Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Form Approved: OMB No. 3209 - 0001

OGE Use Only	(Check box if comments are continued on the reverse side)	(Check box if comments are o		
Agency Use Only				
or riming.	cate number of days)	(Check box if filing extension granted & indicate number of days		
the preceding two calendar years and the current calendar year up to the date		quired, use the reverse side of this sheet)	If additional space is re	Comments of Reviewing Officials (If additional space is required,
arrangements as of the date of filing. Schedule D-The reporting period is				Use Only
Schedule C, Part II (Agreements or Arrangements)—Show any agreements or	Date (Month, Day, Year)		Signature	Office of Government Ethics
year and the current caterinar year up to any date you choose that is within 31 days of the date of filing.				On the basis of information contained in this report, I conclude that the filer is in compliance with applicable laws and regulations (subject to any comments in the box below).
reporting period is the preceding calendar	Date (Month, Day, Year)	Signature of Designated Agency Ethics Official/Reviewing Official	Signature of Designat	Agency Ethics Official's Opinion
Schedule B-Not applicable.				(If desired by agency)
as of any date you choose that is within 31 days of the date of filing.	Date (Month, Day, Year)	viewer	Signature of Other Reviewer	Other Review
Schedule A-The reporting period for income (BLOCK C) is the preceding calendar year and the current calendar year up to the date of filing. Value assets	7/7/15	Tem	James	I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge.
Vice President:	Date (Month, Day, Year)	ndividual	Signature of Reporting Individual	Certification
Nominees, New Entrants and Candidates for President and	3	Yes	Not Applicable	to Senate Confirmation
Schedule D is not applicable.	Do You Intend to Create a Qualified Diversified Trust?	Name of Congressional Committee Considering Nomination Do You Intend to Cru	Name of Congressiona	Presidential Nominees Subject
Termination Filers: The reporting period begins at the end of the period covered by your previous filing and ends at the date of termination. Part II of			A A COMPANY OF A C	Position(s) Held with the Federal Government During the Preceding 12 Months (If Not Same as Above)
year up to the date you file. Part II of Schedule D is not applicable.	(512) 900-8585		PO BOX 162406 AUSTIN, TX 78716	Present Office (or forwarding address)
II of Schedule C and Part lot Schedule D	Telephone No. (Include Area Code)	, and ZIP Code)	Address (Number, Street, City, State,	Location of
Reporting Periods Incumbents: The reporting period is the preceding colerator year except Part			CANDIDATE FOR PRESIDENT	Filing
to a \$200 ree.	ency (If Applicable)	Department or Agency (If A	Title of Position	,
than 30 days after the last day of the filing extension period, shall be subject	ر ح	JAMES	PERRY	Individual's Name
filed, or, if an extension is granted, more	ddle Initial	First Name and Middle Initi	Last Name	3
Any individual who is required to file this report and does so more than 30 days	Filer (able) (Wonth, Lay, Year)	Covered by Report Nominee, or Candidate	Status (Check Appropriate Boxes)	or Nomination (<i>Month, Day, Year</i>) 06/04/2015
Fee for Late Filing	Termination Termination Date (If Appli-			Date of Appointment, Candidacy, Election,

Report ERRY,	Reporting Individual's Name PERRY, JAMES R											S	Ω	SCHEDULE	U		H	>														2 of 7	
	Assets and Income	and the second s	0)	t C. V	alı	uat	rej	Valuation of Assets at close of reporting period	ting	pe	rio	ď					CI	Income: type and amount. If "None checked, no other entry is needed in	ed ed	, pc	pe	an	d a	Ty Bo	is	nee	de,"N	one d ir		r le	C I	Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.	"is
	BLOCK A	-				H.	ві.оск в	K B																BLC	BLOCK C	C							
or you eport (For you, your spouse, and dependent children, report each asset held for investment or the production of income which had a fair market the exceeding \$1,000 at the close of the report-			7.							0	00		nd				Туре	pe								B	Amount				:	
product value ex ing peri in incom with suc	production of income which had a fair market value exceeding \$1,000 at the close of the reporting period, or which generated more than \$200 in income during the reporting period, together with such income.	and the second second second second second second							*		5,000,000	50,000,000	00	nent Fund				es			an \$201))		Date (Mo., Day, Yr.)
For yourself, amount of ear than from the report the sou income of mo actual amour your spouse).	For yourself, also report the source and actual amount of earned income exceeding \$200 (other than from the U.S. Government). For your spouse, report the source but not the amount of earned income of more than \$1,000 (except report the actual amount of any honoraria over \$200 of your spouse).	one (or less tha	,001 - \$15,000	5,001 - \$50,00	0,001 - \$100,0	00,001 - \$250,	50,001 - \$500,	500,001 - \$1,00	ver \$1,000,000	,000,001 - \$5,0	,000,001 - \$25	25,000,001 - \$5	ver \$50,000,00	cepted Investm	cepted Trust	ualified Trust	vidends	ent and Royalti	terest	pital Gains	one (or less tha	201 - \$1,000	,001 - \$2,500	2,501 - \$5,000	5,001 - \$15,000	15,001 - \$50,00	50,001 - \$100,0	00,001 - \$1,00	ver \$1,000,000	1,000,001 - \$5,	ver \$5,000,000	Type & Actual Amount)	Only if Honoraria
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Examples	Doe Jones & Smith, Hometown, State			· ×																1							l	l	! 	<u> </u>		Law Partnership Income \$130,000	
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1 Office Austin	Office of the Governor Austin, TX	14.75.1		51513		1.3.44				1.7																				- 3: 1	/0.12	Salary \$133,215.36	
2 Employ Austin,	Employees Retirement System of Texas Austin, TX	31843	-	214						:																					40 = -	Retirement Income \$130,882.32	
3 Holt 7	Holt Texas, Ltd. San Antonio, TX (Through ARP Holdings SMLLC)																														40 = -	Consulting Income \$250,000	
4 Texa (Spoi	Texas Association Against Sexual Assault (Spouse) Austin, TX	or the second second second				٠.																									10 = =	Consulting Income \$92,083.33	
5 DBAI	DBAB Cash Reserve Prime Series (ARP Holdings SMLLC)	. 1 : 1		42.74			×	. , ,						X			×				X												
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by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.

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ע _	Reporting Individual's Name PERRY, JAMES R										S		SCHEDULE (Use only	C D	e C		Y 1.	A if n	ee (C)	EDULE A conti (Use only if needed)		Ħ	continued eeded)												Page	Page Number 4 of 7	
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4	Enterprise Products Partners, LP (Spouse)	N 19 A 20	(15054)	×	Pata st		700		- Will		1.47					×						1		×	1 .								11.7	B (8)			
S	Microsoft, Houston, TX								17.44																				,							Honorarium \$24,000 04	04/22/2015
6	Asian American Hotel Owners Association, Long Beach, CA												4												12											Honorarium 02	04/23/2015
7	Ashland University, Ashland, OH	27.00	300434		11111111						1,74											.2														Honorarium 02	04/30/2015
8	QR Energy, LP		- 14141		×				1,141		127.3			- 1		×		11		×		1.50				×							-				
9	Rent House 523 Larkwood, San Antonio, TX		2				X				;																						<u> </u>	_		\$17,007 Rent to Relative	
	* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.	me is hildr	solo en,	maı	hat k t	of the c	the	file r hi	ghe	r ca	ise o	or d orie	lepe s of	nde val	ue,	as a	drei	n. I	f the	as	set/	'inc	ome	is	eith	er t	hat	of t	he f	ler	or j	oini	ily I	held			

OGE Form 278 (Rev. 12/2011)
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Do not complete Schedule B if you are a new entrant, nominee, or Vice Presidential or Presidential Candidate

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		Leather briefcase (personal friend)	Frank Jones, San Francisco, CA	
99 (personal activity unrelated to duty)	d conference 6/15/99 (per	Airline ticket, hotel room & meals incident to national conference 6/15/	Nat'l Assn. of Rock Collectors, NY, NY	
	Brief Description		Source (Name and Address)	
the U.S. Government; given to your agency in connection with official travel; received from relatives; received by your spouse or dependent child totally independent of their relationship to you; or provided as personal hospitality at the donor's residence. Also, for purposes of aggregating gifts to determine the total value from one source, exclude items worth \$140 or less. See instructions for other exclusions.	the U.S. Government; given the U.S. Government; given the received from relatives; received from relations independent of their relations the donor's residence. Also, for the value from one source, of for other exclusions.	rry,	For you, your spouse and dependent children, report the source, a brief description, and the value of: (1) gifts (such as tangible items, transportation, lodging, food, or entertainment) received from one source totaling more than \$350 and (2) travel-related cash reimbursements received from one source totaling more than \$350. For conflicts analysis, it is helpful to indicate a basis for receipt, such as personal friend, agency approval under 5 U.S.C. § 4111 or other statutory authority, etc. For travel-related gifts and reimbursements, include travel itinerary, dates, and the nature of expenses provided. Exclude anything given to you by	
	S	ents, and Travel Expenses	Part II: Gifts, Reimbursements,	THE PERSON NAMED IN
is either held late.	n. If the underlying assenties of value, as approp	lely that of the filer's spouse or dependent childrer or dependent children, use the other higher catego	*This category applies only if the underlying asset is solely that of the filer's spouse or dependent children. If the underlying asset is either held by the filer or jointly held by the filer with the spouse or dependent children, use the other higher categories of value, as appropriate.	A AND THE CONTRACT OF
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Amount of Transaction	Transaction Type (x)	residence, or a transaction solely between vou. vour spouse, or dependent child.	my	ACTION AND ADDRESS.
	None	Do not report a transaction involving property used solely as your personal	Part I: Transactions Report any purchase, sale, or exchange by you, your spouse, or dependent D	Marie Area - William Constitution
	ULE B	SCHEDULE	Reporting Individual's Name PERRY, JAMES R	
			U.S. Office of Government Ethics	5

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					Employees Retirement System of Texas - Pension	Pursuant to partnership agreement, calculated on service performed thr	Status and To	Part II: Agreements or Report your agreements or arrangement employee benefit plan (e.g. pension, 401 tion of payment by a former employer (tegory applies only if the liability is souse or dependent children, mar					Benchmark Mortgage	John Jones, Washington, DC	First District Bank, Washington, DC	Creditors (Name and Address)	during the reporting period by you, your spouse, or dependent children. Check the highest amount owed during the reporting period. Exclude	Report liabilities over \$10,000 owed to any one creditor at any time	Part I: Liabilities	PERRY, JAMES R	Reporting Individual's Name	U.S. Office of Government Ethics
						Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through 1/00.	Status and Terms of any Agreement or Arrangement	Part II: Agreements or Arrangements Report your agreements or arrangements for: (1) continuing participation in an employee benefit plan (e.g. pension, 401k, deferred compensation); (2) continua- tion of payment by a former employer (including severance payments); (3) leaves	*This category applies only if the liability is solely that of the filer's spouse or dependent children. If the liability is that of the filer or a joint liability of the filer with the spouse or dependent children, mark the other higher categories, as appropriate.	,	i.			Mortgage (secured by 523 Larkwood, San Antonio, TX)	Promissory note	Mortgage on rental property, Delaware	Type of Liability	or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.	unless it is rented out; loans secured by	a mortgage on your personal residence	3(
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						Examples Metro University (client of Doe Jones & Smith), Moneytown, State	Source (Name and Address)	the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any other	Part II: Compensation in Excess of \$5,000 Paid by One Source Report sources of more than \$5,000 compensation received by you or your non-profit organization where the control of the co				ARP Holdings, LLC Austin, TX	J.R. Perry and Company Haskell, TX	State of Texas, Austin, TX - Office of the Governor	Examples Doe Jones & Smith, Hometown, State	Nat'l Assn. of Roc	Organization (Name and Address)	Part I: Positions Held Outside U.S. Governmen Report any positions held during the applicable reporting period, whether compensated or not. Positions include but are not limited to those of an officer, director, trustee, general partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise or any non-profit	PERRY, JAMES R	Reporting Individual's Name	U.S. Office of Government Ethics
						nith), Moneytown, State	Address)	names of clients and customers of business enterprise, or any other	in Excess of \$5,00 npensation received by you or you									ınd Address)	Outside U.S. Government pplicable reporting period, whether compennot limited to those of an officer, director, presentative, employee, or consultant of other business enterprise or any non-profit			
						Legal services in connection with university construction	*		O Paid by One Source non-profit organization when you directly provided the				Single Member LLC	Partnership	State Government	Law firm — — — — — — — — —	Non-profit education	Type of Organization	n t	SCHEDULE D		
						action	Brief Description of Duties	services generating a fee or payment of more than \$5,000. You need not report the U.S. Government as a source.	Do not complete this part if you are an Incumbent, Termination Filer, or Vice Presidential or Presidential Candidate.				Manager	General Partner	Governor	Partner	President	Position Held	organization or educational institution. Exclude positions with religious social, fraternal, or political entities and those solely of an honorary nature.			
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