

HAND DELIVERED
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Please indicate whether this is an initial report or an amended report. For
 amendments, please provide the date of the report you are amending.
 Initial Report ☒ HOUSE OF REPRESENTATIVES
 Amended ☐ AMENDED
 Date of Report being Amended: _____

Rep. Diane L. Black

202-225-4231

State: **Tennessee** District: **6th**

File an original and 2 copies.

Employing Office: _____

File an original and 1 copy.

Did you purchase any shares that were allocated as a part of an Initial Public Offering? ☐ YES ☒ NO

[illegible]

FULL ASSET NAME	TYPE OF TRANS-ACTION			DATE OF TRANS-ACTION	DATE NOTIFIED OF TRANS-ACTION	AMOUNT OF TRANSACTION									
	PURCHASE	SALE	EXCHANGE			(MO/DAY/YR)	(MO/DAY/YR)	A	B	C	D	E	F	G	H
JT	Provide full name, not ticker symbol.					\$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	EOG RESOURCES INC	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4/25/16	4/25/16	<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"/>
SP	UNILEVER N V-NY SHARES	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4/25/16	4/25/16	<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"/>
SP	ALPHABET INC CL C	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4/27/16	4/27/16	<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"/>
SP	MICROSOFT CORP	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4/27/16	4/27/16	<input type="checkbox"/>	<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"/>
SP	PROGRESSIVE CORP OHIO	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4/29/16	4/29/16	<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"/>	<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"/>	<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)