

Periodic Transaction Report

4S	dS	SP	SP	SP	JT	'n			State:	NAME:	
DENTSPLY SIRONA INC COM STK	DENTSPLY SIRONA INC COM STK	DOLLAR GENERAL CORP COM STK	COPART INC COM STK	VIRGINIA ST CLG BLDG AUTH EDUCTNL FA	Example: Mega Corp. Common Stock	Provide full name, not ticker symbol.	FULL ASSET NAME		Member of the U.S. House of Representatives Tennessee District: 6th Emp	iane L. Black	
				o, F,					Office:	OFFICE TELE 202-225-4231	_
<u> </u>		X	X	X		PURCHASE	TYPE OF TRANS-ACTION	i	fficer or ffice:	TELE 4231	4
					×	SALE EXCHANGE	ION ION		Officer or Employee Office: File an original	OFFICE TELEPHONE: 202-225-4231	1
11/26/18	11/20/18	12/6/18	12/6/18	12/4/18	8/14/12	(MO/DA/YR)	DATE OF TRANS- ACTION		r or Employee	iii	alloaction
11/26/18	11/20/18	12/6/18	12/6/18	12/4/18	8/14/12	(MO/DAYR)	DATE NOTIFIED OF TRANS- ACTION	į			reliquic Hallsaction Report
X	\boxtimes	\boxtimes	X			\$1,000- \$15,000			Did yo Initial	Plea	
				\boxtimes	×	\$15,001- \$50,000			Did you purchase any shares that were allocated as a part of an Initial Public Offering? YES NO	Please indicate whether this is an initial report or an amendments, please provide the date of the port of Figure 1 to 1 t	
M control bland-braiders						\$50,001- \$100,000	AM		ນu purchase any : Public Offering?	indicate whether this is an inments, please provide the 🙀	
						\$100,001- \$250,000	TNUO		shares (ther this is a provide the provide the Initial Report	
						\$250,001- \$500,000	야 T		hat wer	an initial ectago	<u></u>
						\$500,001- \$1,000,000	RANS,		e allocat	2016 UEC tial report or an a septimental s	25.
					,	\$1,000,001- \$5,000,000	AMOUNT OF TRANSACTION		ted as a pa	2018 UEC Butter RESOURCE GENTER ital report or an amendad people for experiment of B section of REPORT SERVATIVE.	
						\$5,000,001- \$25,000,000			part of a	TIVE RESOURCE CENTE C A amended pool. For an amending 8 or FREPRESENTATIVE; Idment RESENTATIVE;	
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						Over \$50,000,000					



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					KROGER CO COM STK	DENTSPLY SIRONA INC COM STK	DENTSPLY SIRONA INC COM STK	
					X	X	X	F
FILER					12/10/18	11/29/18	11/28/18	
FILER NOTES (optional)					12/10/18	11/29/18	11/28/18	
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	FOOTNOTE NUMBER				KROGER CO COM STK	DENTSPLY SIRONA INC COM STK	DENTSPLY SIRONA INC COM STK	Provide full name, not ticker symbol.	FULL ASSET NAME
					X	X	X	PURCHASE SALE EXCHANGE	TYPE OF TRANS-ACTION
	FILER				12/10/18	11/29/18	11/28/18	(MO/DA/YR)	DATE OF TRANS- ACTION
	FILER NOTES (optional)				12/10/18	11/29/18	11/28/18	(MO/DA/YR)	DATE NOTIFIED OF TRANS- ACTION
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								\$1,000,001- \$5,000,000	AMOUNT OF TRANSACTION
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