

LEGISLATIVE RESOURCE CENTER

**HAND
DELIVERED**

~~18 APR 13 PM 4:16~~

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|--|--|---|
| <p>NAME:</p> <p>Rep. Diane L. Black</p> | <p>OFFICE TELEPHONE:</p> <p>202-225-4231</p> | <p>Please indicate whether this is an initial report or an amended report. For amendments, please provide the date of the report you are amending.</p> <p>Initial Report <input checked="" type="checkbox"/> Amended <input type="checkbox"/></p> <p>Date of Report being Amended: 4/19/2018 ML</p> |
| <p><input checked="" type="checkbox"/> Member of the U.S. House of Representatives</p> <p>State: Tennessee District: 6th</p> <p>File an original and 2 copies.</p> | <p><input type="checkbox"/> Officer or Employee</p> <p>Employing Office: _____</p> <p>File an original and 1 copy.</p> | <p>Did you purchase any shares that were allocated as a part of an Initial Public Offering?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> |

[illegible]

| FULL ASSET NAME | TYPE OF TRANS-ACTION | DATE OF TRANS-ACTION | DATE NOTIFIED OF TRANS-ACTION | AMOUNT OF TRANSACTION | | | | | | | | | | |
|-------------------------------------|---|----------------------|-------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---------------------------|--------------------------|--|
| | | | | A | B | C | D | E | F | G | H | I | J | |
| JT | PURCHASE SALE EXCHANGE | (MO/DAY/YR) | (MO/DAY/YR) | \$1,000-\$15,000 | \$15,001-\$50,000 | \$50,001-\$100,000 | \$100,001-\$250,000 | \$250,001-\$500,000 | \$500,001-\$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 | |
| SP ORACLE CORP | <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | 3/22/18 | 3/22/18 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| SP HENRY SCHEIN INC COM STK | <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | 3/26/18 | 3/26/18 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| SP KROGER CO COM STK | <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | 3/26/18 | 3/26/18 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| SP DALLAS TX INDEP SCH DIST REF | <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | 3/28/18 | 3/28/18 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| SP DENTSPLY SIRONA INC COM STK | <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | 3/29/18 | 3/29/18 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| SP NIELSEN HOLDINGS PLC FOREIGN STK | <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | 3/29/18 | 3/29/18 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

| FOOTNOTE NUMBER | FILER NOTES (optional) |
|-----------------|------------------------|
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