

FORM A

Federal Reserve Bank Of Minneapolis

CONFIDENTIAL FINANCIAL DISCLOSURE REPORT

Reporting Status <i>(Check Appropriate Box)</i> <input checked="" type="checkbox"/> Incumbent <input type="checkbox"/> New Filer <input type="checkbox"/> Termination Filer	Calendar Year Covered By Report <p style="text-align: center;">2017</p>	Date of Employment <p style="text-align: center;">January 1, 2016</p>	Termination Date <i>(if applicable)</i>	<p style="text-align: center;">INTERNAL-FR Reporting Periods</p> <p>Incumbents: The reporting period is the preceding calendar year except Part II of Schedule C and Schedule D where you must also include the filing year up to the date you file.</p> <p>Termination Filers: The reporting period begins at the end of the period covered by your previous filing and ends at the date of termination.</p> <p>New Filers: Schedule A-The reporting period is the preceding calendar year and the current calendar year up to the date of filing.</p> <p>Schedule B-Not applicable.</p> <p>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 filing.</p> <p>Schedule C, Part II (Agreement or Arrangement)-Show any agreement or arrangement as of the date of filing.</p> <p>Schedule D-The reporting period is the preceding two calendar years and the current calendar year up to the date of filing.</p>
Last Name Kashkari		First Name and Middle Initial Neel T.		
Position President		Telephone No. <i>(Include area Code)</i> <p style="text-align: center;">Redacted</p>		
Certification	Signature of Reporting Individual	Date		
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Redacted	June 23, 2018		
Ethics Officer's Review	Signature of Ethics Officer	Date		
I certify that I have reviewed the information contained in this report.	Redacted	7-18-18		
Comments of Ethics Officer <i>(If additional space is required, use the reverse side of this sheet)</i>				

(Check box if comments are continued on the reverse side)

BLOCK A		BLOCK B						BLOCK C										Date (Mo., Day, Yr.) Only if Honoraria	
		None (or less than \$1,000)	\$1,001 - \$50,000	\$50,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000	Type						Amount					
OWNER	Dividends							Rent and Royalties	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Trust	Other (Specify Type)	None (or Less than \$201)	\$201 - \$1,000	\$1,001 - \$25,000	\$25,001 - \$150,000	\$150,001 - \$500,000
<p>Identify each asset held for the production of income which had a fair market value exceeding \$1,000 at the close of the reporting period.</p> <p>See the instructions for special rule for reporting an interest in a depository institution and other entities regardless of value.</p> <p>Identify each asset or source of income which generated over \$200 in income during the reporting period.</p> <p>None <input type="checkbox"/></p>																			
Examples:	Central Airlines Common	S	X				X												
	Don Jones & Smith, Hometown, USA	E											Low Partnership Income				X		
	Kempstone Equity Fund	E		X					X						X				
1.	Cash / Schwab Money Market Fund			X											X				
2.	US Gov Thrift Savings Plan G Fund – Treasury 401k		X												X				
3.	US Gov Thrift Savings Plan F Fund – Treasury 401k			X											X				
4.	Vanguard 500 Index Fund (VFIAX) – IRA			X											X				
5.	Vanguard International Index Fund (VTIAX) – IRA			X											X				
6.	PIMCO All Asset Fund (PAAIX) – Alliance 401K			X											X				
7.	PIMCO All Asset All Authority Fund (PAUIX) – Allianz 401K			X											X				
8.	Bank of America Checking Account			X											X				

Reporting Individual's Name
Neel Kashkari

FORM A - SCHEDULE B

Calendar Year Covered
2017

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Part I: Liabilities			Category of Amount of Value (x)						
Report any liability owed during the reporting period to any of the following by you, your spouse or dependent child: a bank, credit union, savings and loan association, savings bank, trust company, bank		None <input checked="" type="checkbox"/>	holding company, thrift holding company, an affiliate or subsidiary of any of the foregoing, and any entity which, to your knowledge, does or seeks to do business with the Bank. See the instructions for certain exclusions.						
	Creditor (Name and Address)	Type of Liability	D E B T O R	ID-RSSD	0- \$50,000	\$50,001- \$150,000	\$150,001- \$500,000	\$500,001- \$1,000,000	Over- \$1,000,000
Example:	First District Bank, Washington, DC	Mortgage on rental property, Delaware	J			x			
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To your knowledge, were any of the foregoing extensions of credit made on terms more favorable than offered to a person not employed by the Bank? Yes No If so, explain.

Part II: Agreements or Arrangements			
Report any agreement or arrangement for future employment, leave of absence from or continuation of payment by a former employer (including severance payments), or continuing participation in an employee benefit plan.		This part applies only to the person filing the report. See instructions regarding the reporting of negotiations for any of these arrangements or benefits.	
		None <input checked="" type="checkbox"/>	
	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 11/93 and retained pension benefits (independently managed, fully funded, defined contribution plan)	Doe Jones & Smith, Hometown, USA	7/85
1.			

Reporting Individual's Name
Neel Kashkari

FORM A - SCHEDULE C

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Part I: Positions Held Outside the Federal Reserve Bank

None

Report any position held by you during the reporting period, whether compensated or not. A position includes but is not limited to employee, officer, owner, director, trustee, partner, advisor 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.

Also report any position held by your spouse, a child, parent, or sibling with a bank, credit union, savings and loan association, savings bank, trust company, bank holding company, thrift holding company, primary government securities dealer, an affiliate or subsidiary of any of the foregoing, and any entity which, to your knowledge, does or seeks to do business with the Bank.

Organization (Name and Address)		Holder	Type of Organization	Position	From (Mo., Yr.)	To (Mo., Yr.)
Examples:	Mo. Bar Assoc., Jefferson City, MO	E	Professional	Director	9/93	Present
	ABC Bank, Hometown, USA	Brother	Bank	Loan Officer	7/85	Present
1.	Economic Club of Minnesota, Minneapolis, MN	E	Non-profit	Director	7/16	Present
2.	Twin Cities PBS, St. Paul, MN	E	Non-profit	Member, President's Council	6/16	Present
3.	Aspen Economic Strategy Group, Aspen, CO	E	Non-profit	Member	8/17	Present
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Reporting Individual's Name
Neel Kashkari

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Part II: Other Situations

Describe any other relationship or circumstances that you believe might constitute an actual or apparent conflict of interest or violation of law or Bank policy. Provide all relevant information.

None