PERSON	AL FINANCIAL STATEMENT		FORM PFS
		C	OVER SHEET PAGE 1
Eilod i	n accordance with chapter 572 of the Government Code.	TOTAL NUMBER OF PAG	
	ired in 2014, covering calendar year ending December 31, 2014.	ACCOUNT #	•
Use FOF	RM PFS-INSTRUCTION GUIDE when completing this form.	ACCOUNT #	
1 NAME	TITLE: FIRST: MI	OFFICE	USEONLY
	Kathryne B.	Date Received	A)
	NICKNAME; LAST; SUFFIX		AUSTIN RE
	Tovo		IN CI RECE
2 ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		TIN CITY CL RECEIVED PR 30 PM
			PM
		Receipt #	I DER
		HD / PM	Amounts
	(CHECK IF FILER'S HOME ADDRESS)		Hillough
3 TELEPHONE NUMBER	AREA CODE PHONE NUMBER; EXTENSION	Date Processed	
NOWBER	(512) 565-5361	Date Imaged	
4 REASON			
FOR FILING STATEMENT	CANDIDATE		
	■ ELECTED OFFICER Austin City Council, District 9		(INDICATE OFFICE)
	☐ APPOINTED OFFICER		(INDICATE AGENCY)
	☐ EXECUTIVE HEAD		(INDICATE AGENCY)
	☐ FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT		
	☐ STATE PARTY CHAIR		(INDICATE PARTY)
	☐ OTHER		(INDICATE POSITION)
·			,
5 Family members wit	nose financial activity you are reporting (see instructions).	· · · ·	
			•
SPOUSE	Tom Hamilton Hurt		
DEPENDENT C			
	Lori QiuLi Tovo-Hurt		
	3		
In Parts 1 through	18, you will disclose your financial activity during the preceding calendar	year. In Parts 1 th	rough 14, you are
required to disclose	not only your own financial activity, but also that of your spouse or a depende	ent child (see instruc	ctions).
·	COPY AND ATTACH ADDITIONAL PAGES AS N	ECESSARY	

Austin, Texas 78711-2070

PERSONAL FINANCIAL STATEMENT

P.O. Box 12070

COVER SHEET PAGE 2

(TDD 1-800-735-2989)

On this page, indicate any Parts of Form PFS that are not applicable to you. If you do not place a check in a box, then pages for that Part must be included in the report. If you place a check in a box, do NOT include pages for that Part in the report.

6	PARTS NOT APPLICABLE TO FILER
	□ N/A Part 1A - Sources of Occupational Income
	N/A Part 1B - Retainers
	N/A Part 2 - Stock
	□ N/A Part 3 - Bonds, Notes & Other Commercial Paper
	□ N/A Part 4 - Mutual Funds
	□ N/A Part 5 - Income from Interest, Dividends, Royalties & Rents
	□ N/A Part 6 - Personal Notes and Lease Agreements
	□ N/A Part 7A - Interests in Real Property
	□ N/A Part 7B - Interests in Business Entities
	X N/A Part 8 - Gifts
	□ N/A Part 9 - Trust Income
	XI N/A Part 10A - Blind Trusts
	X N/A Part 10B - Trustee Statement
	□ N/A Part 11A - Assets of Business Associations
	□ N/A Part 11B - Liabilities of Business Associations
	□ N/A Part 12 - Boards and Executive Positions
	N/A Part 13 - Expenses Accepted Under Honorarium Exception
	N/A Part 14 - Interest in Business in Common with Lobbyist
	N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
	N/A Part 16 - Representation by Legislator Before State Agency
	N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
	X N/A Part 18 - Legislative Continuances

SOURCES OF OCCUPATIONAL INCOME

P.O. Box 12070

PART 1A

If the requested information is not a page in the report.	applicable, indica	ate that on Page 2 of the	e Cover Sheet, and do NOT include this		
When reporting information about providing the number under which			the child about whom you are reporting by		
1 INFORMATION RELATES TO	FILER	SPOUSE	DEPENDENT CHILD		
² EMPLOYMENT	NAME AND ADDRESS OF EMPLOYER / POSITION HELD (Check If Filer's Home Address)				
EMPLOYED BY ANOTHER	30	y of Austin, Austi 1 W. 2nd Street stin, Tx 78701	n City Hall		
SELF-EMPLOYED	Aust	NATURE O	DE OCCUPATION Lember, District 9		
INFORMATION RELATES TO	FILER	SPOUSE	DEPENDENT CHILD		
EMPLOYMENT	NAME AND ADDRESS OF EMPLOYER / POSITION HELD (Check If Filer's Home Address)				
EMPLOYED BY ANOTHER	(form 409 \	Hurt Architecture erly Hurt Partner N. 14th Street n, Texas 78701	e, Inc. rs Architects, Inc.)		
SELF-EMPLOYED	Arc	hitect (Texas Rec	gistration)		
INFORMATION RELATES TO	☐ FILER	₩ SPOUSE	DEPENDENT CHILD		
EMPLOYMENT			OF EMPLOYER / POSITION HELD Filer's Home Address)		
X EMPLOYED BY ANOTHER	409	t Asset Managen W. 14th Street stin, Tx 78701	nent LLC		
SELF-EMPLOYED	ND ATTACH A	NATURE DDITIONAL PAGES	OF OCCUPATION AS NECESSARY		
OUF I A	AD ALIAUN M	DUILLOUAL LAGES !	TO MEDICONII		

STOCK PART 2

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this** page in the report.

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS-INSTRUCTION GUIDE.

¹ BUSINESS ENTIT	Υ	Manulife	Financial Co	ME	
² STOCK HELD OR ACQUIRED BY		FILER	X SPOUSE	DEPENDENT CHIL	D
3 NUMBER OF SHA	ARES	X LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MORE	☐ 10,000 OR MORE	
4 IF SOLD	☐ NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
	☐ NET LOSS				
BUSINESS ENTIT	Υ	News Cor		ME	
STOCK HELD OR	ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHA	ARES	LESS THAN 100	X 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
		☐ 5,000 TO 9,999	10,000 OR MOR	Ē	
IF SOLD	☐ NET GAIN	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
	☐ NET LOSS				
BUSINESS ENTIT	Ŷ	Introgen	NA NA	ME	
STOCK HELD OR ACQUIRED BY		X FILER	SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHARES		LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E	
IF SOLD	☐ NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE
	☐ NET LOSS				
BUSINESS ENTIT	TY	Elements Ro	nents Roger Energy Trust (Merrill Lynch)		
STOCK HELD OR	ACQUIRED BY	FILER	▼ SPOUSE	DEPENDENT CHIL	_D
NUMBER OF SHA	ARES	LESS THAN 100	X 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
		☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E	
IF SOLD	NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE
	☐ NET LOSS	~			
BUSINESS ENTITY			N/	AME	
STOCK HELD OR	ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
NUMBER OF SHA	ARES	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
	•	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE	
IF SOLD	NET GAIN	LESS THAN \$5,000	\$5,000—\$9,999	\$10,000-\$24,999	\$25,000OR MORE
	☐ NET LOSS		<u> </u>		<u> </u>
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

BONDS, NOTES & OTHER COMMERCIAL PAPER

P.O. Box 12070

PART 3

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

List all bonds, notes, and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS-INSTRUCTION GUIDE.

DESCRIPTION OF INSTRUMENT	CD, University Federal Credit Union Early Saver Certificate			
HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☑ DEPENDENT CHILD			
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000—\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE			
DESCRIPTION OF INSTRUMENT	CD, University Federal Credit Union Tiered Rate Saving Certificate			
HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☑ DEPENDENT CHILD 2			
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000—\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE			
DESCRIPTION OF INSTRUMENT	3			
HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD			
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE			
COPY A	ND ATTACH ADDITIONAL PAGES AS NECESSARY			

MUTUAL FUNDS

P.O. Box 12070

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this** page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS—INSTRUCTION GUIDE.

providing the number under which the	Critica is iisted on the CC				
1 MUTUAL FUND	ETFS Silver Trust (Merrill Lynch) (SOLD)				
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	K SPOUSE	DEPENDENT CHIL	.D	
3 NUMBER OF SHARES OF MUTUAL FUND	X LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999	
OF MOTOALT OND	☐ 5,000 TO 9,999	10,000 OR MOR	E		
4 IF SOLD NET GAIN NET LOSS	★ LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	\$25,000-OR MORE	
MUTUAL FUND		NA NA	ME		
MOTUAL FUND	First Eagle Global Class I Mutual Fund (Merrill Lynch)				
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	₩ SPOUSE	DEPENDENT CHI	LD	
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999	
OF MOTOAL FUND	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E .		
IF SOLD NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	☐ \$25,000-OR MORE	
MUTUAL FUND			ME		
	Guggenheim	Bulletshares (N	derrill Lynch)		
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHI	LD	
NUMBER OF SHARES	LESS THAN 100	X 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999	
OF MUTUAL FUND	☐ 5,000 TO 9,999	☐ 10,000 OR MOF	RE		
IF SOLD	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000 —\$24 ,999	\$25,000OR MORE	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

MUTUAL FUNDS

PART 4

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

P.O. Box 12070

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 MUTUAL FUND	Market Vectors Rare Earth (Merrill Lynch) (SOLD)				
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHIL	D	
3 NUMBER OF SHARES OF MUTUAL FUND	X☐ LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999	
	☐ 5,000 TO 9,999	10,000 OR MOR	Æ .		
4 IF SOLD X NET GAIN	X☐ LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE	
MUTUAL FUND	Nuveen Energy MLP Total Return Fund (Merrill Lynch)			Lynch)	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	▼ SPOUSE	DEPENDENT CHIL	LD	
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999	
	☐ 5,000 TO 9,999	10,000 OR MOR	E		
IF SOLD ☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE	
MUTUAL FUND			ME		
	Pimco Emerging (SOLD)	Market Local I	Bond Fund (Merr	rill Lynch)	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHIL	LD	
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	▼ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999	
	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE .		
IF SOLD ✓ NET GAIN ☐ NET LOSS	* LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

MUTUAL FUNDS

P.O. Box 12070

PART 4

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS-INSTRUCTION GUIDE.

providing the number ander which the		313, 31,331		•	
1 MUTUAL FUND	Templeton Global Bond Fund (Merrill Lynch)				
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHI	LD	
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	X 1,000 TO 4,999	
	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	IE .		
4 IF SOLD	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000-OR MORE	
RALITI I AL CUINO	T	NA NA	ME .		
MUTUAL FUND	Wisdomtree Equ				
	Wisdomtree Equity Income Fund (Merrill Lynch)				
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☐ FILER	X ☐ SPOUSE	DEPENDENT CHI	LD	
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	K 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999	
OF MOTOALT SND	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE .		
IF SOLD NET GAIN	LESS THAN \$5,000	₭ \$5,000\$9,999	\$10,000-\$24,999	☐ \$25,000-OR MORE	
☐ NET LOSS		<u>.</u>			
MUTUAL FUND		NA NA	MÊ		
	Blackrock Strat	egic Muni Bond	l Fund (Merrill Ly	rnch)	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	K SPOUSE	DEPENDENT CHI	LD	
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1 ,000 TO 4,999	
OF MOTOAL FOND	☐ 5,000 TO 9,999	10,000 OR MOF	RE		
IF SOLD	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000 -\$24,999	\$25,000OR MORE	
COS	COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

MUTUAL FUNDS

PART 4

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this** page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS—INSTRUCTION GUIDE.

1 MUTUAL FUND	NAME				
	Market Vector Jr Gold (Merrill Lynch) (SOLD)				
² SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CH	LD	
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999	
	☐ 5,000 TO 9,999	10,000 OR MOR	. <u></u>		
4 IF SOLD K NET GAIN	X LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000-OR MORE	
MUTUAL FUND		NA	ME		
,	Deutsche Floa	ting Rate Bond	Fund (Merrill Ly	nch)	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	K spouse	DEPENDENT CH	LD	
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	ৄ 1,000 TO 4,999	
or more restaura	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E		
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	☐ \$25,000–OR MORE	
MUTUAL FUND		NA NA	ME		
	Kayne Anderson	MLP Fund (Me	errill Lynch)		
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHI		
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	★ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999	
	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E		
IF SOLD ☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000 \$24,999	\$25,000-OR MORE	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

MUTUAL FUNDS

P.O. Box 12070

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS-INSTRUCTION GUIDE.

providing the number under which the	crina is listed on the Co	over oneer.		
1 MUTUAL FUND	American Century One Choice Portfolio: Moderate, City of Austin Deferred Compensation Plan Investment			
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	0
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	⅓ 1,000 TO 4,999
	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	RE	
4 IF SOLD	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	☐ \$25,000-OR MORE
MUTUAL FUND	Emerging Eco	nomies Fund (\	^{ME} ∕alic 403B)	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	∡ 1,000 TO 4,999
OF MOTOAL FOND	☐ 5,000 TO 9,999	☐ 10,000 OR MORE		
IF SOLD	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	\$25,000-OR MORE
MUTUAL FUND		NA NA	ME	····
	Global Social	Awareness Fu	ınd (Valic 403B)	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	K FILER	SPOUSE	DEPENDENT CHI	LD
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	_x 1,000 TO 4,999
OI MOTORET OND	☐ 5,000 TO 9,999	☐ 10,000 OR MOF	RE	
IF SOLD NET GAIN	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000\$24,999	\$25,000-OR MORE
☐ NET LOSS				
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

MUTUAL FUNDS

P.O. Box 12070

PART 4

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS-INSTRUCTION GUIDE.

providing the number under which the child is listed on the Cover Sheet.					
1 MUTUAL FUND	Global Strategy Fund (Valic 403B)				
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.D	
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999	
OF MOTORET SIND	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E		
4 IF SOLD	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE	
MUTUAL FUND	Mid Cap Index Fund (Valic 403B)				
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	_D	
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	X 1,000 TO 4,999	
OF MICTORE FORD	□ 5,000 TO 9,999	☐ 10,000 OR MOR	E		
IF SOLD	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	□ \$25,000OR MORE	
MUTUAL FUND		NA	ME		
:	Small Cap Ind	dex Fund (Vali	c 403B)		
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	K FILER	SPOUSE	DEPENDENT CHIL	_D	
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	⅓ 1,000 TO 4,999	
OF MOTORET GIAD	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E		
IF SOLD	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

Texas Ethics Commission

PART 4

MUTUAL FUNDS

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

Austin, Texas 78711-2070

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS-INSTRUCTION GUIDE.

providing the number under which the	Cima is listed on the CC	Aei Olicer		
1 MUTUAL FUND	Stock Index Fund (Valic 403B)			
² SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.D
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	500 TO 999	▼ 1,000 TO 4,999
4 IF SOLD	LESS THAN \$5,000	\$5,000-\$9,999		\$25,000OR MORE
MUTUAL FUND	Vanguard Long - Valic Employer S		Bonds invest	ed through (403B), Pension Pla
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999	⅓ 1,000 TO 4,999
IF SOLD	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000~\$24,999	\$25,000-OR MORE
MUTUAL FUND	Texas Saver Er Wells Fargo Do			d (401K Texasaver
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	_D
NUMBER OF SHARES OF MUTUAL FUND	X LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499	□ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD ☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000 \$ 24,999	\$25,000OR MORE
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

MUTUAL FUNDS

P.O. Box 12070

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS-INSTRUCTION GUIDE.

Francisco de la constantina della constantina de					
1 MUTUAL FUND	Mainstay VP Bond (New York Life Variable Annuity) (SOLD)				
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☐ FILER SPOUSE ☐ DEPENDENT CHILD				
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999	
or motorical and	☐ 5,000 TO 9,999 ☐ 10,000 OR MORE				
4 IF SOLD ☑ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	S25,000OR MORE	
MUTUAL FUND	Mainstay VP GOV'T (New York Life Variable Annuity) (SOLD)			nnuity)	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER		DEPENDENT CHI	LD	
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499	☐ 500 TO 999	1,000 TO 4,999	
Of WOTONET OND	☐ 5,000 TO 9,999	☐ 10,000 OR MOR	E		
IF SOLD	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	\$25,000-OR MORE	
MUTUAL FUND		NA.	ME		
WOTONETONE	Mainstay VF (SOLD)	Convert Fund	(New York Life)	ı.	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHII	LD	
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999	
OF MOTORET OND	☐ 5,000 TO 9,999 ☐ 10,000 OR MORE				
IF SOLD KINET GAIN	€ LESS THAN \$5,000	\$5,000-\$9,999	S10,000-\$24,999	☐ \$25,000-OR MORE	
☐ NET LOSS			·		
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

P.O. Box 12070

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS-INSTRUCTION GUIDE.

providing the number under which the child is listed on the Cover Sheet.					
1 MUTUAL FUND	VP Large Cap Growth (New York Life) (SOLD)				
² SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☐ FILER				
3 NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100		☐ 1,000 TO 4,999		
4 IF SOLD X NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	☐ \$25,000OR MORE	
MUTUAL FUND	Mainstay VP Hi		ME (New York Life V	/ariable Annuity)	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☐ FILER				
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100		□ 500 TO 999	1,000 TO 4,999	
IF SOLD ▼ NET GAIN □ NET LOSS	LESS THAN \$5,000	x \$5,000\$9,999	\$10,000 —\$24,999	☐ \$25,000-OR MORE	
MUTUAL FUND	Fidelity Contraft		Life)		
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHI	LD	
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499	□ 500 TO 999	☐ 1,000 TO 4,999	
IF SOLD	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	\$25,000OR MORE	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

MUTUAL FUNDS

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 MUTUAL FUND	ICAP Select Equity (New York Life) (SOLD)			
² SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHIL	_D
3 NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100 ☐ 5,000 TO 9,999	★ 100 TO 499☐ 10,000 OR MOR	☐ 500 TO 999	1,000 TO 4,999
4 IF SOLD NET GAIN NET LOSS	※ LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE
MUTUAL FUND	VP T. Rowe Price Equity (SOLD)			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X ☐ SPOUSE	DEPENDENT CHIL	LD
NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100	100 TO 499	□ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD NET GAIN □ NET LOSS	ESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	\$25,000OR MORE
MUTUAL FUND	[THIS SPACE N		ME	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☐ FILER	SPOUSE	DEPENDENT CHIL	LD
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	□ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD	LESS THAN \$5,000	\$5,000\$9,999	\$10,000-\$24,999	☐ \$25,000OR MORE
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

P.O. Box 12070

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS-INSTRUCTION GUIDE.

SOURCE OF INCOME	Manulife Fina	name and) ADDRESS	
² RECEIVED BY			DEPENDENT C	
3	FILER	★ SPOUSE		
AMOUNT	x \$500\$4,999	55,000—\$9,999	\$10,000\$24,999	\$25,000-OR MORE
SOURCE OF INCOME	Ratliff Riker LI PO Box 1427 Austin , Tx 78	0	O ADDRESS	
RECEIVED BY	∑ FILER	X SPOUSE	DEPENDENT C	HILD
AMOUNT	\$500\$4,999	\$5,000-\$9,999	\$10,000 \$24 ,999	▼ \$25,000OR MORE
SOURCE OF INCOME	Cumberland F PO Box 1427 Austin , Tx 78	ifth LLC Rental	income, single-fa	amily residence
RECEIVED BY	√ FILER	⊠ SPOUSE	☐ DEPENDENT C	HILD
AMOUNT	\$500-\$4,999	\$5,000~\$9,999	X \$10,000-\$24,999	\$25,000-OR MORE
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

P.O. Box 12070

(512) 463-5800

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 SOURCE OF INCOME	McCottage LLC PO Box 1427 Austin, Texas 7		DADDRESS	
² RECEIVED BY	FILER	SPOUSE	DEPENDENT CHILD	
3 AMOUNT	\$500\$4,999	\$5,000-\$9,999	☐ \$10,000-\$24,999 ☐ \$25,000-OR MORE	
	NAME AND ADDRESS			
SOURCE OF INCOME		-		
DECEMED BY				
RECEIVED BY	FILER	SPOUSE	DEPENDENT CHILD	
AMOUNT	\$500-\$4,999	\$5,000-\$9,999	☐ \$10,000-\$24,999 ☐ \$25,000-OR MORE	
		NAME ANI	DADDRESS	
SOURCE OF INCOME				
RECEIVED BY				
	☐ FILER	SPOUSE	DEPENDENT CHILD	
AMOUNT	\$500\$4,999	\$5,000-\$9,999	☐ \$10,000—\$24,999 ☐ \$25,000—OR MORE	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

PERSONAL NOTES AND LEASE AGREEMENTS

P.O. Box 12070

PART 6

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS-INSTRUCTION GUIDE.

providing the manual times.				
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Colonial Savings (Home loan - residence)			
² LIABILITY OF	⊠ FILER	SPOUSE	DEPENDENT CHILD	
3 GUARANTOR		·		
4 AMOUNT	\$1,000-\$4,999	\$5,000-\$9,999	\$10,000-\$24,999 \$25,000-OR MORE	
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	NDLM, LC. Trustee, A Texas Liability Company (for real estate purchase of 3109 Grandview Street)			
LIABILITY OF	X FILER	∑ SPOUSE	DEPENDENT CHILD	
GUARANTOR				
AMOUNT	51,000-\$4,999	\$5,000-\$9,999	☐ \$10,000-\$24,999 🔀 \$25,000OR MORE	
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT				
LIABILITY OF	FILER	SPOUSE	DEPENDENT CHILD	
GUARANTOR				
AMOUNT	\$1,000\$4,999	\$5,000-\$9,999	\$10,000\$24,999 \$25,000-OR MORE	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

INTERESTS IN REAL PROPERTY

P.O. Box 12070

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

promise and a second se			·	
1 HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD	
2 STREET ADDRESS NOTAVAILABLE CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 809 West 32nd Street, Austin, Texas 78705			
3 DESCRIPTION [X] LOTS ACRES	1 Lot, 7	NUMBER OF LOTS OR ACRES A	AND NAME OF COUNTY WHERE LOCATED	
A NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)	[/] Colonia	al Savings Bank		
F SOLD NET GAIN NET LOSS	☐ LESS THAI	N \$5,000	99	
HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD	
STREET ADDRESS NOTAVAILABLE CHECK IF FILER'S HOME ADDRESS	3109	STREET ADDRESS, INCLI Grandview Street	UDING CITY, COUNTY, AND STATE	
DESCRIPTION LOTS ACRES	1 Lot,	NUMBER OF LOTS OR ACRES A Travis County	IND NAME OF COUNTY WHERE LOCATED	
NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)	(Selle	,	exas Liability Company ner-financed loan through of property)	
IF SOLD NET GAIN NETLOSS	☐ LESS THA	N \$5,000 🔲 \$5,000\$9,99	99 🔲 \$10,000-\$24,999 🔲 \$25,000OR MORE	
COPY A	ND ATTACH A	DDITIONAL PAGES	AS NECESSARY	

INTERESTS IN BUSINESS ENTITIES

PART 7B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this** page in the report.

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

providing the number under which the child is listed on the Cover Sheet.					
1 HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD		
² DESCRIPTION	NAME AND ADDRESS (Check If Filer's Home Address)				
	McCottag PO Box 1	je LLC 427, Austin Tx 78767	,		
IF SOLD NET GAIN NET LOSS	LESS THAN	N \$5,000 □ \$5,000\$9,999	☐ \$10,000–\$24,999 ☐ \$25,000–OR MORE		
HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD		
DESCRIPTION	NAME AND ADDRESS (Check If Filer's Home Address)				
		and Fifth LLC 1427, Austin Tx 7876	7		
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN	N \$5,000 ☐ \$5,000-\$9,999	☐ \$10,000\$24,999 ☐ \$25,000-OR MORE		
HELD OR ACQUIRED BY	⊠ FILER	SPOUSE	DEPENDENT CHILD		
DESCRIPTION		_	D ADDRESS ler's Home Address)		
		urteenth LLC			
	409 Wes	st 14th Street, Austin	Ix 78701		
IF SOLD NET GAIN NET LOSS	☐ LESS THAN	N \$5,000	☐ \$10,000\$24,999 ☐ \$25,000OR MORE		
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

INTERESTS IN BUSINESS ENTITIES

P.O. Box 12070

PART 7B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

providing the right bot direct without	0 10 110100				
1 HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD)	
DESCRIPTION	NAME AND ADDRESS (Check If Filer's Home Address) Ratliff Riker LP PO Box 1427, Austin Tx 78767				
IF SOLD NET GAIN NET LOSS	LESS THAN	ı \$5,000 \$5,000 –\$9,999	☐ \$10,000—\$24,999 ☐	\$25,000OR MORE	
HELD OR ACQUIRED BY	FILER	X spouse	DEPENDENT CHILD	·	
DESCRIPTION				·	
IF SOLD NET GAIN NET LOSS	☐ LESS THAN	1 \$5,000 □ \$5,000–\$9,999	\$10,000-\$24,999 	\$25,000-OR MORE	
HELD OR ACQUIRED BY	FILER	X spouse	DEPENDENT CHILD)	
DESCRIPTION	****		D ADDRESS ler's Home Address)		
•	Pearl C PO Box	at LP x 1427, Austin Tx 787	67	÷	
IF SOLD NET GAIN NET LOSS	☐ LESS THAN	1 \$5,000 □ \$5,000\$9,999	\$10,000\$24,999 D	\$25,000-OR MORE	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

INTERESTS IN BUSINESS ENTITIES

Texas Ethics Commission

PART 7B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

providing the number under which the child is listed on the Cover Sneet.						
1 HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD			
2 DESCRIPTION		NAME AND ADDRESS (Check If Filer's Home Address)				
	Pearl Ca	at Management LLC				
	PO Box 1427, Austin Tx 78767					
IF SOLD NET GAIN NET LOSS	☐ LESS THAN	\$5,000 \(\subseteq \\$5,000-\\$9,999	☐ \$10,000-\$24,999 ☐ \$25,000-OR MORE			
HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHILD			
DESCRIPTION	NAME AND ADDRESS ☐ (Check If Filer's Home Address)					
IF SOLD NET GAIN NET LOSS	LESS THAN	\$5,000 \$5,000-\$9,999	☐ \$10,000\$24,999 ☐ \$25,000OR MORE			
HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHILD			
DESCRIPTION			D ADDRESS ler's Home Address)			
IF SOLD NET GAIN NET LOSS	LESS THAN	I \$5,000	☐ \$10,000\$24,999 ☐ \$25,000OR MORE			
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY						

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IRL	JOI	HYU		

P.O. Box 12070

PART 9

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

Identify each source of income received by you, your spouse, or a dependent child as beneficiary of a trust and indicate the category of the amount of income received. Also identify each asset of the trust from which the beneficiary received more than \$500 in income, if the identity of the asset is known. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 SOURCE	2006 Hurt Famil		OF TRUST		
² BENEFICIARY	FILER	☐ SPOUSE	DEPENDENT (CHILD	
3 INCOME	LESS THAN \$5,000	\$5,000 \$ 9,999	\$10,000 \$24,999	X \$25,000OR MORE	
ASSETS FROM WHICH OVER \$500 WAS RECEIVED UNKNOWN	Investment account				
SOURCE		NAME C	DF TRUST		
BENEFICIARY	FILER	SPOUSE	DEPENDENT (CHILD	
INCOME	LESS THAN \$5,000	55,000\$9,999	\$10,000\$24,999	☐ \$25,000-OR MORE	
ASSETS FROM WHICH OVER \$500 WAS RECEIVED					
☐ UNKNOWN					
		NAME C	OF TRUST		
SOURCE	,				
BENEFICIARY	☐ FILER	SPOUSE	DEPENDENT (CHILD	
INCOME	LESS THAN \$5,000	\$5,000-\$9,999	\$10,000-\$24,999	\$25,000OR MORE	
ASSETS FROM WHICH OVER \$500 WAS RECEIVED					
UNKNOWN					
COPY A	ND ATTACH ADDITION	DNAL PAGES AS	NECESSARY		

ASSETS OF BUSINESS ASSOCIATIONS

P.O. Box 12070

PART 11A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

		NAME AND A	Annece		
1 BUSINESS			's Home Address)		
ASSOCIATION	Cumberland Fifth LLC				
	PO Box 1427,	Austin Tx 78767			
² BUSINESS TYPE	LLC, Limited Lia	ability Company			
³ HELD, ACQUIRED, OR SOLD BY	X FILER	X SPOUSE	DEPENDENT (CHILD ———	
4 ASSETS	Bank account h	SCRIPTION	CATEG	GORY	
7.002.0		eral Credit Union,	LESS THAN \$5,000	\$5,000-\$9,999	
	Austin, Texas,		\$10,000-\$24,999	▼ \$25,000-OR MORE	
	Real Estate Ho				
		House on 1 city lot;	LESS THAN \$5,000	\$5,000\$9,999	
	rental property	; property address:	\$10,000-\$24,999	☒ \$25,000OR MORE	
	800 Christopher St., Austin, Texas, 78704, Travis County	LESS THAN \$5,000	\$5,000\$9,999		
			\$10,000 —\$24,999	☐ \$25,000-OR MORE	
			LESS THAN \$5,000	\$5,000-\$9,999	
			\$10,000-\$24,999	☐ \$25,000-OR MORE	
				\$5,000\$9,999	
			\$10,000—\$24,999	\$25,000-OR MORE	
			 	\$5,000\$9,999	
			\$10,000—\$24,999 	\$25,000OR MORE	
		•	LESS THAN \$5,000	55,000\$9,999	
			! !	☐ \$25,000OR MORE	
			\$10,000\$24,999		
			 	\$5,000\$9,999	
			\$10,000\$24,999	☐ \$25,000OR MORE	

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

ASSETS OF BUSINESS ASSOCIATIONS

P.O. Box 12070

PART 11A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS-INSTRUCTION GUIDE.

BUSINESS ASSOCIATION	NAME AND ADDRESS (Check If Filer's Home Address) Pearl Cat LP PO Box 1427, Austin Tx 78767			
² BUSINESS TYPE	LP, Limited F	Partnership		
³ HELD, ACQUIRED, OR SOLD BY	∏ FILER	X spouse	☐ DEPENDENT	CHILD ———
4 ASSETS	Investment acco	scription ount holdings, ustin,Texas, cash and mutual funds	CATE LESS THAN \$5,000 S10,000-\$24,999	GORY \$5,000\$9,999 \$25,000OR MORE
	,		LESS THAN \$5,000	\$5,000-\$9,999 \$25,000-OR MORE
·		_.	LESS THAN \$5,000	\$5,000-\$9,999 \$25,000-OR MORE
			LESS THAN \$5,000 \$10,000-\$24,999	\$5,000\$9,999 \$25,000OR MORE
			LESS THAN \$5,000	\$5,000\$9,999 \$25,000-OR MORE
			LESS THAN \$5,000	\$5,000\$9,999 \$25,000OR MORE
			LESS THAN \$5,000	\$5,000-\$9,999 \$25,000-OR MORE
			LESS THAN \$5,000	\$5,000\$9,999 \$25,000OR MORE

PART 11A

ASSETS OF BUSINESS ASSOCIATIONS

P.O. Box 12070

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Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS—INSTRUCTION GUIDE.

F				
¹ BUSINESS ASSOCIATION	NAME AND ADDRESS (Check If Filer's Home Address) Pearl Cat Management LLC PO Box 1427, Austin Tx 78767			
² BUSINESS TYPE				,
³ HELD, ACQUIRED, OR SOLD BY	X FILER	∑ spouse	☐ DEPENDENT	CHILD —
4 ASSETS	Bank account holdi	ngs,	CATE CATE LESS THAN \$5,000	GORY \$5,000\$9,999
	Merrill Lynch, Austi	n, i exas, casn	\$10,000-\$24,999	\$25,000OR MORE
	Pearl Cat LP (1% ownership inte	rest)	X LESS THAN \$5,000	\$5,000\$9,999
			\$10,000-\$24,999	\$25,000OR MORE
j			LESS THAN \$5,000	\$5,000\$9,999
			\$10,000\$24,999	☐ \$25,000-OR MORE
			LESS THAN \$5,000	\$5,000-\$9,999
		. , <i>, ,</i> ,	\$10,000-\$24,999	\$25,000OR MORE
		-	LESS THAN \$5,000	\$5,000\$9,999
			\$10,000-\$24,999	\$25,000OR MORE
			LESS THAN \$5,000	55,000\$9,999
			\$10,000-\$24,999	☐ \$25,000OR MORE
			LESS THAN \$5,000	\$5,000-\$9,999
			\$10,000-\$24,999	\$25,000OR MORE
			LESS THAN \$5,000	\$5,000-\$9,999
			\$10,000-\$24,999	\$25,000-OR MORE
	COPY AND ATTACH A	ADDITIONAL PAGES	S AS NECESSARY	

ASSETS OF BUSINESS ASSOCIATIONS

P.O. Box 12070

PART 11A

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Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS-INSTRUCTION GUIDE.

¹ BUSINESS ASSOCIATION	NAME AND ADDRESS (Check If Filer's Home Address) Ratliff Riker LP PO Box 1427, Austin Tx 78767				
² BUSINESS TYPE	LP, Limited Partnership		~		
3 HELD, ACQUIRED, OR SOLD BY	☐ FILER ☐ SPOUSE	DEPENDENT	CHILD ——		
4 ASSETS	DESCRIPTION Real Estate (West Texas) Undivided interest in land acreage in Ector County, Texas, on property known as	CATE LESS THAN \$5,000 S10,000-\$24,999	GORY \$5,000\$9,999 \$25,000-OR MORE		
	Ratliff Ranch and owned by Ratliff Riker LP, Approx. 20,000 acres Undivided interest in land acreage in Winkler County, Texas, on property known as	LESS THAN \$5,000	□ \$5,000–\$9,999 □ \$25,000OR MORE		
	Ratliff Ranch and owned by Ratliff Riker LP, Approx. 2,000 acres Undivided interest in land acreage in Loving County, Texas, on property known as	LESS THAN \$5,000	\$5,000-\$9,999 \$25,000-OR MORE		
	Ratliff Ranch and owned by Ratliff Riker LP, Approx. 2,000 acres Undivided interest in land acreage in Atascosa County, Texas, on property known	LESS THAN \$5,000 S10,000-\$24,999	□ \$5,000\$9,999 □ \$25,000-OR MORE		
	Ratliff Ranch and owned by Ratliff Riker LP, Approx. 2,000 acres	LESS THAN \$5,000	\$5,000\$9,999 \$25,000OR MORE		
·		LESS THAN \$5,000	\$5,000\$9,999 \$25,000OR MORE		
		LESS THAN \$5,000 \$10,000-\$24,999	\$5,000\$9,999		
	· · · · · · · · · · · · · · · · · · ·	LESS THAN \$5,000	\$5,000-\$9,999 \$25,000OR MORE		
(COPY AND ATTACH ADDITIONAL PAGES	AS NECESSARY			

ASSETS OF BUSINESS ASSOCIATIONS

P.O. Box 12070

PART 11A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report.

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS-INSTRUCTION GUIDE.

providing the number unde	er which the child is list	ed on the Cover Sneet.		
¹ BUSINESS ASSOCIATION	NAME AND ADDRESS (Check If Filer's Home Address) Ratliff Riker Management LLC PO Box 1427, Austin Tx 78767			
² BUSINESS TYPE	LLC, Limited Lia	ability Company		
³ HELD, ACQUIRED, OR SOLD BY	☐ FILER	☑ SPOUSE	DEPENDENT (CHILD
⁴ ASSETS	Bank account in University Fede Austin, Texas, (eral Credit Union,	CATE() LESS THAN \$5,000 \$10,000-\$24,999	GORY \$5,000\$9,999 \$25,000OR MORE
	Ratliff Riker LP (1% ownership ii	nterest)	☐ LESS THAN \$5,000	\$5,000-\$9,999 \$25,000-OR MORE
			LESS THAN \$5,000	\$5,000\$9,999 \$25,000OR MORE
			LESS THAN \$5,000	\$5,000\$9,999 \$25,000OR MORE
			LESS THAN \$5,000	\$5,000\$9,999 \$25,000-OR MORE
			LESS THAN \$5,000	\$5,000-\$9,999 \$25,000OR MORE
			LESS THAN \$5,000	\$5,000\$9,999 \$25,000OR MORE
		•	LESS THAN \$5,000	☐ \$5,000\$9,999 ☐ \$25,000-OR MORE
	COPY AND ATTAC	H ADDITIONAL PAGES	AS NECESSARY	

ASSETS OF BUSINESS ASSOCIATIONS

P.O. Box 12070

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¹ BUSINESS ASSOCIATION	McCottage LLC PO Box 1427, A	<i>-</i>	ADDRESS r's Home Address)	
² BUSINESS TYPE				
3 HELD, ACQUIRED, OR SOLD BY	⅓ FILER	X SPOUSE	☐ DEPENDENT	CHILD ——
4 ASSETS	Real Estate Hold Single Family Ho rental property; p 1107 S. 3rd St.,	use on 1 city lot; roperty address:	CATE LESS THAN \$5,000 S10,000—\$24,999	GORY \$5,000\$9,999 X \$25,000-OR MORE
	78704, Travis Co		LESS THAN \$5,000	\$5,000\$9,999 \$25,000OR MORE
	Bank account, University Federa Austin, Texas, cas		LESS THAN \$5,000	☒ \$5,000—\$9,999 ☐ \$25,000—OR MORE
			LESS THAN \$5,000 \$10,000-\$24,999	\$5,000\$9,999 \$25,000OR MORE
			LESS THAN \$5,000	\$5,000\$9,999
			LESS THAN \$5,000	\$5,000\$9,999 \$25,000-OR MORE
		, , , , , , , , , , , , , , , , , , , ,	LESS THAN \$5,000	\$5,000-\$9,999 \$25,000-OR MORE
			LESS THAN \$5,000	☐ \$5,000\$9,999 ☐ \$25,000OR MORE

x 12070 Austin, Texas 78711-2070

ASSETS OF BUSINESS ASSOCIATIONS

PART 11A

(TDD 1-800-735-2989)

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F. 2				
¹ BUSINESS ASSOCIATION	NAME AND ADDRESS West Fourteenth LLC 409 West 14th Street, Austin, TX 78701			
² BUSINESS TYPE				
³ HELD, ACQUIRED, OR SOLD BY	IX FILER	DEPENDENT CHILD ———		
4 ASSETS	Real Estate Holding: Single Family House (formerly);	CATEGORY LESS THAN \$5,000 \$5,000-\$9,999		
	1 City Lot; Commercial office rental			
	property; property address: 409 W. 14th St., Austin, Texas	☐ LESS THAN \$5,000 ☐ \$5,000-\$9,999		
	78701, Travis County	☐ \$10,000\$24,999 ☐ \$25,000OR MORE		
	Bank account holdings, Capital One Bank,	LESS THAN \$5,000		
	Plainview, Texas; cash deposits	☑ \$10,000-\$24,999 ☐ \$25,000-OR MORE		
		LESS THAN \$5,000 \$5,000\$9,999		
		LESS THAN \$5,000 \$5,000\$9,999		
		LESS THAN \$5,000		
,		LESS THAN \$5,000 \$5,000-\$9,999		
		\$10,000-\$24,999 \$25,000OR MORE		
	COPY AND ATTACH ADDITIONAL PAGES	AS NECESSARY		

BOARDS AND EXECUTIVE POSITIONS

P.O. Box 12070

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List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS-INSTRUCTION GUIDE.

1 ORGANIZATION	Tom Hurt Architectu (formerly Hurt Partne		
POSITION HELD	President, Owner		•
³ POSITION HELD BY	☐ FILER	X SPOUSE	DEPENDENT CHILD
ORGANIZATION	Ratliff Riker LP		
POSITION HELD	Limited Partner		
POSITION HELD BY	X FILER	X SPOUSE	DEPENDENT CHILD
ORGANIZATION	Ratliff Riker Manaç	gement LLC	
POSITION HELD	Manager		
POSITION HELD BY	X FILER	X SPOUSE	DEPENDENT CHILD
ORGANIZATION	Pearl Cat LP		
POSITION HELD	Limited Partner		
POSITION HELD BY	ĭ FILER	ĭX spouse	DEPENDENT CHILD
ORGANIZATION	Pearl Cat Managen	nent LLC	
POSITION HELD	Manager		
POSITION HELD BY	X FILER	X spouse	DEPENDENT CHILD
	COPY AND ATTACH AD	DITIONAL PAGES A	S NECESSARY

BOARDS AND EXECUTIVE POSITIONS

P.O. Box 12070

PART 12

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1 ORGANIZATION	West Fourteent	th LLC	
POSITION HELD	Manager		
³ POSITION HELD BY	X FILER	X spouse	DEPENDENT CHILD
ORGANIZATION	McCottage LL	С	
POSITION HELD	Manager		
POSITION HELD BY	X FILER	X spouse	DEPENDENT CHILD
ORGANIZATION	Cumberland F	Fifth LLC	
POSITION HELD	Manager		
POSITION HELD BY	X FILER	X spouse	DEPENDENT CHILD
ORGANIZATION	Community A	ction Network, Austin, TX	(
POSITION HELD	Board Memb	er	
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD
ORGANIZATION	Capital Area (Council of Governments	
POSITION HELD	Member, Exe	ecutive Committee	
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD
(COPY AND ATTAC	CH ADDITIONAL PAGES A	S NECESSARY

BOARDS AND EXECUTIVE POSITIONS

PART 12

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	_			
1 ORGANIZATION	Capital Area Emergency Communications District			
POSITION HELD	Board of Ma	anagers		
³ POSITION HELD BY	X☐ FILER	SPOUSE	DEPENDENT CHILD	
ORGANIZATION	Campfire US	A Balcones Council		
POSITION HELD	Program Adv	isory Board Member		
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	
ORGANIZATION	Austin Bergstrom International Airport Development Corporation Board of Directors			
POSITION HELD	Board Memb	er		
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	
ORGANIZATION	Austin Housing Finance Corporation Board of Directors			
POSITION HELD	Limited Partne	er .		
POSITION HELD BY	🔀 FILER	SPOUSE	DEPENDENT CHILD	
ORGANIZATION	Mueller Local	Government Corporation	on Board of Directors	
POSITION HELD	Board Membe	г .		
POSITION HELD BY	🛚 FILER	SPOUSE	DEPENDENT CHILD	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

BOARDS AND EXECUTIVE POSITIONS

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1 ORGANIZATION			ctors Reinvestment Zone Number
ONGARIZATION	, ,	ters Sciences Corpora	ation Downtown Headquarters
POSITION HELD	Facility) Board Member		
³ POSITION HELD BY	▼ FILER	SPOUSE	DEPENDENT CHILD
ORGANIZATION		inance Board of Direct Mueller Municipal Airp	ctors Reinvestment Zone Number port redevelopment)
POSITION HELD	Board Member		
POSITION HELD BY	K FILER	SPOUSE	DEPENDENT CHILD
ORGANIZATION	· · · · ·	inance Board of Direct Creek Tunnel Project	tors Reinvestment Zone Number)
POSITION HELD	Board Member	57	e de la companya del companya de la
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD
ORGANIZATION		inance Board of Direct Im Redevelopment Pr	tors Reinvestment Zone Number oject)
POSITION HELD	Board Membe	r	
POSITION HELD BY	FILER	SPOUSE	DEPENDENT CHILD
ORGANIZATION	Capital Area C	ouncil on Governmen	ts
POSITION HELD	General Asse	embly Member	
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD
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BOARDS AND EXECUTIVE POSITIONS

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1	<u> </u>		
ORGANIZATION	Hurt Asset Mana	gement, LLC	·
POSITION HELD	Manager		<u> </u>
³ POSITION HELD BY	FILER	X SPOUSE	DEPENDENT CHILD
ORGANIZATION	Austin Industrial	Development (Corporation, Board of Directors
POSITION HELD	Board Member		
POSITION HELD BY	FILER	SPOUSE	DEPENDENT CHILD
ORGANIZATION	St. Johns United	Methodist Chu	rch, Austin, Texas, Board of Trustees
POSITION HELD	Trustee		Marie and the second of the se
POSITION HELD BY	FILER	X SPOUSE	DEPENDENT CHILD
ORGANIZATION			
POSITION HELD			
POSITION HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD
ORGANIZATION			
POSITION HELD			
POSITION HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD
	COPY AND ATTACH AD	DITIONAL PAG	ES AS NECESSARY

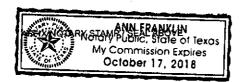
PERSONAL FINANCIAL STATEMENT AFFIDAVIT

P.O. Box 12070

The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

> I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2013, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

(512) 463-5800



•	Kathryne D.	10V001		
Sworn to and subscribed before me, by the said			3012	day of
<i>1</i> 1 .	tify which, witness my hand			uu, u.
7 1 10 10 10 10 10 10 10 10 10 10 10 10 1	,			

Title of officer administering oath

Signature of officer administering oath