Location of Present Office (or forwarding address)	Address (Number, Street, City, State, and ZIP Code) 2000 H Street, NW, Washington, DC 20052				Telephone No. (Include Area Code) 202-994-4630		
Position(s) Held with the Federal Government During the Preceding 12 Months (If Not Same as Above)	Title of Position(s) and Date(s) Held None						
Presidential Nominees Subject to Senate Confirmation	Name of Congressional Committee Considering Nomination Committee on Banking, Housing and Urban Affairs		Do You Intend to Create a Qualified Diversified Trust? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Certification	Signature of Reporting Individual 				Date (Month, Day, Year) October 15, 2015		
Other Review (If desired by agency)	Signature of Other Reviewer				Date (Month, Day, Year)		
Agency Ethics Official's Opinion	Signature of Designated Agency Ethics Official/Reviewing Official 				Date (Month, Day, Year) 10/15/15		
Office of Government Ethics Use Only	Signature 				Date (Month, Day, Year) 10/29/15		
Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheet)							
(Check box if filing extension granted & indicate number of days _____) <input type="checkbox"/>							
(Check box if comments are continued on the reverse side) <input type="checkbox"/>							
Agency Use Only							
OGE Use Only							

Lisa Monique Fairfax

SCHEDULE A

* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.

(Use only if needed)

3 of 14

Lisa Monique Fairfax

[illegible]

* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.

(Use only if needed)

4 of 14

Lisa Monique Fairfax

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(Use only if needed)

5 of 14

[illegible]

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(Use only if needed)

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Lisa Monique Fairfax

* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.

Reporting Individual's Name Lisa Monique Fairfax	SCHEDULE A continued (Use only if needed)	Page Number 7 of 14
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Assets and Income		Valuation of Assets at close of reporting period													Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.																		
BLOCK A		BLOCK B													BLOCK C																		
															Type				Amount														
		None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Excepted Investment Fund	Excepted Trust	Qualified Trust	Dividends	Rent and Royalties	Interest	Capital Gains	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
1	- CREF Stock Fund			X										X							X												
2	- TIAA Real Estate Fund		X											X							X												
3	University System of Maryland Optional Retirement Plan, holds: -TIAA Traditional			X																	X												
4	- CREF Stock Fund			X										X							X												
5	- CREF Global Equities Fund			X										X							X												
6	- CREF Growth Fund		X											X							X												
7	- CREF Bond Market			X										X							X												
8	- CREF Money Market Fund		X											X							X												
9	- CREF Social Choice Fund			X										X							X												

* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.

Reporting Individual's Name Lisa Monique Fairfax	SCHEDULE A continued (Use only if needed)	Page Number 8 of 14
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Assets and Income		Valuation of Assets at close of reporting period										Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.																			
BLOCK A		BLOCK B										BLOCK C																			
												Type	Amount								Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria									
		None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Excepted Investment Fund	Excepted Trust	Qualified Trust	Dividends	Rent and Royalties	Interest	Capital Gains			None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000*
1	O'Melveny & Myers 1982 Retirement Plan (S) holds: - T Rowe Price Institutional Large Cap Growth (TRLGX)			X										X							X										
2	- American Beacon Large Cap Value Fund (AADEX)			X										X							X										
3	- Prudential Core Plus Bond Fund			X										X							X										
4	George Washington University 401(A) Retirement Plan (S) holds: - TIAA Traditional			X																	X										
5	- CREF Stock Fund					X								X							X										
6	-TIAA Real Estate Fund			X										X							X										
7	- CREF Bond Market Fund			X										X							X										
8	- TIAA Traditional			X																	X										
9	George Washington University Supplemental Retirement Plan (S), holds: - CREF Stock Fund					X								X							X										

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(Use only if needed)

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[illegible]

* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.

Do not complete Schedule B if you are a new entrant, nominee, or Vice Presidential or Presidential Candidate

Reporting Individual's Name	SCHEDULE B	Page Number 10 of 14
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Part I: Transactions

None ☐

Report any purchase, sale, or exchange by you, your spouse, or dependent children during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss.

Do not report a transaction involving property used solely as your personal residence, or a transaction solely between you, your spouse, or dependent child. Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.

Identification of Assets		Transaction Type (x)			Date (Mo., Day, Yr.)	Amount of Transaction (x)											
		Purchase	Sale	Exchange		\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Certificate of divestiture
Example	Central Airlines Common	x			2/1/99			x									
2																	
3																	
4																	
5																	

* This category applies only if the underlying asset is solely that of the filer's spouse or dependent children. If the underlying asset is either held by the filer or jointly held by the filer with the spouse or dependent children, use the other higher categories of value, as appropriate.

Part II: Gifts, Reimbursements, and Travel Expenses

For you, your spouse and dependent children, report the source, a brief description, and the value of: (1) gifts (such as tangible items, transportation, lodging, food, or entertainment) received from one source totaling more than \$350 and (2) travel-related cash reimbursements received from one source totaling more than \$350. For conflicts analysis, it is helpful to indicate a basis for receipt, such as personal friend, agency approval under 5 U.S.C. § 4111 or other statutory authority, etc. For travel-related gifts and reimbursements, include travel itinerary, dates, and the nature of expenses provided. **Exclude** anything given to you by

the U.S. Government; given to your agency in connection with official travel; received from relatives; received by your spouse or dependent child totally independent of their relationship to you; or provided as personal hospitality at the donor's residence. Also, for purposes of aggregating gifts to determine the total value from one source, exclude items worth \$140 or less. See instructions for other exclusions.

None ☐

Source (Name and Address)		Brief Description	Value
Examples	Nat'l Assn. of Rock Collectors, NY, NY	Airline ticket, hotel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty)	\$500
	Frank Jones, San Francisco, CA	Leather briefcase (personal friend)	\$385
1			
2			
3			
4			
5			

Reporting Individual's Name	SCHEDULE C	Page Number
Lisa Monique Fairfax		11 of 14

Part I: Liabilities

Report liabilities over \$10,000 owed to any one creditor at **any time** during the reporting period by you, your spouse, or dependent children. Check the highest amount owed during the reporting period. **Exclude** a mortgage on your

personal residence unless it is rented out; loans secured by automobiles, household furniture or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.

None ☐

Category of Amount or Value (x)

Creditors (Name and Address)		Type of Liability	Date Incurred	Interest Rate	Term if applicable	\$10,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000
Examples	First District Bank, Washington, DC	Mortgage on rental property, Delaware	1991	8%	25 yrs.			x								
	John Jones, Washington, DC	Promissory note	1999	10 %	on demand					x						
	Citi Mortgage, Inc., Columbus, OH	Mortgage on residential rental property, Silver Spring, Maryland	2005	3%	5/1 ARM				X							
2	Citibank, N.A., St. Louis, MO	Home equity line of credit associated with rental property in Silver Spring, Maryland	2005	4%	Rev		X									
3	Citibank, N.A., St. Louis, MO	Line of credit	2003	3.75%	Rev			X								
4	Citibank, N.A., St. Louis, MO	Line of credit	2003	12.75 %	Rev	X										
5	Mohela/Department of Education, Chesterfield, MO	student loans	2003	4.375 %	30		X									

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Part II: Agreements or Arrangements

Report your agreements or arrangements for: (1) continuing participation in an employee benefit plan (e.g. pension, 401k, deferred compensation); (2) continuation of payment by a former employer (including severance payments); (3) leaves

of absence; and (4) future employment. See instructions regarding the reporting of negotiations for any of these arrangements or benefits.

None ☐

Status and Terms of any Agreement or Arrangement		Parties	Date
Example	Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through 1/00.	Doe Jones & Smith, Hometown, State	7/85
1	I will take an unpaid five-year leave of absence from my faculty position upon appointment to the position.	George Washington University	10/2015
2	I continue to participate in the Georgetown University defined contribution plan. The University does not make any further contributions to my account	Georgetown University	8/2009
3	I continue to participate in the University of Maryland defined contribution plan. The University does not make any further contributions to my account	Maryland University	8/2000
4	I continue to participate in the George Washington University defined contribution plan and supplemental retirement plans. The University will not make further contributions during my leave.	George Washington University	1/2014
5			
6			

Reporting Individual's Name Lisa Monique Fairfax	SCHEDULE C	Page Number 12 of 14
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Part I: Liabilities

Report liabilities over \$10,000 owed to any one creditor at **any time** during the reporting period by you, your spouse, or dependent children. Check the highest amount owed during the reporting period. **Exclude** a mortgage on your

personal residence unless it is rented out; loans secured by automobiles, household furniture or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.

None ☐

Category of Amount or Value (x)

Creditors (Name and Address)			Type of Liability	Date Incurred	Interest Rate	Term if applicable	\$10,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000
Examples																	
First District Bank, Washington, DC			Mortgage on rental property, Delaware	1991	8%	25 yrs.											
John Jones, Washington, DC			Promissory note	1999	10 %	on demand					x						
1	Mohela/Department of Education, Chesterfield, MO (spouse)		student loans	2002	4.125%	30			X								
2	Bank of America , Wilmington DE		revolving charge card	2000	variable *	Rev		X									
3	Bank of America, Wilmington, DE (spouse)		revolving charge card	2000	0%**	Rev		X									
4	American Express, Newark, NJ (spouse)		revolving charge card	1991	15.24%	Rev		X									
5	Citibank Mortgage Inc., Columbus Ohio		Mortgage on Personal Residence	2003	5.625%	30					X						

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Part II: Agreements or Arrangements

Report your agreements or arrangements for: (1) continuing participation in an employee benefit plan (e.g. pension, 401k, deferred compensation); (2) continuation of payment by a former employer (including severance payments); (3) leaves

of absence; and (4) future employment. See instructions regarding the reporting of negotiations for any of these arrangements or benefits.

None ☐

Status and Terms of any Agreement or Arrangement			Parties	Date
Example	Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through 1/00.		Doe Jones & Smith, Hometown, State	7/85
1				
2				
3				
4				
5				
6				

* 0% on balance transfers and 8.9% on charges during promotional period, 15.99% on balance transfers and 16.24% on charges after promotional period"

** Promotional Rate

Reporting Individual's Name Lisa Monique Fairfax	SCHEDULE D	Page Number 13 of 14
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Part I: Positions Held Outside U.S. Government

Report any positions held during the applicable reporting period, whether compensated or not. Positions include but are not limited to those of an officer, director, trustee, general partner, proprietor, representative, employee, or

consultant of any corporation, firm, partnership, or other business enterprise or any non-profit organization or educational institution. **Exclude** positions with religious, social, fraternal, or political entities and those solely of an honorary nature.

None ☐

Organization (Name and Address)		Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)
Examples	Nat'l Assn. of Rock Collectors, NY, NY	Non-profit education	President	6/92	Present
	Doe Jones & Smith, Hometown, State	Law firm	Partner	7/85	1/00
1	Georgetown Day School, Washington, DC	non-profit education	Trustee; Board Secretary	6/14	present
2	DirectWomen Board Institute, Philadelphia, PA	non-profit	Co-Chair	11/12	present
3	McGuire Woods, LLP, Baltimore, MD; Telos Corporation, Ashburn, VA	law firm; corporation	Legal consultant	4/14	4/14
4	American Association of Law Schools, Washington, DC	non-profit	Section Chair, Securities Regulation Section	1/13	1/14
5	George Washington University Law School, Washington, DC	law school	law professor	8/2009	present
6	Georgetown University Law Center, Washington, DC	law school	visitng law professor	1/2014	5/2014

Part II: Compensation in Excess of \$5,000 Paid by One Source

Report sources of more than \$5,000 compensation received by you or your business affiliation for services provided directly by you during any one year of the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any other

non-profit organization when you directly provided the services generating a fee or payment of more than \$5,000. You need not report the U.S. Government as a source.

Do not complete this part if you are an Incumbent, Termination Filer, or Vice Presidential or Presidential Candidate.

None ☐

Source (Name and Address)		Brief Description of Duties
Examples	Doe Jones & Smith, Hometown, State	Legal services
	Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services in connection with university construction
1	George Washington University Law School, Washington, DC	Law professor
2	Georgetown University Law Center, Washington, DC	Visiting law professor; teach class on corporations
3	Analysis Group, Inc., Boston, MA	Legal consultant of behalf of Corvex Management and Related Fund Management in connecton with arbitration of legal dispute
4		
5		
6		

Reporting Individual's Name Lisa Monique Fairfax	SCHEDULE D	Page Number 14 of 14
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Part I: Positions Held Outside U.S. Government

Report any positions held during the applicable reporting period, whether compensated or not. Positions include but are not limited to those of an officer, director, trustee, general partner, proprietor, representative, employee, or

consultant of any corporation, firm, partnership, or other business enterprise or any non-profit organization or educational institution. **Exclude** positions with religious, social, fraternal, or political entities and those solely of an honorary nature.

None ☐

Organization (Name and Address)		Type of Organization	Position Held	From (Mo., Yr.)	To (Mo., Yr.)
Examples	Nat'l Assn. of Rock Collectors, NY, NY	Non-profit education	President	6/92	Present
	Doe Jones & Smith, Hometown, State	Law firm	Partner	7/85	1/00
1	Analysis Group, Inc., Boston, MA	Consulting firm	legal consultant	9/2013	10/2013
2					
3					
4					
5					
6					

Part II: Compensation in Excess of \$5,000 Paid by One Source

Report sources of more than \$5,000 compensation received by you or your business affiliation for services provided directly by you during any one year of the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any other

non-profit organization when you directly provided the services generating a fee or payment of more than \$5,000. You need not report the U.S. Government as a source.

Do not complete this part if you are an Incumbent, Termination Filer, or Vice Presidential or Presidential Candidate.

None ☐

Source (Name and Address)		Brief Description of Duties
Examples	Doe Jones & Smith, Hometown, State	Legal services
	Metro University (client of Doe Jones & Smith), Moneytown, State	Legal services in connection with university construction
1		
2		
3		
4		
5		
6		