PERSONAL FINANCIAL STATEMENT

FORM PFS
COVER SHEET
PAGE 1

Filed in accordance with chapter 572 of the Government Code.
For filings required in 2022, covering calendar year ending December 31, 2021.
Use FORM PFS--INSTRUCTION GUIDE when completing this form.

PAGE # 62

ACCOUNT # 00090869

OFFICE USE ONLY

Date Received: ELECTRONICALLY FILED 08/29/2022

Receipt #

HD / PM | Amount

Date Processed

Date Imaged

1 NAME

TITLE; FIRST; MI: Kirk

NICKNAME; LAST; SUFFIX: Watson

2 ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP

PO Box 300903

Austin, TX 78703

☐ (CHECK IF FILER'S HOME ADDRESS)

3 TELEPHONE NUMBER

AREA CODE PHONE NUMBER; EXTENSION

(512) 542-9744

4 REASON FOR FILIING STATEMENT

- ☒ CANDIDATE _____ (INDICATE OFFICE)
- ☐ ELECTED OFFICER _____ (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 whose financial activity you are reporting (see instructions).

SPOUSE Elizabeth McDaniel Watson

DEPENDENT CHILD 1. _____

2. _____

3. _____

In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child (see instructions).

SOURCES OF OCCUPATIONAL INCOME

PART 1A

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.**

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 INFORMATION RELATES TO	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD ____	
3 EMPLOYMENT [ ] EMPLOYED BY ANOTHER	NAME AND ADDRESS OF EMPLOYER / POSITION HELD [ ] (Check if Filer's Home Address) EMPLOYER SELF ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2000 K Street NW 12th Floor Washington, DC 20006 POSITION HELD	
[X] SELF-EMPLOYED	NATURE OF OCCUPATION Managing Trustee, Federal-Mogul Asbestos Personal Injury Trust	

INFORMATION RELATES TO	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD ____	
EMPLOYMENT [ ] EMPLOYED BY ANOTHER	NAME AND ADDRESS OF EMPLOYER / POSITION HELD [ ] (Check if Filer's Home Address) EMPLOYER SELF ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3120 Fairview Park Dr. #200 Falls Church, VA 22042 POSITION HELD	
[X] SELF-EMPLOYED	NATURE OF OCCUPATION Trustee, MLC Asbestos Personal Injury Trust	

SOURCES OF OCCUPATIONAL INCOME

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1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 INFORMATION RELATES TO	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD ____	
3 EMPLOYMENT [ ] EMPLOYED BY ANOTHER	NAME AND ADDRESS OF EMPLOYER / POSITION HELD [ ] (Check if Filer's Home Address) EMPLOYER SELF ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1132 Main St., Ste. 4 Peekskill, NY 10566 POSITION HELD	
[X] SELF-EMPLOYED	NATURE OF OCCUPATION Trustee, Manville Personal Injury Settlement Trust	

INFORMATION RELATES TO	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD ____
EMPLOYMENT [ ] EMPLOYED BY ANOTHER	NAME AND ADDRESS OF EMPLOYER / POSITION HELD [ ] (Check if Filer's Home Address) EMPLOYER SELF ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 551 Elgin, TX 78621 POSITION HELD
[X] SELF-EMPLOYED	NATURE OF OCCUPATION Board Member, Frontier Bank of Texas

SOURCES OF OCCUPATIONAL INCOME

PART 1A

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1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 INFORMATION RELATES TO	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD ____	
3 EMPLOYMENT [ ] EMPLOYED BY ANOTHER	NAME AND ADDRESS OF EMPLOYER / POSITION HELD [ ] (Check if Filer's Home Address) EMPLOYER SELF ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3120 Fairview Park Dr. #200 Falls Church, VA 22042-4570 POSITION HELD	
[X] SELF-EMPLOYED	NATURE OF OCCUPATION Board Member, Claims Resolution Management Corp.	

INFORMATION RELATES TO	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD ____
EMPLOYMENT [X] EMPLOYED BY ANOTHER	NAME AND ADDRESS OF EMPLOYER / POSITION HELD [ ] (Check if Filer's Home Address) EMPLOYER University of Houston ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4800 Calhoun Rd. Houston, TX 77204 POSITION HELD Founding Dean, Hobby School of Public Affairs
[ ] SELF-EMPLOYED	NATURE OF OCCUPATION

SOURCES OF OCCUPATIONAL INCOME

PART 1A

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1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 INFORMATION RELATES TO	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
3 EMPLOYMENT [ ] EMPLOYED BY ANOTHER	NAME AND ADDRESS OF EMPLOYER / POSITION HELD [ ] (Check if Filer's Home Address) EMPLOYER SELF ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3120 Fairview Park Dr. #200 Falls Church, VA 22042 POSITION HELD	
[X] SELF-EMPLOYED	NATURE OF OCCUPATION Trustee, Burns & Roe Asbestos Personal Injury Trust	

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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 BUSINESS ENTITY	NAME FRONTIER COMMUNITY BANKSHARES INC. (OWNED BY KIRK AND LIZ WATSON)	
3 STOCK HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
4 NUMBER OF SHARES	[ ] LESS THAN 100 [ ] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] LESS THAN 10K [X] 10,000 OR MORE	
5 IF SOLD [ ] NET GAIN [ ] NET LOSS		

BUSINESS ENTITY	NAME FRONTIER COMMUNITY BANKSHARES INC. (OWNED BY KIRK P. WATSON)
STOCK HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
NUMBER OF SHARES	[ ] LESS THAN 100 [ ] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] LESS THAN 10K [X] 10,000 OR MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME AQR LARGE CAP DEFENSIVE STYLE FUND CL I N/L - AUEIX (Owned by The KEPC Trust)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
4 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 MORE	
5 IF SOLD [ ] NET GAIN [ ] NET LOSS		

MUTUAL FUND	NAME CHAMPLAIN MID CAP FUND INSTL CL N/L - CIPIX (Owned by The KEPC Trust)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

MUTUAL FUND	NAME AMER FUNDS AMER MUTUAL FUND CL F2 N/L - AMRFX (Owned by The KEPC Trust)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [ ] 100 TO 499 [X] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME BAIRD AGGREGATE BOND FUND INSTL CL N/L - BAGIX (Owned by The KEPC Trust)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
4 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 MORE	
5 IF SOLD [ ] NET GAIN [ ] NET LOSS		

MUTUAL FUND	NAME DODGE & COX INCOME FUND N/L - DODIX (Owned by The KEPC Trust)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320

MUTUAL FUND	NAME JOHN HANCOCK INTL GROWTH FUND CL I N/L - GOGIX (Owned by The KEPC Trust)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [ ] 100 TO 499 [X] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME JPMORGAN SMALL CAP EQUITY FUND CL I N/L - VSEIX (Owned by The KEPC Trust)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
4 NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE	
5 IF SOLD [ ] NET GAIN [ ] NET LOSS		

MUTUAL FUND	NAME MFS RESEARCH FUND CL I N/L - MRFIX (Owned by The KEPC Trust)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

MUTUAL FUND	NAME PIMCO LOW DURATION FUND CL I2 N/L - PLDPX (Owned by The KEPC Trust)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME TRANSAMERICA HIGH YIELD BOND FUND CL I N/L - TDHIX (Owned by The KEPC Trust)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
4 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 MORE	
5 IF SOLD [ ] NET GAIN [ ] NET LOSS		

MUTUAL FUND	NAME PGIM ABSOLUTE RETURN BOND FUND CL Z N/L - PADZX (Owned by The KEPC Trust)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [ ] NET GAIN [X] NET LOSS	Less than $9,320

MUTUAL FUND	NAME CLEARBRIDGE DIVIDEND STRATEGY FUND CL I N/L - SOPYX (Owned by The KEPC Trust)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [ ] 100 TO 499 [X] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME ACAP STRATEGIC FUND CLASS A M/F - XCAPX (Owned by Kirk Preston Watson IRA)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [ ] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [X] 5,000 to 9,999 [ ] 10,000 OR MORE	
5 IF SOLD [ ] NET GAIN [ ] NET LOSS		

MUTUAL FUND	NAME AMER FUNDS AMER MUTUAL FUND CL F2 N/L - AMRFX (Owned by Kirk Preston Watson IRA)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	At least $18,630 but less than $46,580

MUTUAL FUND	NAME BAIRD AGGREGATE BOND FUND INSTL CL N/L - BAGIX (Owned by Kirk Preston Watson IRA)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [ ] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [X] 5,000 to 9,999 [ ] 10,000 OR MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME CHAMPLAIN MID CAP FUND INSTL CL N/L - CIPIX (Owned by Kirk Preston Watson IRA)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 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 MORE	
5 IF SOLD [X] NET GAIN [ ] NET LOSS	At least $18,630 but less than $46,580	

MUTUAL FUND	NAME DODGE & COX INCOME FUND CL I N/L - DODIX (Owned by Kirk Preston Watson IRA)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320

MUTUAL FUND	NAME ISHARES TR BROAD USD HIGH - USHY (Owned by Kirk Preston Watson IRA)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME ISHARES TR CORE 1 5 YR USD - ISTB (Owned by Kirk Preston Watson IRA)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 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 MORE	
5 IF SOLD [ ] NET GAIN [ ] NET LOSS		

MUTUAL FUND	NAME ISHARES TR CORE MSCI EAFE - IEFA (Owned by Kirk Preston Watson IRA)	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
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 MORE	
IF SOLD [ ] NET GAIN [ ] NET LOSS		

MUTUAL FUND	NAME ISHARES TR CORE S&P MCP ETF - IJH (Owned by Kirk Preston Watson IRA)	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE	
IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320	

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME ISHARES TR CORE S&P SCP ETF - IJR (Owned by Kirk Preston Watson IRA)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE	
5 IF SOLD [ ] NET GAIN [ ] NET LOSS		

MUTUAL FUND	NAME ISHARES TR CORE US AGGBD ET - AGG (Owned by Kirk Preston Watson IRA)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

MUTUAL FUND	NAME ISHARES TR JPMORGAN USD EMG - EMB (Owned by Kirk Preston Watson IRA)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME ISHARES TR MSCI USA MIN VOL - USMV (Owned by Kirk Preston Watson IRA)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [ ] 100 TO 499 [X] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE	
5 IF SOLD [ ] NET GAIN [ ] NET LOSS		

MUTUAL FUND	NAME ISHARES TR MSCI USA SMCP MN - SMMV (Owned by Kirk Preston Watson IRA)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [ ] 100 TO 499 [X] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

MUTUAL FUND	NAME JOHN HANCOCK INTL GROWTH FUND CL I N/L - GOGIX (Owned by Kirk Preston Watson IRA)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	At least $9,320 but less than $18,630

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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME JPMORGAN SMALL CAP EQUITY FUND CL I N/L - VSEIX (Owned by Kirk Preston Watson IRA)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [ ] 100 TO 499 [X] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE	
5 IF SOLD [X] NET GAIN [ ] NET LOSS	At least $9,320 but less than $18,630	

MUTUAL FUND	NAME LOOMIS SAYLES GROWTH FUND CL Y N/L - NATIXIS ADVISOR - NATIXIS ADVISOR	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
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 MORE	
IF SOLD [X] NET GAIN [ ] NET LOSS	At least $46,580 or more	

MUTUAL FUND	NAME METRO WEST TOTAL RTN BOND FUND CL I N/L-MWTIX (Owned by Kirk Preston Watson IRA)	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [ ] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [X] 5,000 to 9,999 [ ] 10,000 OR MORE	
IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320	

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME MFS RESEARCH FUND CL I N/L - LSGRX (Owned by Kirk Preston Watson IRA)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 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 MORE	
5 IF SOLD [X] NET GAIN [ ] NET LOSS	At least $18,630 but less than $46,580	

MUTUAL FUND	NAME PIMCO LOW DURATION FUND CL I2 N/L - PLDPX (Owned by Kirk Preston Watson IRA)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320

MUTUAL FUND	NAME SPDR S&P DIVIDEND ETF - SDY (Owned by Kirk Preston Watson IRA)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME VANGUARD MID-CAP ETF - VO (Owned by Kirk Preston Watson IRA)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE	
5 IF SOLD [ ] NET GAIN [ ] NET LOSS		

MUTUAL FUND	NAME FIRST EAGLE GLOBAL FUND CL C M/F - FESGX (Owned by Kirk Preston Watson SEP)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320

MUTUAL FUND	NAME ISHARES TR 3 7 YR TREAS BD - IEI (Owned by Kirk Preston Watson SEP)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME ISHARES TR CORE MSCI EURO - IEUR (Owned by Kirk Preston Watson SEP)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE	
5 IF SOLD [ ] NET GAIN [ ] NET LOSS		

MUTUAL FUND	NAME ISHARES TR IBOXX INV CP ETF - LQD (Owned by Kirk Preston Watson SEP)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320

MUTUAL FUND	NAME ISHARES TR MSCI AC ASIA ETF - AAXJ (Owned by Kirk Preston Watson SEP)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE
IF SOLD [ ] NET GAIN [X] NET LOSS	Less than $9,320

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME ISHARES TR RUSSELL 2000 ETF - IWM (Owned by Kirk Preston Watson SEP)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 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 MORE	
5 IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320	

MUTUAL FUND	NAME ISHARES TR U.S. FIN SVC ETF - IYG (Owned by Kirk Preston Watson SEP)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320

MUTUAL FUND	NAME SOUTHERNSUN U.S. EQUITY FUND CL N N/L - SSEFX (Owned by Kirk Preston Watson SEP)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME SPDR COMM SERVICES SELECT SECTOR FUND - XLC (Owned by Kirk Preston Watson SEP)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE	
5 IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320	

MUTUAL FUND	NAME SPDR CONSUMER DISCR SELECT SECTOR FUND - XLY (Owned by Kirk Preston Watson SEP)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320

MUTUAL FUND	NAME SPDR ENERGY SELECT SECTOR FUND - XLE (Owned by Kirk Preston Watson SEP)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME SPDR FINANCIAL SELECT SECTOR FUND - XLF (Owned by Kirk Preston Watson SEP)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE	
5 IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320	

MUTUAL FUND	NAME SPDR HEALTH CARE SELECT - XLV (Owned by Kirk Preston Watson SEP)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320

MUTUAL FUND	NAME SPDR INDUSTRIAL SELECT SECTOR FUND - XLI (Owned by Kirk Preston Watson SEP)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME SPDR TECHNOLOGY SELECT SECTOR FUND - XLK (Owned by Kirk Preston Watson SEP)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE	
5 IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320	

MUTUAL FUND	NAME VANGUARD FTSE ALL-WORLD EX-US ETF - VEU (Owned by Kirk Preston Watson SEP)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

MUTUAL FUND	NAME VANGUARD FTSE PACIFIC ETF - VPL (Owned by Kirk Preston Watson SEP)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME INCOME FD OF AMER CLASS A-AMER FDS M/F-AMECX (Owned by Elizabeth McDaniel	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____	
4 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 MORE	
5 IF SOLD ☐ NET GAIN ☐ NET LOSS		

MUTUAL FUND	NAME VANGUARD TARGET 2020 (OWNED BY KIRK P. WATSON FIDELITY 401K ACCOUNT)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____
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 MORE
IF SOLD ☐ NET GAIN ☐ NET LOSS	

MUTUAL FUND	NAME FED HERMES SHORT TERM INCOME FD INSTL SHRS IS N/L-FSTYX (Owned by KEPC Trust)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____
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 MORE
IF SOLD ☐ NET GAIN ☐ NET LOSS	

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME LOOMIS SAYLES GROWTH FD CL Y N/L-NATIXIS ADVSR-LSGRX (Owned by KEPC Trust)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
4 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 MORE	
5 IF SOLD [ ] NET GAIN [ ] NET LOSS		

MUTUAL FUND	NAME METROPOLITAN WEST TOTAL RETURN BOND FUND CL I N/L-MWTIX (Owned by KEPC Trust)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

MUTUAL FUND	NAME T. ROWE PRICE U.S. EQUITY RESEARCH FD INVSTR CL N/L-PRCOX (Owned by KEPC Trust)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

MUTUAL FUNDS

PART 4

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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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME T. ROWE PRICE OVERSEAS STOCK FUND INVSTR CL N/L- TROSX (Owned by KEPC Trust)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
4 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 MORE	
5 IF SOLD [ ] NET GAIN [ ] NET LOSS		

MUTUAL FUND	NAME T. ROWE PRICE SMALL CAP VALUE FUND INVSTR CL N/L-PRSVX (Owned by KEPC Trust)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

MUTUAL FUND	NAME ALLSPRING EMERGING MARKETS EQUITY FUND CL I N/L-EMGNX (Owned by KEPC Trust)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [ ] 100 TO 499 [X] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

MUTUAL FUNDS

PART 4

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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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME HARDING LOEVNER EMERG MTS PORT FUND ADV CL N/L-HLEMX (Owned by KEPC Trust)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
4 NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE	
5 IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320	

MUTUAL FUND	NAME CLEARBRIDGE DIV STRAT FUND CL I N/L-SOPYX (Owned by Kirk Preston Watson IRA)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	At least $9,320 but less than $18,630

MUTUAL FUND	NAME FED HERMES SHORT TERM INC FD INSTL SHRS IS N/L-FSTYX (Owned-Kirk P Watson IRA)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320

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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME HARDING LOEVNER EMERG MKTS PT FND ADVS CL N/L-HLEMX (Owned- Kirk P Watson IRA)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER	[ ] SPOUSE [ ] DEPENDENT CHILD _____
4 NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [ ] 100 TO 499 [X] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE	
5 IF SOLD [X] NET GAIN [ ] NET LOSS	At least $18,630 but less than $46,580	

MUTUAL FUND	NAME JOHN HANCOCK DISC VALUE MIDCAP FD CL I N/L-JVMIX (Owned-Kirk Preston Watson IRA)	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER	[ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE	
IF SOLD [X] NET GAIN [ ] NET LOSS	At least $18,630 but less than $46,580	

MUTUAL FUND	NAME PGIM ABSOLUTE RETURN BOND FUND CL Z N/L-PADZX (Owned-Kirk Preston Watson IRA)	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER	[ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE	
IF SOLD [ ] NET GAIN [X] NET LOSS	Less than $9,320	

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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME TRANSAMERICA HIGH YIELD BOND FUND CL I N/L - TDHIX (Owned-Kirk Preston Watson IRA)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [ ] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [X] 5,000 to 9,999 [ ] 10,000 OR MORE	
5 IF SOLD [X] NET GAIN [ ] NET LOSS	At least $9,320 but less than $18,630	

MUTUAL FUND	NAME VANGUARD INDEX FUNDS S&P 500 ETF SHS NEW - VOO (Owned-Kirk Preston Watson IRA)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [ ] 100 TO 499 [X] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE
IF SOLD [ ] NET GAIN [ ] NET LOSS	

MUTUAL FUND	NAME ALLSPRING LARGE CAP CORE FUND CL C M/F-EGOCX (Owned-Kirk Preston Watson SEP)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME SPDR PORTFOLIO SHORT TERM CORP BOND ETF - SPSB (Owned-Kirk Preston Watson SEP)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [ ] 100 TO 499 [X] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE	
5 IF SOLD [ ] NET GAIN [ ] NET LOSS		

MUTUAL FUND	NAME VANGUARD INTERMDTE-TERM CORP BOND ETF - VCIT (Owned-Kirk Preston Watson SEP)	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE	
IF SOLD [X] NET GAIN [ ] NET LOSS	Less than $9,320	

MUTUAL FUND	NAME GRWTH FD OF AMER CLASS A-AMER FDS M/F-AGTHX (Owned by Elizabeth M Watson IRA)	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[ ] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE	
IF SOLD [ ] NET GAIN [ ] NET LOSS		

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME INV CO OF AMER CLASS A-AMER FUNDS M/F-AIVSX (Owned-Elizabeth McDaniel Watson IRA)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____	
4 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 MORE	
5 IF SOLD ☐ NET GAIN ☐ NET LOSS		

MUTUAL FUND	NAME SMALLCAP WORLD FD CLASS A-AMER FDS M/F-SMCWX (Owned-Elizabeth M Watson IRA)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____
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 MORE
IF SOLD ☐ NET GAIN ☐ NET LOSS	

MUTUAL FUND	NAME JOHN HANCOCK DISC VALUE MID CAP FUND CL I N/L-JVMIX (Owned by KEPC Trust)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____
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 MORE
IF SOLD ☐ NET GAIN ☐ NET LOSS	

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME AQR LRG CAP DEFENSIVE STYLE FUND CL I N/L-AUEIX (Owned-Kirk Preston Watson IRA)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 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 MORE	
5 IF SOLD [X] NET GAIN [ ] NET LOSS	At least $9,320 but less than $18,630	

MUTUAL FUND	NAME T. ROWE PRICE OVERSEAS STOCK FD INV CL N/L-TROSX (Owned-Kirk Preston Watson IRA)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
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 MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	At least $9,320 but less than $18,630

MUTUAL FUND	NAME T. ROWE PRICE SMALL CAP VALUE FD INV CL N/L-PRSVX (Owned-Kirk Preston Watson IRA)
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	[ ] LESS THAN 100 [ ] 100 TO 499 [X] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE
IF SOLD [X] NET GAIN [ ] NET LOSS	At least $9,320 but less than $18,630

MUTUAL FUNDS

PART 4

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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 nformation, 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 MUTUAL FUND	NAME T. ROWE PRICE U.S. EQTY RSCH FD INV CL N/L-PRCOX (Owned-Kirk Preston Watson IRA)	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 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 MORE	
5 IF SOLD [X] NET GAIN [ ] NET LOSS	At least $18,630 but less than $46,580	

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

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List each source of income you, your spouse, or a dependent child received in excess of $930 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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS ACAP STRATEGIC FUND CLASS A M/F - XCAPX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
3 RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 AMOUNT	Less than $9,320	

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS AMERICAN FUNDS AMERICAN MUTUAL FUND CL F2 N/L - AMRFX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS AMERICAN FUNDS GROWTH FUND OF AMERICA FUND CL A M/F - AGTHX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[ ] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

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List each source of income you, your spouse, or a dependent child received in excess of $930 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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS AMERICAN FUNDS INCOME FUND OF AMERICA FD CL A M/F - AMECX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
3 RECEIVED BY	[ ] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
4 AMOUNT	Less than $9,320	

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS AMERICAN FUNDS INVESTMENT CO OF AMERICA FD CL A M/F - AIVSX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[ ] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS AMERICAN FUNDS SMALLCAP WORLD FUND CL A M/F - SMCWX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[ ] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

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List each source of income you, your spouse, or a dependent child received in excess of $930 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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS AQR LARGE CAP DEFENSIVE STYLE FUND CL I N/L - AUEIX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
3 RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 AMOUNT	Less than $9,320	

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS BAIRD AGGREGATE BOND FUND INSTL CL N/L - BAGIX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS CHAMPLAIN MID CAP FUND INSTL CL N/L - CIPIX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

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List each source of income you, your spouse, or a dependent child received in excess of $930 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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS DODGE & COX INCOME FUND CL I N/L - DODIX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
3 RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 AMOUNT	Less than $9,320	

SOURCE OF INCOME [ ] Publicly held corporation	NAME AND ADDRESS FRONTIER COMMUNICTY BANKSHARES INC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE C/O COMPUTERSHARE PO BOX 505005 LOUISVILL, KY 40233-5055
RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	At least $9,320 but less than $18,630

SOURCE OF INCOME [ ] Publicly held corporation	NAME AND ADDRESS FRONTIER COMMUNICTY BANKSHARES INC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE C/O COMPUTERSHARE PO BOX 505005 LOUISVILL, KY 40233-5055
RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

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List each source of income you, your spouse, or a dependent child received in excess of $930 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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS ISHARES TR BROAD USD HIGH - USHY ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
3 RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 AMOUNT	Less than $9,320	

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS ISHARES TR CORE 1 5 YR USD - ISTB ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS ISHARES TR CORE MSCI EAFE - IEFA ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

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List each source of income you, your spouse, or a dependent child received in excess of $930 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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS ISHARES TR CORE US AGGBD ET - AGG ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
3 RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 AMOUNT	Less than $9,320	

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS ISHARES TR JPMORGAN USD EMG - EMB ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS ISHARES TR MSCI USA MIN VOL - USMV ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

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List each source of income you, your spouse, or a dependent child received in excess of $930 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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS JOHN HANCOCK DISCIPLINED VALUE MID CAP FUND CL I N/L - JVMIX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
3 RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 AMOUNT	Less than $9,320	

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS JOHN HANCOCK INTERNATIONAL GROWTH FUND CL I N/L - GOGIX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS JPMORGAN SMALL CAP EQUITY FUND CL I N/L - VSEIX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

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List each source of income you, your spouse, or a dependent child received in excess of $930 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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS LOOMIS SAYLES GROWTH FUND CL Y N/L - NATIXIS ADVISOR - LSGRX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
3 RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 AMOUNT	Less than $9,320	

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS METROPOLITAN WEST TOTAL RETURN BOND FUND CL I N/L - MWTIX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS MFS RESEARCH FUND CL I N/L - MRFIX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

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List each source of income you, your spouse, or a dependent child received in excess of $930 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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS SPDR S&P DIVIDEND ETF - SDY ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
3 RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 AMOUNT	Less than $9,320	

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS T. ROWE PRICE OVERSEAS STOCK FUND INVESTOR CL N/L - TROSX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS T. ROWE PRICE SMALL CAP VALUE FUND INVESTOR CL N/L - PRSVX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

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 $930 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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS T. ROWE PRICE U.S. EQUITY RESEARCH FD INVSTR CL N/L - PRCOX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
3 RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 AMOUNT	Less than $9,320	

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS TRANSAMERICA HIGH YIELD BOND FUND CL I N/L - TDHIX ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS VANGUARD FTSE ALL-WORLD EX-US ETF - VEU ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

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 $930 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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS VANGUARD INDEX FUNDS S&P 500 ETF SHS NEW - VOO ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
3 RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 AMOUNT	Less than $9,320	

SOURCE OF INCOME [X] Publicly held corporation	NAME AND ADDRESS VANGUARD INTERMEDIATE-TERM CORPORATE BOND ETF - VCIT ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	Less than $9,320

SOURCE OF INCOME [ ] Publicly held corporation	NAME AND ADDRESS condo rental paid through KEPC Family Trust ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4017 Avenue H Austin, TX 78751
RECEIVED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
AMOUNT	At least $9,320 but less than $18,630

PERSONAL NOTES AND LEASE AGREEMENTS

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 $1,860 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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	American Express Credit Card	
3 LIABILITY OF	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
4 GUARANTOR	NONE	
5 AMOUNT	At least $9,320 but less than $18,630	

PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Chase Credit Card
LIABILITY OF	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
GUARANTOR	NONE
AMOUNT	At least $9,320 but less than $18,630

PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Colonial Savings, FA
LIABILITY OF	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
GUARANTOR	NONE
AMOUNT	At least $46,580 or more

PERSONAL NOTES AND LEASE AGREEMENTS

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 $1,860 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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	CitiBank Credit Card	
3 LIABILITY OF	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
4 GUARANTOR	NONE	
5 AMOUNT	Less than $9,320	

PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Bank of America Credit Card
LIABILITY OF	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
GUARANTOR	NONE
AMOUNT	Less than $9,320

PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	TIB Credit Card
LIABILITY OF	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____
GUARANTOR	NONE
AMOUNT	Less than $9,320

PERSONAL NOTES AND LEASE AGREEMENTS

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 $1,860 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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	The Home Depot Credit Card	
3 LIABILITY OF	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
4 GUARANTOR	NONE	
5 AMOUNT	Less than $9,320	

PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Wells Fargo
LIABILITY OF	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
GUARANTOR	NONE
AMOUNT	At least $18,630 but less than $46,580

INTERESTS IN REAL PROPERTY

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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
3 STREET ADDRESS [ ] NOT AVAILABLE [ ] CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 405 Main Street Pitkin, CO 81241	
4 DESCRIPTION [X] LOTS [ ] ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots Gunnison	
5 NAMES OF PERSONS RETAINING AN INTEREST [ ] NOT APPLICABLE (SEVERED MINERAL INTEREST)	McDaniel, Charles & Diane (Liz Watson's brother,spouse)	
6 IF SOLD [ ] NET GAIN [ ] NET LOSS		

INTERESTS IN REAL PROPERTY

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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 HELD OR ACQUIRED BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
3 STREET ADDRESS [X] NOT AVAILABLE [ ] CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE	
4 DESCRIPTION [ ] LOTS [X] ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 341.00000 acres Woodward OK mineral interest	
5 NAMES OF PERSONS RETAINING AN INTEREST [X] NOT APPLICABLE (SEVERED MINERAL INTEREST)		
6 IF SOLD [ ] NET GAIN [ ] NET LOSS		

INTERESTS IN REAL PROPERTY

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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
3 STREET ADDRESS [ ] NOT AVAILABLE [ ] CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 39 Rock Garden Gulley Taos, NM 87571	
4 DESCRIPTION [ ] LOTS [X] ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 2.00000 acres Taos	
5 NAMES OF PERSONS RETAINING AN INTEREST [ ] NOT APPLICABLE (SEVERED MINERAL INTEREST)	Colonial Savings	
6 IF SOLD [ ] NET GAIN [ ] NET LOSS		

INTEREST 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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
3 DESCRIPTION	NAME AND ADDRESS [ ] (Check if Filer's Home Address) Frontier Bank of Texas PO Box 551 Elgin, TX 78621	
4 IF SOLD [ ] NET GAIN [ ] NET LOSS		

HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
DESCRIPTION	NAME AND ADDRESS [ ] (Check if Filer's Home Address) Frontier Community Bancshares, Inc. PO Box 551 Elgin, TX 78621
IF SOLD [ ] NET GAIN [ ] NET LOSS	

HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
DESCRIPTION	NAME AND ADDRESS [X] (Check if Filer's Home Address) KEPC Trust (a family trust) 4017 Avenue H Austin, TX 78757
IF SOLD [ ] NET GAIN [ ] NET LOSS	

INTEREST 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.

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
3 DESCRIPTION	NAME AND ADDRESS [ ] (Check if Filer's Home Address) Austin Housing Conservancy Fund 2525 Wallingford Dr. Bldg. 13, Ste. A Austin, TX 78746	
4 IF SOLD [ ] NET GAIN [ ] NET LOSS		

HELD OR ACQUIRED BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
DESCRIPTION	NAME AND ADDRESS [X] (Check if Filer's Home Address) K&LW LLC 4017 Avenue H Austin, TX 78751
IF SOLD [ ] NET GAIN [ ] NET LOSS	

GIFTS

PART 8

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 any person or organization that has given a gift worth more than $470 to you, your spouse, or a dependent child, and describe the gift. The description of a gift of cash or a cash equivalent, such as a negotiable instrument or gift certificate must include a statement of the value of the gift. Do not include: 1) expenditures required to be reported by a person required to be registered as a lobbyist under chapter 305 of the Government Code; 2) political contributions reported as required by law; or 3) gifts given by a person related to the recipient within the second degree by consanguinity or affinity. 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 DONOR	NAME AND ADDRESS Jones, Charlie ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4620 Lake View Dr. Austin, TX 78731	
3 RECIPIENT	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	
4 DESCRIPTION OF GIFT	passes to Austin City Limits Festival	

DONOR	NAME AND ADDRESS Campbell & Levine, LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 310 Grant St. #1700 Pittsburgh, PA 15218
RECIPIENT	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
DESCRIPTION OF GIFT	fruit delivered monthly

GIFTS

PART 8

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 any person or organization that has given a gift worth more than $470 to you, your spouse, or a dependent child, and describe the gift. The description of a gift of cash or a cash equivalent, such as a negotiable instrument or gift certificate must include a statement of the value of the gift. Do not include: 1) expenditures required to be reported by a person required to be registered as a lobbyist under chapter 305 of the Government Code; 2) political contributions reported as required by law; or 3) gifts given by a person related to the recipient within the second degree by consanguinity or affinity. 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 DONOR	NAME AND ADDRESS Suttle, Richard ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2900 Greenlee Austin, TX 78703	
3 RECIPIENT	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
4 DESCRIPTION OF GIFT	tickets to soccer	

DONOR	NAME AND ADDRESS Penn, Walt ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2200 Matthews Dr. Austin, TX 78703
RECIPIENT	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____
DESCRIPTION OF GIFT	steaks

TRUST INCOME

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 $930 in income, if the identity of the asset is known. 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 SOURCE	NAME OF TRUST KEPC Family Trust	
3 BENEFICIARY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
4 INCOME	At least $9,320 but less than $18,630	
5 ASSETS FROM WHICH OVER $500 WAS RECEIVED [ ] UNKNOWN	1401 Bagby #6, Waco, TX	

OWNERSHIP OF BUSINESS ASSOCIATIONS

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 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 5 percent or more of the outstanding ownership. 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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 BUSINESS ASSOCIATION	NAME AND ADDRESS [X] (Check If Filer's Home Address) K&LW, LLC 4017 Avenue H Austin, TX 78751	
3 BUSINESS TYPE	[X] Corporation [ ] Firm [ ] Partnership	[ ] Limited Partnership [ ] Limited Liability Partnership [ ] Professional Corporation
		[ ] Profesional Association [ ] Joint Venture [ ] Other _____
4 HELD, ACQUIRED, OR SOLD BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	

BUSINESS ASSOCIATION	NAME AND ADDRESS [X] (Check If Filer's Home Address) KEPC Trust 4017 Avenue H Austin, TX 78751	
BUSINESS TYPE	[ ] Corporation [ ] Firm [ ] Partnership	[ ] Limited Partnership [ ] Limited Liability Partnership [ ] Professional Corporation
		[ ] Profesional Association [ ] Joint Venture [X] Other _____
HELD, ACQUIRED, OR SOLD BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	

ASSETS OF BUSINESS ASSOCIATIONS

PART 11B

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.

1 FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2 BUSINESS ASSOCIATION	NAME AND ADDRESS [X] (Check If Filer's Home Address) KEPC Trust 4017 Avenue H Austin, TX 78751	
3 BUSINESS TYPE	Other Business Association	
4 HELD, ACQUIRED, OR SOLD BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	
5 ASSETS	DESCRIPTION	CATEGORY
	property in Willow City, TX	At least $46,580 or more
	homestead	At least $46,580 or more
	Two condos in Waco, TX	At least $46,580 or more

BOARDS AND EXECUTIVE POSITIONS

PART 12

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 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.

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.

1	FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2	ORGANIZATION	Frontier Bank of Texas	
3	POSITION HELD	Chair of the Board	
4	POSITION HELD BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	

ORGANIZATION	Frontier Community Bancshares, Inc.
POSITION HELD	Chair of the Board
POSITION HELD BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____

ORGANIZATION	Claims Resolution Mgmt. Corp.
POSITION HELD	Director
POSITION HELD BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____

ORGANIZATION	Manville Personal Injury Settlement Trust
POSITION HELD	Trustee
POSITION HELD BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____

ORGANIZATION	Federal-Mogul Asbestos Personal Injury Trust
POSITION HELD	Managing Trustee
POSITION HELD BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____

BOARDS AND EXECUTIVE POSITIONS

PART 12

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 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.

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.

1	FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2	ORGANIZATION	MLC Asbestos Personal Injury Trust	
3	POSITION HELD	Trustee	
4	POSITION HELD BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____	

	ORGANIZATION	Texas Transportation Institute at Texas A&M
	POSITION HELD	Advisory Board Member
	POSITION HELD BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____

	ORGANIZATION	Burns & Roe Asbestos Personal Injury Trust
	POSITION HELD	Trustee
	POSITION HELD BY	[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____

INTEREST IN BUSINESS IN COMMON WITH LOBBYIST

PART 14

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 corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association, other than a publicly-held corporation, in which you, your spouse, or a dependent child, and a person registered as a lobbyist under chapter 305 of the Government Code that both have an interest. For more information, see FORM PFS--INSTRUCTION GUIDE.

1	FILER INFORMATION	FILER NAME Watson, Kirk	FILER ID 00090869
2	BUSINESS ENTITY	NAME AND ADDRESS Frontier Bank of Texas PO Box 551 Elgin, TX 78621	
3	INTEREST HELD BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	

BUSINESS ENTITY	NAME AND ADDRESS Frontier Community Bancshares, Inc. PO Box 551 Elgin, TX 78621	
INTEREST HELD BY	[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____	

PERSONAL FINANCIAL STATEMENT

PARTS MARKED "NOT APPLICABLE" BY FILER

FORM PFS
COVER SHEET
PAGE 2

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
- [X] N/A Part 1B - Retainers
- [ ] N/A Part 2 - Stock
- [X] 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
- [ ] N/A Part 8 - Gifts
- [ ] N/A Part 9 - Trust Income
- [X] N/A Part 10A - Blind Trusts
- [X] N/A Part 10B - Trustee Statement
- [ ] N/A Part 11A - Business Associations
- [ ] N/A Part 11B - Assets of Business Associations
- [X] N/A Part 11C - Liabilities of Business Associations
- [ ] N/A Part 12 - Boards and Executive Positions
- [X] N/A Part 13 - Expenses Accepted Under Honorarium Exception
- [ ] N/A Part 14 - Interest in Business in Common with Lobbyist
- [X] N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
- [X] N/A Part 16 - Representation by Legislator Before State Agency
- [X] N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
- [X] N/A Part 18 - Legislative Continuances
- [X] N/A Part 19 - Contracts with Governmental Entity
- [X] N/A Part 20 - Bond Counsel Services Provided by a Legislator

PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verified. Without proper verification, the statement is not considered filed.

The verification page on a personal statement filed electronically with the Texas Ethics Commission must have the electronic signature of the individual required to file the personal financial statement.

The verification page on a personal financial statement filed with an authority other than the Texas Ethics Commission must have the signature of the individual required to file the personal financial statement as wells as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations.

I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2021 , and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

Kirk Watson

Signature of Filer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of_____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath