Erickson & Brooks
CERTIFIED PUBLIC ACCOUNTANTS

STEVEN E. PRIBNOW
DANIEL J. WIESEN
KENT P. SPEICHER

2195 NORTH BROAD STREET
P.O. BOX 1270
FREMONT, NEBRASKA 68026-1270

(402) 721-3454
FAX (402) 721-2894
eb-cpa.com

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13 DEC 23 AM 11:30

December 18, 2013

Secretary of the Senate
Office of Public Records
Room 232
Hart Senate Office Building
U. S. Senate
Washington, DC 20510

Madam Secretary:

Enclosed is the United States Senate Financial Disclosure Report for Nebraska Senate candidate Benjamin E. Sasse commencing August 2, 2013.

Please provide us with a date stamped copy of the forms for our records.

If you have any questions, feel free to contact me at 402-721-3454.

Sincerely,

ERICKSON & BROOKS

Steven E. Pribnow

SEP:jb

Cc: Tyler Grassmeyer (Via E-mail)

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UNITED STATES SENATE FINANCIAL DISCLOSURE REPORT FOR NEW EMPLOYEE AND CANDIDATE FILERS

☐ Amendment

Last Name	First Name and Middle Initial	New Employee Report: Date of Employment (mm/dd/yy)	Senate Office / Agency in Which Employed	
SASSE	BENJAMIN E			
Senate / Candidate Office Address (Number, Street, City, State, and ZIP)	**Senate / Candidate Office Telephone No.**	**Candidate Report: Commencement of Candidacy (mm/dd/yy)**	**State in which you are a candidate**	**Candidate Reporting Period**
1747 LAGUNA DRIVE	402-941-6104	8/02/13	NEBRASKA	2012 & 01/01/2013 - 11/30/2013

AFTER READING THE INSTRUCTIONS – ANSWER EACH OF THESE QUESTIONS AND ATTACH THE RELEVANT PART

	YES	NO
Did you or your spouse have earned income (e.g., salaries or fees) or non-investment income of more than $200 from any reportable source in the reporting period? If Yes, complete and attach PART II.	X	
Did you, your spouse, or dependent child hold any reportable asset worth more than $1,000 at the end of the period or receive unearned or investment income of more than $200 in the reporting period? If Yes, complete and attach PART IIIA and/or IIIB.	X	
Did you, your spouse, or dependent child have any reportable liability (more than $10,000) during the reporting period? If Yes, complete and attach PART VII.	X	
Did you hold any reportable positions during the reporting period? If Yes, complete and attach PART VIII.	X	
Did you have any reportable agreement or arrangement with an outside entity on the filing date? If Yes, complete and attach PART IX.	X	
Did you receive compensation of more than $5,000 from a single source in the two prior years? If Yes, complete and attach PART X.	X	

Each question must be answered and the appropriate PART attached for each "YES" response.

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Reporting Individual's Name	Amendment		Page Number
BENJAMIN E SASSE	☐ Amendment	**PART II. EARNED AND NON-INVESTMENT INCOME**	3

Report the source (name and address), type, and amount of earned income to you from any source aggregating $200 or more during the reporting period. For your spouse, report the source (name and address) and type of earned income which aggregate $1,000 or more during the reporting period. No amount needs to be specified for your spouse. (See p.3, CONTENTS OF REPORTS Part B of Instructions.) Do not report income from employment by the U.S. Government for you or your spouse.

Individuals not covered by the Honoraria Ban:
For you and /or your spouse, report honoraria income received which aggregates $200 or more by exact amount, give the date of, and describe the activity (speech, appearance or article) generating such honoraria payment. Do not include payments in lieu of honoraria reported on Part I.

	Name of Income Source	Address (City, State)		Type of Income	Amount
Example:	*JP Computers*	*Wash., DC*	EXAMPLE	*Salary*	*$15,000*
	MCI (Spouse)	*Arlington, VA*	EXAMPLE	*Salary*	*Over $1,000*
1	Abbott Labs	Dallas, TX	12/11/2012	Strategy/Speech	12,000
2	American Association of Blood Banks	Chicago, IL	4/15/2013	Debate	12,000
3	Arkansas Hospital Association	Phoenix, AZ	10/05/2012	Strategy/Speech	10,500
4	Baylor Heath	Grapevine, TX	7/26/2012	Strategy/Speech	11,500
5	Baylor Health	Dallas, TX	10/31/2012	Strategy/Speech	11,500
6	Baylor University Medical Center	Frisco, TX	4/19/2013	Strategy/Speech	15,000
7	Boston Consulting Group	Dallas, TX	4/12/2012	Strategy/Planning	599
8	Boston Consulting Group	Dallas, TX	10/15/2012	Strategy/Speech	11,500
9	Catfish Ventures/Silverstream	San Diego, CA		Fees	155,000
10	Chautauqua Womens Club, Inc.	Chautauqua, NY	7/14/2012	Speech	2,000
11	Coca-Cola Foundation	Atlanta, GA	4/13/2012	Panel/Planning	810
12	Fingertip Formulary (formerly DBA Pinsonault)	Dallas, TX	2/29/2012	Stategy/Speech	11,500
13	Fingertip Formulary (formerly DBA Pinsonault)	Las Vegas, NV	9/19/2012	Strategy/Speech	15,000

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Reporting Individual's Name	Amendment		Page Number
BENJAMIN E SASSE	☐	PART II. EARNED AND NON-INVESTMENT INCOME	4

Report the source (name and address), type, and amount of earned income to you from any source aggregating $200 or more during the reporting period. For your spouse, report the source (name and address) and type of earned income which aggregate $1,000 or more during the reporting period. No amount needs to be specified for your spouse. (See p.3, CONTENTS OF REPORTS Part B of Instructions.) Do not report income from employment by the U.S. Government for you or your spouse.

Individuals not covered by the Honoraria Ban:
For you and /or your spouse, report honoraria income received which aggregates $200 or more by exact amount, give the date of, and describe the activity (speech, appearance or article) generating such honoraria payment. Do not include payments in lieu of honoraria reported on Part I.

	Name of Income Source	Address (City, State)		Type of Income	Amount
Example:	*JP Computers*	*Wash., DC*	EXAMPLE	*Salary*	*$15,000*
	MCI (Spouse)	*Arlington, VA*	EXAMPLE	*Salary*	*Over $1,000*
1	Fingertip Formulary (formerly DBA Pinsonault)	Orlando, FL	1/31/2013-2/01/2013	Strategy/Speech	15,000
2	Fingertip Formulary (formerly DBA Pinsonault)	Huntington Beach, CA	4/09/2013	Strategy/Speech	15,000
3	Fingertip Formulary (formerly DBA Pinsonault)	San Diego, CA	9/17/2013-9/18/2013	Strategy/Speech	15,000
4	Goldman Sachs	New York, NY	1/03/2013	Strategy/Speech	15,000
5	Healthcare Coalition of Texas	Frisco, TX	9/14/2012-9/15/2012	Strategy/Speech	19,175
6	Healthcare Coalition of Texas	San Antonio, TX	4/25/2013-4/26/2013	Strategy/Speech	15,000
7	Healthcare Coalition of Texas	Austin, TX	4/28/2013	Strategy/Speech	11,500
8	Hudson Valley HFMA	Tarrytown, NY	4/18/2013	Strategy/Speech	10,000
9	Indiana Hospital Association	Indianapolis, IN	10/01/2013	Strategy/Speech	12,000
10	Integris Health, Inc.	Phoenix, AZ	11/01/2012	Strategy/Speech	11,400
11	Kentucky Hospital Association	Louisville, KY	5/10/2013	Strategy/Speech	12,000
12	Lincoln Healthcare	Orlando, FL	2/05/2012	Strategy/Speech	11,500
13	Lincoln Healthcare	Washington, DC	12/06/2012	Debate	11,250

Reporting Individual's Name	☐ Amendment		Page Number
BENJAMIN E SASSE		**PART II. EARNED AND NON-INVESTMENT INCOME**	5

Report the source (name and address), type, and amount of earned income to you from any source aggregating $200 or more during the reporting period. For your spouse, report the source (name and address) and type of earned income which aggregate $1,000 or more during the reporting period. No amount needs to be specified for your spouse. (See p.3, CONTENTS OF REPORTS Part B of Instructions.) Do not report income from employment by the U.S. Government for you or your spouse.

Individuals not covered by the Honoraria Ban:
For you and /or your spouse, report honoraria income received which aggregates $200 or more by exact amount, give the date of, and describe the activity (speech, appearance or article) generating such honoraria payment. Do not include payments in lieu of honoraria reported on Part I.

	Name of Income Source	Address (City, State)		Type of Income	Amount
Example:	*JP Computers*	*Wash., DC*	EXAMPLE	*Salary*	*$15,000*
	MCI (Spouse)	*Arlington, VA*	EXAMPLE	*Salary*	*Over $1,000*
1	Maine Hospital Association	Rockport, ME	6/20/2013	Strategy/Speech	10,000
2	Medassets	Las Vegas, NV	4/03/2013	Strategy/Speech	12,000
3	Midland University	Fremont, NE		Salary - 2012	288,403
4	Midland University	Fremont, NE		Salary - 2013	297,000
5	Minnesota Hospital Association	Brainerd, MN	9/19/2013	Strategy/Speech	10,000
6	Moss Adams	Las Vegas, NV	10/22/2013	Debate	12,000
7	MyTelehealth Solutions, LLC	San Diego, CA		Strategy	46,286
8	Oklahoma Hospital Association	Oklahoma City, OK	11/21/2013	Strategy/Speech	10,000
9	Qualcomm, Inc.	San Diego, CA		Strategy	1,000
10	St. David's Healthcare	Austin, TX	5/06/2013	Strategy/Speech	15,000
11	South Dakota Association of Healthcare Executives	Sioux Falls, SD	9/20/2012	Strategy/Speech	10,400
12	South Dakota Association of Healthcare Orgs	Sioux Falls, SD	9/20/2013	Strategy/Speech	10,000
13	Texas Hospital Association	Dallas, TX	8/10/2012	Strategy/Speech	11,500

Reporting Individual's Name	☐ Amendment		Page Number
BENJAMIN E SASSE		**PART II. EARNED AND NON-INVESTMENT INCOME**	6

Report the source (name and address), type, and amount of earned income to you from any source aggregating $200 or more during the reporting period. For your spouse, report the source (name and address) and type of earned income which aggregate $1,000 or more during the reporting period. No amount needs to be specified for your spouse. (See p.3, CONTENTS OF REPORTS Part B of Instructions.) Do not report income from employment by the U.S. Government for you or your spouse.

Individuals not covered by the Honoraria Ban:
For you and /or your spouse, report honoraria income received which aggregates $200 or more by exact amount, give the date of, and describe the activity (speech, appearance or article) generating such honoraria payment. Do not include payments in lieu of honoraria reported on Part I.

	Name of Income Source	Address (City, State)		Type of Income	Amount
Example:	*JP Computers*	*Wash., DC*	**EXAMPLE**	*Salary*	*$15,000*
	MCI (Spouse)	*Arlington, VA*	**EXAMPLE**	*Salary*	*Over $1,000*
1	Texas Hospital Association	Austin, TX	2/14/2013	Strategy/Speech	15,000
2	Trinity Mother Frances Hospital	Frisco, TX	9/21/2012	Strategy/Speech	11,500
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					

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Reporting Individual's Name

☐ Amendment

PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

BLOCK A
Identity of Publicly Traded Assets And Unearned Income Sources

Report the complete name of each publicly traded asset held by you, your spouse, or your dependent child, *(See p.3, CONTENTS OF REPORTS Part B of Instructions)* for production of income or investment which:
(1) had a value exceeding $1,000 at the close of the reporting period; and/or
(2) generated over $200 in "unearned" income during the reporting period.
Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.

BLOCK B
Valuation of Assets
At the close of reporting period. If None, or less than $1,001, Check the first column.

BLOCK C
Type and Amount of Income

#	S, DC, or J	Asset	B: None (or less than $1,001)	B: $1,001 - $15,000	B: $15,001 - $50,000	B: $50,001 - $100,000	B: $100,001 - $250,000	B: $250,001 - $500,000	B: $500,001 – $1,000,000	B: Over $1,000,000***	B: $1,000,001 - $5,000,000	B: $5,000,001 - $25,000,000	B: $25,000,001 - $50,000,000	B: Over $50,000,000	Type of Income: None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	Amount of Income: 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	Actual Amount Required if "Other" Specified
Example:		*IBM Corp. (stock)*				X										X							*Example*		X										*Example*
Example:	*(S)*	*Keystone Fund*					X													X			*Example*	X											*Example*
1	J	ISHARES TIPS ETF		x												x								x											
2	J	ISHARES US Treas ETF		x												x								x											
3	J	ISHARES MSCI EAFE ETF		x												x									x										
4	J	ISHARES Russell MCGR ETF		x												x			x					x											
5	J	ISHARES Russell 2000 Val ETF		x												x			x					x											
6	J	ISHARES Russell 2000 GR ETF		x												x			x					x											
7	J	ISHARES MSCI EAFE Small-Cap ETF		x												x			x					x											
8	J	ISHARES JPM USD Em Mkt BDGTC		x												x			x					x											
9	J	ISHARES MBS ETF		x												x			x					x											
10	J	ISHARES Intm Govt/CR Bd ETF			x											x									x										

EXEMPTION TEST *(see instructions before marking box)*: If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right. ☐

*** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

Reporting Individual's Name: BENJAMIN E SASSE

☐ Amendment

PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

BLOCK A
Identity of Publicly Traded Assets And Unearned Income Sources

Report the complete name of each publicly traded asset held by you, your spouse, or your dependent child, *(See p.3, CONTENTS OF REPORTS Part B of Instructions)* for production of income or investment which:
(1) had a value exceeding $1,000 at the close of the reporting period; and/or
(2) generated over $200 in "unearned" income during the reporting period.
Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.

BLOCK B
Valuation of Assets
At the close of reporting period. If None, or less than $1,001, Check the first column.

#	S, DC, or J	Asset	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
Example:	S, DC, or J	*IBM Corp. (stock)*				X								
Example:	*(S)*	*Keystone Fund*					X							
1	J	SPDR Barclays HY Bd ETF		X										
2	J	SPDR Barclays IM Treas ETF		X										
3	J	Vanguard LT Bond Fd		X										
4	J	Vanguard Global EX-US RE ETF		X										
5	J	Vanguard Emg Mkt ETF		X										
6	J	Vanguard CRSP US MCVAL ETF		X										
7	J	Vanguard Reit Ind ETF		X										
8	J	Vanguard CRSP US Large CGR ETF			X									
9	J	Vanguard CRSP US Large ETF			X									
10	J	TD Ameritrade Ins Dep Acct		X										

BLOCK C
Type and Amount of Income

Type of Income

#	Asset	None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)
Example:	*IBM Corp. (stock)*		X							*Example*
Example:	*Keystone Fund*						X			*Example*
1	SPDR Barclays HY Bd ETF		X							
2	SPDR Barclays IM Treas ETF		X							
3	Vanguard LT Bond Fd		X							
4	Vanguard Global EX-US RE ETF		X			X				
5	Vanguard Emg Mkt ETF		X			X				
6	Vanguard CRSP US MCVAL ETF		X			X				
7	Vanguard Reit Ind ETF		X			X				
8	Vanguard CRSP US Large CGR ETF		X			X				
9	Vanguard CRSP US Large ETF		X			X				
10	TD Ameritrade Ins Dep Acct				X					

Amount of Income

#	Asset	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	Actual Amount Required if "Other" Specified
Example:	*IBM Corp. (stock)*		X										*Example*
Example:	*Keystone Fund*	X											*Example*
1	SPDR Barclays HY Bd ETF		X										
2	SPDR Barclays IM Treas ETF	X											
3	Vanguard LT Bond Fd	X											
4	Vanguard Global EX-US RE ETF		X										
5	Vanguard Emg Mkt ETF		X										
6	Vanguard CRSP US MCVAL ETF	X											
7	Vanguard Reit Ind ETF	X											
8	Vanguard CRSP US Large CGR ETF		X										
9	Vanguard CRSP US Large ETF		X										
10	TD Ameritrade Ins Dep Acct	X											

EXEMPTION TEST *(see instructions before marking box)*: If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right. ☐

*** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

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Reporting Individual's Name ☐ Amendment

PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

BLOCK A
Identity of Publicly Traded Assets And Unearned Income Sources

Report the complete name of each publicly traded asset held by you, your spouse, or your dependent child, *(See p.3, CONTENTS OF REPORTS Part B of Instructions)* for production of income or investment which:
(1) had a value exceeding $1,000 at the close of the reporting period; and/or
(2) generated over $200 in "unearned" income during the reporting period.
Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.

BLOCK B
Valuation of Assets
At the close of reporting period. If None, or less than $1,001, Check the first column.

BLOCK C
Type and Amount of Income

#	S, DC, or J	Asset	B: None (or less than $1,001)	B: $1,001 - $15,000	B: $15,001 - $50,000	B: $50,001 - $100,000	B: $100,001 - $250,000	B: $250,001 - $500,000	B: $500,001 – $1,000,000	B: Over $1,000,000***	B: $1,000,001 - $5,000,000	B: $5,000,001 - $25,000,000	B: $25,000,001 - $50,000,000	B: Over $50,000,000	Type of Income: None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	Amount of Income: 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	Actual Amount Required if "Other" Specified
Example:	S, DC, or J	*IBM Corp. (stock)*				X										X							*Example*		X										*Example*
		(S) Keystone Fund					X													X			*Example*	X											*Example*
1		Teacher Retirement System of Texas			x											x		x	x							x									
2	J	Pioneer Core Equity Fd		x												x			x						x										
3		Melissa's IRAs:																																	
4	S	Windsor II Fund			x											x			x					x											
5	S	Windsor II Fund			x											x			x						x										
6		Ben's Pinnacle Bank HSA			x													x						x											
7		Ben's Roth IRA:																																	
8		Windsor Fund		x												x			x					x											
9		Windsor II Fund		x												x			x					x											
10																																			

EXEMPTION TEST *(see instructions before marking box)*: If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right. ☐
*** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

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Reporting Individual's Name: BENJAMIN E SASSE

☐ Amendment

PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

BLOCK A — Identity of Publicly Traded Assets And Unearned Income Sources

Report the complete name of each publicly traded asset held by you, your spouse, or your dependent child, *(See p.3, CONTENTS OF REPORTS Part B of Instructions)* for production of income or investment which:
(1) had a value exceeding $1,000 at the close of the reporting period; and/or
(2) generated over $200 in "unearned" income during the reporting period.
Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.

BLOCK B — Valuation of Assets

At the close of reporting period. If None, or less than $1,001, Check the first column.

#	S, DC, or J	Asset	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
Example:		*IBM Corp. (stock)*				X								
Example:	*(S)*	*Keystone Fund*					X							
1		Ben's SEP IRA:												
2		TD Bank NA Cash		X										
3		ISHARES Int Govt Bnd ETF			X									
4		SPDR Barclays HY Bnd ETF		X										
5		SPDR Barclays Int Treas Bnd ETF		X										
6		Vanguard LT Bd FD		X										
7		Vanguard Global EX-US RE ETF		X										
8		Vanguard Emerging Mkts ETF			X									
9		Vanguard CRST US MCVAL ETF		X										
10		Vanguard Reit Index ETF		X										

BLOCK C — Type and Amount of Income

#	Asset	Type of Income: None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)	Amount of Income: 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	Actual Amount Required if "Other" Specified
Example:	*IBM Corp. (stock)*		X							*Example*		X										*Example*
Example:	*(S) Keystone Fund*						X			*Example*	X											*Example*
1	Ben's SEP IRA:																					
2	TD Bank NA Cash				X						X											
3	ISHARES Int Govt Bnd ETF		X										X									
4	SPDR Barclays HY Bnd ETF		X									X										
5	SPDR Barclays Int Treas Bnd ETF		X									X										
6	Vanguard LT Bd FD		X									X										
7	Vanguard Global EX-US RE ETF		X			X						X										
8	Vanguard Emerging Mkts ETF		X										X									
9	Vanguard CRST US MCVAL ETF		X									X										
10	Vanguard Reit Index ETF		X									X										

EXEMPTION TEST *(see instructions before marking box)*: If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right. ☐

*** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

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Reporting Individual's Name	☐ Amendment		
BENJAMIN E SASSE		**PART IIIA. PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES**	Page Number 11

BLOCK A
Identity of Publicly Traded Assets And Unearned Income Sources

Report the complete name of each publicly traded asset held by you, your spouse, or your dependent child, *(See p.3, CONTENTS OF REPORTS Part B of Instructions)* for production of income or investment which:
(1) had a value exceeding $1,000 at the close of the reporting period; and/or
(2) generated over $200 in "unearned" income during the reporting period.
Include on this PART IIIA a complete identification of each public bond, mutual fund, publicly traded partnership interest, excepted investment funds, bank accounts, excepted and qualified blind trusts, and publicly traded assets of a retirement plan.

BLOCK B
Valuation of Assets

At the close of reporting period. If None, or less than $1,001, Check the first column.

BLOCK C
Type and Amount of Income

Block B – Valuation of Assets

#	S, DC, or J	Identity	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
Example:		*IBM Corp. (stock)*				X								
Example:	*(S)*	*Keystone Fund*					X							
1		Vanguard CRSP US LG Cap GR ETF			X									
2		VG CRSP US La Cap Val ETF			X									
3	J	USAA Checking					X							
4	J	USAA Savings			X									
5														
6														
7														
8														
9														
10														

Block C – Type of Income

#	Identity	None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other *(Specify Type)*
Example:	*IBM Corp. (stock)*		X							*Example*
Example:	*Keystone Fund*						X			*Example*
1	Vanguard CRSP US LG Cap GR ETF		X			X				
2	VG CRSP US La Cap Val ETF		X			X				
3	USAA Checking	X								
4	USAA Savings				X					
5										
6										
7										
8										
9										
10										

Block C – Amount of Income

#	Identity	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	Actual Amount Required if "Other" Specified
Example:	*IBM Corp. (stock)*		X										*Example*
Example:	*Keystone Fund*	X											*Example*
1	Vanguard CRSP US LG Cap GR ETF			X									
2	VG CRSP US La Cap Val ETF			X									
3	USAA Checking	X											
4	USAA Savings		X										
5													
6													
7													
8													
9													
10													

EXEMPTION TEST *(see instructions before marking box)*: If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right. ☐

*** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

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Reporting Individual's Name: BENJAMIN E SASSE

☐ Amendment

PART IIIB. NON-PUBLICLY TRADED ASSETS AND UNEARNED INCOME SOURCES

BLOCK A
Identity of Non-Publicly Traded Assets and Unearned Income Sources

Report the name, address (city, state and description) of each interest held by you, your spouse, or your dependent child (See p.3, CONTENTS OF REPORTS Part B of Instructions) for the production of income or investment in a non-public trade or business which:
(1) had a value exceeding $1,000 at the close of the reporting period; and/or
(2) generated over $200 in "unearned" income during the reporting period.
Include the above report for each underlying asset, which is not incidental to the trade or business. Publicly traded assets held by non-public entity may be listed on Part IIIA.

BLOCK B
Valuation of Assets
At the close of reporting period. If None, or less than $1,001, Check the first column.

Block A (S, DC, or J)	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
Example: JP Computer, Software Design, Wash DC				X								
Example: Undeveloped land, Dubuque, Iowa					X							
1 Calico Holdings			X									
2 Jackson Hole Living, LLC				X								
3 Rental Res-Alexandria, VA							X					
4 Thrivent-CSV Of Life Policy		X										
5												
6												
7												
8												
9												
10												

BLOCK C
Type and Amount of Income

Type of Income

Block A	None	Dividends	Rent	Interest	Capital Gains	Excepted Investment Fund	Excepted Trust	Qualified Blind Trust	Other (Specify Type)
Example: JP Computer, Software Design, Wash DC		X							Example
Example: Undeveloped land, Dubuque, Iowa	X								Example
1 Calico Holdings	X								
2 Jackson Hole Living, LLC	X								
3 Rental Res-Alexandria, VA			X						
4 Thrivent-CSV Of Life Policy	X								
5									
6									
7									
8									
9									
10									

Amount of Income

Block A	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	Actual Amount Required if "Other" Specified
Example: JP Computer, Software Design, Wash DC		X										Example
Example: Undeveloped land, Dubuque, Iowa	X											Example
1 Calico Holdings	X											
2 Jackson Hole Living, LLC	X											
3 Rental Res-Alexandria, VA						X						
4 Thrivent-CSV Of Life Policy	X											
5												
6												
7												
8												
9												
10												

EXEMPTION TEST *(see instructions before marking box)*: If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right. ☐

*** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

Reporting Individual's Name ☐ Amendment

BENJAMIN E SASSE

PART VII. LIABILITIES

Report liabilities over $10,000 owed by you, your spouse, or dependent child (See p.3, CONTENTS OF REPORTS, Part B of Instructions), to any one creditor at any time during the reporting period. Check the highest amount owed during the reporting period. Exclude: (1) mortgages on your personal residences unless rented **(except for Senators)**; (2) loans secured by automobiles, household furniture or appliances; and (3) liabilities owed to certain relatives listed in Instructions. See Instructions for reporting revolving charge accounts.

	S, DC, or J	Name of Creditor	Address	Type of Liability	Date Incurred	Interest Rate	Discount Points Paid for Mortgage *(Senators Only)*	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
Example:	S, DC, or J	*First District Bank*	*Wash., DC*	*Mortgage on undeveloped land*	*1992*	*13%*	*1 pt*	*25 yrs*			X		E	X	A	M	P	L	E
Example:	*(J)*	*John Jones*	*Wash., DC*	*Promissory Note*	*2000*	*10%*	*n/a*	*On dmd*				X	E	X	A	M	P	L	E
1		First Natl Bank Omaha	Omaha, NE	Residential Mortgage	2013	2.99%	n/a	10 yrs					X						
2																			
3																			
4																			
5																			
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8																			
9																			
10																			
11																			
12																			

EXEMPTION TEST *(see instructions before marking box)*: If you omitted any asset because it meets the three-part test for exemption described in the instructions, please check box to the right. ☐

*** This category applies only if the asset is/was held independently by the spouse or dependent child. If the asset is/was either held by the filer or jointly held, use the other categories of value, as appropriate.

Reporting Individual's Name	☐ Amendment	Page Number
BENJAMIN E SASSE	**PART VIII. POSITIONS HELD OUTSIDE U.S. GOVERNMENT**	14

Report any positions held by you 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. Both the year and month must be reported for the period of time that the position was held.

Exclude: Positions with federal government, religious, social, fraternal, or political entities, and those solely of an honorary nature.

	Name of Organization	Address (City, State)	Type of Organization	Position Held	From (Mo/Yr)	To (Mo/Yr)
Example:	*National Assn. of Rock Collectors*	*NY,NY* **EXAMPLE**	*Non-profit education*	*President*	*6 / 91*	*Present*
	Jones & Smith	*Hometown, USA* **EXAMPLE**	*Law Firm*	*Partner*	*7 / 96*	*11 / 1X*
1	Association of Independent Colleges of NE	Lincoln, NE	Non-Profit	Director	3/10	Present
2	Great Plains Athletic Conference	Sioux City, IA	Non-Profit	Director	3/10	Present
3	Midland University	Fremont, NE	Private Christian University	President	2/10	Present
4	MyTelehealthsolutions, LLC	San Diego, CA	Corporation	Director	5/11	6/13
5	Nebraska Independent College Fund	Omaha, NE	Non-Profit	Director	3/10	Present
6	Simplex Healthcare, Inc.	Franklin, TN	Corporation	Director	7/09	10/13
7	Westminister Seminary California	Escondido, CA	Non-Profit	Director	1/10	Present
8						
9	* Multiple religious organization positions					
10	not listed, per instructions.					
11						
12						
13						

Compensation in excess of $200 from any position must be reported in Part II.

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Reporting Individual's Name	☐ Amendment		Page Number
BENJAMIN E SASSE		**PART IX. AGREEMENTS OR ARRANGEMENTS**	15

Report your agreements or arrangements for future employment (including agreements with a publisher for writing a book or sale of other intellectual property), leaves of absence, continuation of payment by a former employer (including severance payments), or continuing participation in an employee benefit plan. See Instructions regarding the reporting of negotiations for any of these arrangements or benefits.

	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 services performed through 11/0X and retained pension benefits (diversified, independently managed, fully funded, defined contribution plan)*	*Jones & Smith, Hometown, USA* **EXAMPLE**	*1 / 94*
	Employment agreement with XYZ Co. to become Vice President of Government Relations. Terms of agreement include salary between $50,001-$100,000, signing bonus between $2,501-$5,000 and stock options	*XYZ Co., Bethesda, MD* **EXAMPLE**	*1 / 1X*
1	Renewed employment agreement with Midland University	Midland University, Fremont, NE	6/2012
2	President. Duties as specified by the Board of Directors of the University, for a duration that		
3	includes evergreen second year renewal provisions. Terms include salary between $250,000		
4	and $350,000 per year. Annual retirement contribution; early deprture penalties; and option to depart		
5	as president yet remain as professor.		
6			
7	Amendment to employment agreement with Midland University	Midland University, Fremont, NE	10/2013
8	Amendment to extant employment agreement, through May 15, 2014 to reflect the reduction of		
9	presidential duties commensurate with the creation of "chairman's cabinet" to oversee most daily		
10	institutional operations. Terms include reduction of salary to between $100,000 and $150,000		
11	per year.		
12			
13			
14			

Reporting Individual's Name	☐ Amendment		Page Number
BENJAMIN E SASSE		**PART X. COMPENSATION IN EXCESS OF $5,000 PAID BY ONE SOURCE**	16

FIRST TIME FILERS ONLY: (Except Candidate Reports - All Candidate Reports Must Include Part X If Applicable)

Report sources of compensation received by you or your business affiliation for services provided directly by you during the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or .any non-profit organization when you directly provided the services to the clients and/or customers of the firm that generated a fee or payment of more than $5,000. You need not report the U.S. Government as a source.

	Name of Source	Address of Source	Brief Description of Duties
Example:	*Jones & Smith*	*Hometown, TX*	*Legal Services* **EXAMPLE**
	Metro University (client of Jones & Smith	*Moneytown, USA*	*Legal Services in connection with university construction* **EXAMPLE**
1	Abbott Labs	Dallas, TX	Strategy/Speech
2	American Association of Blood Banks	Chicago, IL	Debate
3	Arkansas Hospital Association	Phoenix, AZ	Strategy/Speech
4	Baylor Health	Grapevine, TX	Strategy/Speech
5	Baylor Health	Dallas, TX	Strategy/Speech
6	Baylor University Medical Center	Frisco, TX	Strategy/Speech
7	Boston Consulting Group	Dallas, TX	Strategy/Speech
8	Catfish Ventures/Silverstream	San Diego, CA	Fees
9	Fingertip Formulary (formerly DBA Pinsonault)	Dallas, TX	Strategy/Speech
10	Fingertip Formulary (formerly DBA Pinsonault)	Las Vegas, NV	Strategy/Speech
11	Fingertip Formulary (formerly DBA Pinsonault)	Orlando, FL	Strategy/Speech
12	Fingertip Formulary (formerly DBA Pinsonault)	Huntington Beach, CA	Strategy/Speech
13	Fingertip Formulary (formerly DBA Pinsonault)	San Diego, CA	Strategy/Speech
14	Goldman Sachs	New York, NY	Strategy/Speech
15	Healthcare Coalition of Texas	Frisco, TX	Strategy/Speech

Reporting Individual's Name	☐ Amendment		Page Number
BENJAMIN E SASSE		PART X. COMPENSATION IN EXCESS OF $5,000 PAID BY ONE SOURCE	17

FIRST TIME FILERS ONLY: (Except Candidate Reports - All Candidate Reports Must Include Part X If Applicable)

Report sources of compensation received by you or your business affiliation for services provided directly by you during the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or .any non-profit organization when you directly provided the services to the clients and/or customers of the firm that generated a fee or payment of more than $5,000. You need not report the U.S. Government as a source.

	Name of Source	Address of Source	Brief Description of Duties
Example:	*Jones & Smith*	*Hometown, TX*	*Legal Services* **EXAMPLE**
	Metro University (client of Jones & Smith	*Moneytown, USA*	*Legal Services in connection with university construction* **EXAMPLE**
1	Healthcare Coalition of Texas	San Antonio, TX	Strategy/Speech
2	Healthcare Coalition of Texas	Austin, TX	Strategy/Speech
3	Health Care Service Corporation	Chicago, IL	Strategy
4	Hudson Valey HFMA	Tarrytown, NY	Strategy/Speech
5	Indiana Hospital Association	Indianapolis, IN	Strategy/Speech
6	Integris Health, Inc.	Phoenix, AZ	Strategy/Speech
7	Kentucky Hospital Association	Louisville, KY	Strategy/Speech
8	Lincoln Healthcare	Orlando, FL	Strategy/Speech
9	Lincoln Healthcare	Washington, DC	Debate
10	Maine Hospital Association	Rockport, ME	Strategy/Speech
11	Medassets	Las Vegas, NV	Strategy/Speech
12	Memorial Hermann Healthcare System	Houston, TX	Strategy/Speech
13	Midland University	Fremont, NE	Salary - 2012
14	Midland University	Fremont, NE	Salary - 2013
15	Minnesota Hospital Association	Brainerd, MN	Strategy/Speech

Reporting Individual's Name	☐ Amendment		Page Number
BENJAMIN E SASSE		**PART X. COMPENSATION IN EXCESS OF $5,000 PAID BY ONE SOURCE**	18

FIRST TIME FILERS ONLY: (Except Candidate Reports - All Candidate Reports Must Include Part X If Applicable)

Report sources of compensation received by you or your business affiliation for services provided directly by you during the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or .any non-profit organization when you directly provided the services to the clients and/or customers of the firm that generated a fee or payment of more than $5,000. You need not report the U.S. Government as a source.

	Name of Source	Address of Source	Brief Description of Duties
Example:	*Jones & Smith*	*Hometown, TX*	*Legal Services* **EXAMPLE**
	Metro University (client of Jones & Smith	*Moneytown, USA*	*Legal Services in connection with university construction* **EXAMPLE**
1	Moss Adams	Las Vegas, NV	Debate
2	MyTelehealth Solutions, LLC	San Diego, CA	Strategy
3	Oklahoma Hospital Association	Oklahoma City, OK	Strategy/Speech
4	St. David's Healthcare	Austin, TX	Strategy/Speech
5	South Dakota Association of Healthcare Execs	Sioux Falls, SD	Strategy/Speech
6	South Dakota Assocation of Healthcare Orgs	Sioux Falls, SD	Strategy/Speech
7	Texas Hospital Association	Dallas, TX	Strategy/Speech
8	Texas Hospital Association	Austin, TX	Strategy/Speech
9	Trinity Mother Frances Hospital	Frisco, TX	Strategy/Speech
10			
11			
12			
13			
14			
15			

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