Name: JOHN J. DW(AN, JR. Daytime Telephone: 202-225-5425 A \$200 penalty shall be assessed against any individual who files more than 30 days late. 2016 FINANCIAL DISCLOSURE STATEMENT UNITED STATES HOUSE OF REPRESENTATIVES REPORT TYPE FILER STATUS 2016 Annual (Due: May 15, 2017) Member of the U.S. House of Representatives State: 1/2 Amendment For Use by Members, Officers, and Employees Form A Employee Officer or Employing Office: Termination Date of Termination: U.S. HOUSE OF RELIVES THE DISSESSMENTS BOTH HAND DELIVERED of 2 2017 MAY 12 PM 4: 17 Shared Staff Filer Type: (If Applicable) Principal Assistant

PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

YOU ANSWER "YES"	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	Yes No No	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?
Yes No	I. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period?	Yes No	D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?
Yes No	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$375 in value from a single source during the reporting period?	Yes No	C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?
Yes No	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$375 in value from a single source during the reporting period?	Yes	B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period?
Yes No X	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	Yes No	A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?

IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS

Yes No X	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.
Yes No X	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?
Yes 🗌 No 🔀	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.

TAIDME THAN AMERICA	HILLARO LYON-TR	KDEUTYTUM INC.	Mulas Lyon Tiph	KIDELTU VALVETUID	Hillago Lyons-IDA	ABC Hedge Fund X	Examples:	SP Maga Corp. Stock Elf	For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (IOD), or jointly held with anyone (JT), in the optional column on the far left,	If you have a privately-traded fund that is an Excepted investment Fund, please check the "EIF" box.	Exclude: Your personal residence, including second homes and vacation homes (unless their was rehal income during the exporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	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.	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 bank and offier cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.		Provide complete names of stocks and mutual funds) (60 not use only ticker symbols). For all IRAs and other retirement plans (such as		_	_	BLOCK A
		X		X		×	Indefinite	×	\$25,000,00 Over \$50,00	0,000 00,000 250,000 500,000 1,000,000 \$5,000,000 \$25,000,000	0000,000*					A B C D E F G H I J K L M	you nave no merest:	d during the reporting period and is included only income, the value should be "None." ets held by your spouse or dependent child in which		Value of Asset	всоскв
X		X		X		Partnership Income	Royaliles	×	TAX-DEFER	AINS VBLIND TRUST		Farm Income)						countil. Dividence, misrees, and capital game, seen if reinvested, must be disclosed as income for assets held in taxable accounts, Check "None" if the asset generated no income during the reporting period.	Check all columns that apply. For accounts that personal transparents tax-deferred income (such as 401(k), IRA, or 529 accounts), your may check the Tax-Deferred to the transparent trans	Type of Income	BLOCK C
X		X		X		×	×	×	None \$1-\$200 \$201-\$1,000 \$1,001-\$2,5 \$2,501-\$5,0 \$5,001-\$15, \$15,001-\$16, \$100,001-\$1 \$1,000,001- Over \$5,000 \$pouse/DC.	00 00 000 000 0,000 00,000 0,000,000 \$5,000,000	The over \$	1,000,000*					"Column XII is for assets held by your spouse or dependent child in which you have no interest.		It For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets indicate the category of income by checking the appropriate box below.	Amount of Income	вгоск р
								S(part)	P, S, S(part), or E	<u></u>		,			Leave this column blank if there are no transactions that exceeded \$1,000.	please indicate as follows: (S (part)).	period. If only a portion of an asset was sold,	sales (S), or exchanges (E) exceeding \$1,000 in the reporting	Indicate if the asset had purchases (P).	Transaction	BLOCK E

	BLOCK A Assets and/or Income Sources
None None	BLOCK B Value of Asset
DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income)	BLOCK C Type of Income
None	Amount of Income
S (Ret)	BLOCK E Transaction

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: JOHN J. DUNCAN JR.

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																	88+1572K	LOWE'S STOCK-TRA	SP Example Mega Corp. Stock	ஓ, DC, JT Asset	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.	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.	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
														_							Purchase		VΤ
l										}		,				•	X	X			Sale		pe of T
											_								×		Partial Sale		Type of Transaction
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ľ																7'	11/29/14	5/25/16	3/9/16		Monthly, or Bi- weekly, If applicable	(MO/DAYR) or Quarterty,	Date
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																_					\$5,000,001- \$25,000,000	=	3
																					\$25,000,001- \$50,000,000		
																					Over \$50,000,00	0 _	
																					Over \$1,000,000 (Spouse/DC Ass	et) ~	
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SCHEDULE C - EARNED INCOME

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	Page 5 of 9

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 I the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.	
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In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited.	relationship) are totally prohibited.	27,455. THE 2017 III BLIS \$27,765.
Source (include date of receipt for honoraria)	Туре	Amount
Evamples: State of Maryland	Approved Teaching Fee Legislative Pension	\$5,000 \$18,000
L	Spouse Spaech	\$1,000 N/A
LINCOLY MEMORIAL UNIVERSITY-DIRECTOR OF S	POUSE SALARY	N/A
MAJOR GIFTS AND CONTRIBUTIONS		

SCHEDULE D - LIABILITIES

Name: JOHN J. DU
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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 if 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 owned 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 *Column K is for liabilities held solely by your spouse or dependent child.

				DC, JT SP,		***
		Ni	Example			_
		NONE	First Bank of Wilmington, DE	Creditor		
			5/98	Date Liability Incurred MO/YR		
			Mortgage on Rental Property, Dover, DE	Type of Liability		
				\$10,001- \$15,000	>	
				\$15,001- \$50,000	w	
				\$50,001- \$100,000	C	
			×	\$100,001- \$250,000	,	
				\$250,001- \$500,000	т	Amount of Liability
				\$500,001- \$1,000,000	п	it of Li
				\$1,000,001- \$5,000,000	G	ability
				\$5,000,001- \$25,000,000	x	
				\$25,000,001- \$50,000,000	_	
				Over \$50,000,000	-	
				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 solely of an honorary nature.

		 		_	_
			NONE	Position	
				Name of Organization	The state of the s

SCHEDULE F - AGREEMENTS

Name: JOHN	
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Identify the da continuation o employer.	ate, parties to, and general terms of any agreement or arrangement that you have deferral of payments by a former or current employer other than the U.S. gover	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	Parties to Agreement	Terms of Agreement
	N/A	
	7' -	

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 Pla	Silver Platter (determination of personal friendship received from the Ethics Committee)	\$400
N/A		

SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

Name: JOHN J. DUNGA
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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 sponsor or were paid by you and reimbursed by the sponsor.

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.

ne ne.	 					
	Source	Date(s)	City of Departure-Destination-City of Return	Lodging? (Y/N)	Food? (Y/N)	Family Member Included? (Y/N)
	Government of China (MECEA)	Aug. 6-11	DC-Beiling, China-DC	Υ	۲	Z
Examples	Habilat for Humanily (charily fundraiser)	Mar. 3-4	DC-Boston-DC	*	, ~	Υ
\mathcal{N}	NONE					

SCHEDULE I ~ PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

Name: JOHN J. DUNCAN
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List the source, activity (<i>i.e.</i> , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitat confidential list of charities receiving such payments must be filed directly with the Committee on Ethics.	of an event to a charitable organization	ble organization in lieu of paying an honorarium to you. A separate	ium to you. A separate
Source	Activity	Date	Amount
Examples: Association of American Associations, Washington, DC	Speech	Feb, 2, 2016	\$2,000
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