

UNITED STATES HOUSE OF REPRESENTATIVES

2019 FINANCIAL DISCLOSURE STATEMENT

Form A
For Use by Members, Officers, and Employees

20 AUG 10 (M:10:37 Only)

*MC*Name: Douglas L. Lamborn Daytime Telephone: 202-225-4422

A \$200 penalty shall be assessed against any individual who files more than 30 days late.

FILER STATUS	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: <u>CO</u>	Officer or Employee	Staff Filer Type: (If Applicable) <input type="checkbox"/> Shared <input checked="" type="checkbox"/> Principal Assistant
REPORT TYPE	<input checked="" type="checkbox"/> 2019 Annual (Due: May 15, 2020)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Date of Termination:

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

- A. Did you, your spouse, or your dependent child:
- Owning any reportable asset that was worth more than \$1,000 at the end of the reporting period? Yes No
 - Receive more than \$200 in unearned income from any reportable asset during the reporting period?
- 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?
- 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?
- D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?
- E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?
- 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?
- G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$390 in value from a single source during the reporting period?
- H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$390 in value from a single source during the reporting period?
- 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?
- J. Did you receive any compensation for services provided to a charitable organization during the reporting period?

ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"

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

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.

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?

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

Yes No

Yes No

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: Douglas L. Lamborn

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SCHEDULE A – ASSETS & "UNEARNED INCOME"

Name: Douglas L. Lamborn

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BLOCK A Assets and/or Income Sources		BLOCK B Value of Asset												BLOCK C Type of Income		BLOCK D Amount of Income				BLOCK E Transaction						
ASSET NAME	IF	A	B	C	D	E	F	G	H	I	J	K	L	M	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII
SP NetApp Inc. Stock														None												
SP MetApp Inc. options -														\$1-\$1,000												
SP 3 Jan. 11 calls @ 59.5														\$1,001-\$15,000												
SP 3 Jan. 25 calls @ 63														\$15,001-\$50,000												
SP 3 Feb 1 calls @ 63														\$50,001-\$100,000												
SP 3 Feb 8 calls @ 67														\$100,001-\$250,000												
SP 3 Feb 15 calls @ 67														\$250,001-\$500,000												
SP 3 Mar. 8 calls @ 66.5														\$500,001-\$1,000,000												
SP 3 Mar. 22 calls @ 66														\$1,000,001-\$5,000,000												
SP 3 May 29 calls @ 66.5														\$5,000,001-\$25,000,000												
SP 3 Apr. 12 calls @ 70														\$25,000,001-\$50,000,000												
SP 3 Apr. 26 calls @ 72.5														Over \$50,000,000												
SP 3 May 24 calls @ 71														Spouse/DC Asset over \$1,000,000*												
SP 3 June 21 calls @ 62														NONE												
SP 3 June 28 calls @ 62														DIVIDENDS												
SP 3 July 12 calls @ 60.5														RENT												
														INTEREST												
														CAPITAL GAINS												
														EXCEPTED/BUND TRUST												
														TAX-DEFERRED												
														Other Type of Income (Specify: e.g., Partnership Income or Farm Income)												
														None												
														\$1-\$200												
														\$201-\$1,000												
														\$1,001-\$2,500												
														\$2,501-\$5,000												
														\$5,001-\$15,000												
														\$15,001-\$50,000												
														\$50,001-\$100,000												
														\$100,001-\$1,000,000												
														\$1,000,001-\$5,000,000												
														Over \$5,000,000												
														Spouse/DC Asset with Income over \$1,000,000*												
														P.S. Sipath, or E												

SCHEDULE A – ASSETS & “UNEARNED INCOME”

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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Use additional sheets if more space is required.

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Douglas L. Lamborn

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BLOCK A Assets and/or Income Sources		BLOCK B Value of Asset												BLOCK C Type of Income		BLOCK D Amount of Income												BLOCK E Transaction																
SC. # D.	ASSET NAME REF	A	B	C	D	E	F	G	H	I	J	K	L	M	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	P	S	I	Part	or	E													
		None																																										
		\$1-\$1,000																																										
		\$1,001-\$15,000																																										
		\$15,001-\$50,000																																										
		\$50,001-\$100,000																																										
		\$100,001-\$250,000																																										
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		\$25,000,001-\$50,000,000																																										
		Over \$50,000,000																																										
		Spouse/DC Asset over \$1,000,000*																																										
		NONE																																										
		DIVIDENDS																																										
		RENT																																										
		INTEREST																																										
		CAPITAL GAINS																																										
		EXCEPTED/BLIND TRUST																																										
		TAX-DEFERRED																																										
		Other Type of Income (Specify e.g., Partnership Income or Farm Income)																																										
		None																																										
		\$1-\$200																																										
		\$201-\$1,000																																										
		\$1,001-\$2,500																																										
		\$2,501-\$5,000																																										
		\$5,001-\$15,000																																										
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		Over \$5,000,000																																										
		Spouse/DC Asset with Income over \$1,000,000*																																										
		P S I P a r t h o r E																																										

Use additional sheets if more space is required.

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Douglas L. Lamborn

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Use additional sheets if more space is required.

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Douglas L. Lamborn

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BLOCK A Assets and/or Income Sources		BLOCK B Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
SP. ID.	ASSET NAME				
SP 2 J July 19 call 60.5	X X X X X X X X	None			
SP 2 Sept 13 calls 49		\$1-\$5,000			
SP 2 Sept 20 calls 57		\$1,001-\$15,000			
SP 2 Nov call 56		\$15,001-\$50,000			
SP 2 Nov calls 58	X X X X X X X X	\$50,001-\$100,000			
SP 1 Nov 15 call 60		\$100,001-\$250,000			
SP 2 Dec 13 calls 61.5	X X X X X X X X	\$250,001-\$500,000			
SP 2 Dec 20 call 62		\$500,001-\$1,000,000			
SP 2 Dec 20 call 63.5		\$1,000,001-\$5,000,000			
		\$5,000,001-\$25,000,000			
		\$25,000,001-\$50,000,000			
		Over \$50,000,000			
		Spouse/DC Asset over \$1,000,000*			
		NONE			
		DIVIDENDS			
		RENT			
		INTEREST			
		CAPITAL GAINS			
		EXCEPTED/BLIND TRUST			
		TAX-DEFERRED			
		Other Type of Income (Specify e.g., Partnership Income or Farm Income)			
		None			
		\$1-\$200			
		\$201-\$1,000			
		\$1,001-\$2,500			
		\$2,501-\$5,000			
		\$5,001-\$15,000			
		\$15,001-\$50,000			
		\$50,001-\$100,000			
		\$100,001-\$1,000,000			
		\$1,000,001-\$5,000,000			
		Over \$5,000,000			
		Spouse/DC Asset with Income over \$1,000,000*			
		P.S. Statement of E			

SCHEDULE B – TRANSACTIONS

Name: Douglas L Lamborn

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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 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. Exchange 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.

Capital gains. If a states transaction resulting 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.

SCHEDULE B – TRANSACTIONS

Name: Douglas L. Lamborn

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Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the reporting period or any security or real property held by you, your spouse, or your 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 purchases 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.

Capital Gains: If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gain" 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.

SP, DC, PI	Example	Asset	Type of Transaction		Date	Amount of Transaction
			Purchase	Sale		
SP	NetApp, Inc. Stock	X	X	X	11/11/19	\$1,001-\$15,000
SP		X	X	X	11/11/19	\$15,001-\$50,000
SP		X	X	X	11/11/19	\$50,001-\$100,000
SP		X	X	X	11/11/19	\$100,001-\$250,000
SP		X	X	X	11/11/19	\$250,001-\$500,000
SP		X	X	X	11/11/19	\$500,001-\$1,000,000
SP		X	X	X	11/11/19	\$1,000,001-\$5,000,000
SP		X	X	X	12/16/19	\$5,000,001-\$25,000,000
		X	X	X	12/16/19	\$25,000,001-\$50,000,000
		X	X	X	12/16/19	Over \$50,000,000
		X	X	X	12/16/19	Over \$1,000,000* (Spouse/DC Asset)

Use additional sheets if more space is required.

SCHEDULE B – TRANSACTIONS

Name: Douglas L. Lamborn

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Report any purchase, sale, or exchange transactions that exceeded \$1,000 in your dependent child for investment or real property held by your spouse or your dependents in a capital gain. Provide a brief description of an exchange transaction. Exchange 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 or sale of an asset is sold, please choose "partial sale" as the type of transaction.

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 grants solely held by W.M.F.*

SP. DC. #

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SCHEDULE B – TRANSACTIONS

Name: Douglas L. Lemboon | Page 13 of 17

Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the reporting period of my equity or real property held by you, your spouse, or your 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.

Capital Gains: If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gain" 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.

SP, DC, JT	Example	Mktg Corp. Stock	Type of Transaction		Purchase	Sale	Partial Sale	Exchange	Check Box if Capital Gain Exceeded \$200	Date	Amount of Transaction								
			A	B							C	D	E	F	G	H	I	J	K
SP	Net App. Trac.	Stock	X	X	X	X	X	X	X	1/17/19	\$1,001-\$15,000								
SP										1/17/19	\$15,001-\$50,000								
SP										1/14/19	\$50,001-\$100,000								
SP										1/18/19	\$100,001-\$250,000								
SP										1/28/19	\$250,001-\$500,000								
SP										1/29/19	\$500,001-\$1,000,000								
SP										2/4/19	\$1,000,001-\$5,000,000								
SP										2/4/19	\$5,000,001-\$25,000,000								
SP										3/25/19	\$25,000,001-\$50,000,000								
SP										4/1/19	Over \$50,000,000								
SP										4/2/19	Over \$1,000,000* (Spouse/DC Asset)								
SP										4/15/19									
SP										5/8/19									
SP										7/15/19									
SP										7/16/19									
SP										9/16/19									
SP																			

Use additional sheets if more space is required.

SCHEDULE B – TRANSACTIONS

Name: Douglas L Lamborn

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Report any purchases, 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 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.

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.

SP, DC, RT	Example	Asset	Type of Transaction		Check Box if Capital Gain Exceeded \$200	Date (MONTH/Year or Quarterly, Monthly, or Weekly, if applicable)	Amount of Transaction									
			Purchase	Sale			A	B	C	D	E	F	G	H	I	J
SP	Mega Corp. Stock	SP Net App, Inc. stock	X	X		11/4/19		\$1,001-\$15,000								
SP		SP	X	X		11/4/19		\$15,001-\$50,000								
SP		SP	X	X		11/4/19		\$50,001-\$100,000								
SP		SP	X	X		11/4/19		\$100,001-\$250,000								
SP		SP	X	X		11/4/19		\$250,001-\$500,000								
SP		SP	X	X		11/4/19		\$500,001-\$1,000,000								
SP		SP	X	X		11/4/19		\$1,000,001-\$5,000,000								
SP		SP	X	X		11/4/19		\$5,000,001-\$25,000,000								
SP		SP	X	X		11/4/19		\$25,000,001-\$50,000,000								
SP		SP	X	X		11/4/19		Over \$50,000,000								
			X	X		12/16/19	XXXXXX	Over \$1,000,000* (Spouse/DC Asset)								

Use additional sheets if more space is required.

SCHEDULE D – LIABILITIES

Name: Douglas Lamborn

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Report liabilities of over \$10,000 owed to any one creditor at any time 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 it 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 owed 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 \$10,000.** **Column K is for liabilities held solely by your spouse or dependent child.**

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.

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.

Use additional sheets if more space is required.

SCHEDULE H – TRAVEL PAYMENTS and REIMBURSEMENTS

Name: Douglas L. Lemborg

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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 \$300 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.

Source	Date(s)	City of Departure-Destination-City of Return	Length? (Y/N)	Food? (Y/N)	Family Member Included? (Y/N)
Government of China (MECEA) Habitat for Humanity (charity foundation)	Aug 6-11 Nov. 3-4	DC-Beijing, China-DC DC-Boston-DC	Y Y	Y Y	N Y
The German Marshall Fund of the United States	Feb. 18-24	Denver-Berlin - Dresden - D.C.	Y	Y	Y
International Conservation Caucus Foundation	Mar. 15-22	D.C. - Nairobi - Denver	Y	Y	Y
Aspen Institute	May 27 - June 3	Denver - Prague - D.C.	Y	Y	Y

Use additional sheets if more space is required.