

UNITED STATES HOUSE OF REPRESENTATIVES

Periodic Transaction Report

SEP 22 2015.

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NAME: Jared S. Polis		OFFICE TELEPHONE: 202-225-2161		2015 SEP 30 AM 11:26 OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES	
<input checked="" type="checkbox"/> Member of the U.S. House of Representatives State: <u>Colorado</u> District: <u>2</u> File an original and 2 copies.		<input type="checkbox"/> Officer or Employee Employing Office: _____ File an original and 1 copy.		Please indicate whether this is an initial report or an amended report. For amendments, please provide the date of the report you are amending. <input checked="" type="checkbox"/> Initial Report <input type="checkbox"/> Amendment Date of Report being Amended: _____	
A \$200 penalty shall be assessed against anyone who files more than 30 days late.		Did you purchase any shares that were allocated as a part of an Initial Public Offering? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
(For Official Use Only)					

FULL ASSET NAME	TYPE OF TRANS-ACTION			DATE OF TRANS-ACTION	DATE NOTIFIED OF TRANS-ACTION	AMOUNT OF TRANSACTION									
	PURCHASE	SALE	EXCHANGE			A	B	C	D	E	F	G	H	I	J
JT SP DC 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
JT Example: Mega Corp. Common Stock	X			8/14/12	8/14/12		X								
Love Equity Fund I, LP - MLP Japan Recovery Fund IV, LP -															
Reit Shares - Nippon Healthcare Inv Corp	X			6/18/15	9/17/15	X									
Reit Shares - Nippon Healthcare Inv Corp	X			6/19/15	9/17/15	X									
Reit Shares - Nippon Healthcare Inv Corp	X			6/22/15	9/17/15	X									
Reit Shares - Nippon Healthcare Inv Corp	X			6/23/15	9/17/15	X									

(This page will be publicly disclosed.)

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JT SP DC	FULL ASSET NAME Provide full name, not ticker symbol.	TYPE OF TRANS-ACTION			DATE OF TRANS-ACTION (MM/DD/YY)	DATE NOTIFIED OF TRANS-ACTION (MM/DD/YY)	AMOUNT OF TRANSACTION										
		PURCHASE	SALE	EXCHANGE													
	Reti Shares - Nippon Healthcare Inv Corp		X		6/24/15	9/17/15	X										
	Reti Shares - Nippon Healthcare Inv Corp		X		6/25/15	9/17/15	X										
	Reti Shares - Nippon Healthcare Inv Corp		X		6/26/15	9/17/15	X										
	Reti Shares - Nippon Healthcare Inv Corp		X		6/29/15	9/17/15	X										
	Reti Shares - Nippon Healthcare Inv Corp		X		6/30/15	9/17/15	X										
	Reti Shares - Nippon Healthcare Inv Corp		X		7/1/15	9/17/15	X										

**FOOTNOTE
NUMBER**

FILER NOTES (optional)

(This page will be publicly disclosed.)

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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 SP DC	PURCHASE SALE EXCHANGE	(MM/DD/YY)	(MM/DD/YY)	\$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	
Provide full name, not ticker symbol.														
Reit Shares - Nippon Healthcare Inv Corp	X	7/24/15	9/17/15	X										
Reit Shares - Nippon Healthcare Inv Corp	X	7/31/15	9/17/15	X										
Reit Shares - Nippon Healthcare Inv Corp	X	7/6/15	9/17/15	X										
Reit Shares - Nippon Healthcare Inv Corp	X	7/7/15	9/17/15	X										
Reit Shares - Nippon Healthcare Inv Corp	X	7/8/15	9/17/15	X										

FOOTNOTE NUMBER

FILER NOTES (optional)