#### UNITED STATES HOUSE OF REPRESENTATIVES **EXEMPTION** – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or your dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics. IPO - Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answered "yes" to this question, please contact the Committee on Ethics for further guidance. E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the exchange any securities or reportable real estate in a transaction B. Did you, your spouse, or your dependent child purchase, sell, or A. Did you, your spouse, or your dependent child: PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS Name:\_( **TRUSTS** – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child? reporting period? exceeding \$1,000 during the reporting period? IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>EACH</u> OF THESE QUESTIONS REPORT TYPE FILER STATUS a. Own any reportable asset that was worth more than \$1,000 at the Make more than \$200 in unearned income from any reportable end of the reporting period? or asset during the reporting period? Oldton! 2015 Annual (Due: May 16, 2018) U.S. House of Representatives Member of or Candidate for Staumh District: State: Wyonnes Yes 7 Yes ř S Yes Υes Daytime Telephone: Amendment Š š S Š Š For Use by Members, Officers, and Employees H. Did you, your spouse, or your dependent child receive any G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$375 in value from a single F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" lieu of paying you for a speech, appearance, or article during the I. Did any individual or organization make a donation to charity in year up through the date of filing? reportable travel or reimbursements for travel totaling more than \$375 in value from a single source during the reporting period? reporting period? source during the reporting period? Form A Employee Officer or Employing Office Date of Termination: Termination $\vdash$ A \$200 penalty shall be assessed against any individual who files more than 30 days late. PERISTALIAE SERVINGE CERTS 2017 MAR 31 PM J: 1.8 MAR 24 2017 Page 1 of 10 Yes Yes Yes Yes Yes Ύes Yes ĕ Š 중 중 Š S S

## SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Cynthia M. Lummis

Page of 10

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, 5	_	9	JTArpa Hammond Hardware	Tydesoul skawny LL			32	\$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts. For rental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and state. For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.  Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Sevings Plan. If you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box.  If you so choose, you may indicate that an asset or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left.  For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over	(do not use only tacker symbols).  (do not use only tacker symbols).  (a) If Rue and other retirement plans (such as 401(k) plane) provide the value for each asset held in the account that exceeds the reporting thresholds.	Identify (a) each asset held for investment or production of income and with a fair market value succeeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income that generated more than \$200 in "unearned" income during the year.  Provide complete names of stocks and mutual funds	
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			<u> </u>					\$100,001-\$250,000	· 70	1	Indicate value of asset at close of the reporting period. If you use a valuation method other than fair market value, please specify the method used.  If an asset was sold during the reporting period and is included only because it generated income, the value should be "Yone."  Column M is for assets held by your spouse or dependent child in which you have no interest.	BLOCK B
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

#### SCHEDULE B - TRANSACTIONS

Name: Cynthia M. Lummis Page W of 10

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Report any	resulted in Exclude tr. purchase o a portion of	Capital Ga the 'capital the capital	* Column K	SP. DC. JT	SP																		
Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the reporting period of any security or real property held by you, your spouse, or your dependent held for investment or the more dependent held for investment or the production of the common lines.	dependent child for investment or the production of income. Include transactions that resulted in a capital loss. Provide a brief description of an exchange transaction. Exclude transactions between you, your spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please choose "partial sale" as the type of transaction.	Capital Gains: If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box, unless it was an asset in a tax-deferred account, and disclose the capital gain income on Schedule A.	* Column K is for assets solely held by your spouse or dependent child.		Example																		
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### SCHEDULE C - EARNED INCOME

Name: Cynthia M. Lummis Page IX

INCOME LIMITS and PROHIBITED INCOME: The 2015 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,225. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were totally prohibited. **EXCLUDE**: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below. Examples: Keene State
State of Maryland
Civil War Roundtable (Oct. 2)
Ontario County Board of Education Source (include date of receipt for honoraria) Done Approved Teaching Fee
Legislative Pension
Spouse Speech
Spouse Salary Type Amount

#### **SCHEDULE D – LIABILITIES**

Name: Cyrothia M. Lummis

Page 7 of 1

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. \*Column K is for liabilities held solely by your spouse or dependent child

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		Mells	Example			
	0, 1	Wells Fargo, 30 yr. fixed @4,75	First Bank of Wilmington, DE	Creditor		
			5/98	Date Liability Incurred MO/YR		
in the	Washington, D.C.	01/09 Mto an 437 New York Ave NW	Mortgage on Rental Property, Dover, DE	Type of Liability		
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:				Over \$1,000,000* (Spouse/DC Liability)	*	

#### **SCHEDULE E - POSITIONS**

Report all positions, compensated or uncompensated, held during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious social fraternal or political entities (such as political parties and campaign organizations); and positions social fraternal or political entities (such as political parties and campaign organizations); and positions social fraternal or political entities (such as political parties and campaign organizations); and positions social fraternal or political entities (such as political parties and campaign organizations); and positions social fraternal or political entities (such as political parties and campaign organizations).

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		Officer, Director (uncompensated)	Position	neid in any religious, social, iratemal, or political entities (such
		d) Arp & Hammond Hardware Co., Cheyenne, Wyo. (Wyo. for profit corp)	Name of Organization	neid in any religious, social, iratemat, or political entities (such as political parties and campaign organizations); and positions solely or an normaly nature.

#### **SCHEDULE F - AGREEMENTS**

Name Cynthia M. Lummis
Page St of
10

Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

			Date
		- hone -	Parties to Agreement
			Terms of Agreement

#### SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$375 received by you, your spouse, or your dependent child from any source during the year. **Exclude**: Gifts from relatives, gifts of personal hospitality from an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$150 or less need not be added towards the \$375 disclosure threshold. **Note**: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph Smith, Arlington, VA	Silver Platter (determination of personal friendship received from the Ethics Committee)	\$400
- none -		
		The state of the s

# SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

Name:
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sponsor or were paid by you and reimbursed by the sponsor. Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$375 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the

**EXCLUDE**: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

							Crampress		
					-none -		Habitat for Humanity (charity fundraiser)	Government of China (MECEA)	Source
							Mar. 3-4	Aug. 6-11	Date(s)
							DC-Boston-DC	DC-Beijing, China-DC	City of Departure-Destination-City of Return
							Y	۲	Lodging? (Y/N)
							Υ	٧	Food? (Y/N)
							¥	Z	Family Member Included? (Y/N)

# SCHEDULE I – PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

Name: Cynthia M. Lummi Spage of 10

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of paying an honorarium to you. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics.	of an event to a charitable organ	ization in lieu of paying an	honorarium to you. A
Source	Activity	Date	Amount
Examples: Association of American Associations, Washington, DC	Speech	Feb, 2, 2015	\$2,000
ил с надално	2) dod	rag. 13, 2010	\$300
none -			
	2.00.2		

FILER NOTES (Optional)

Name: Page /O\_of\_/O\_

							NOTE NUMBER
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