Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

PERSONAL FINANCIAL STATEMENT

FORM PFS
COVER SHEET

Filed in accordance with chapter 572 of the Government Code. ✓
For filings required in 2013, covering calendar year ending December 31, **2012**.
Use FORM PFS - INSTRUCTION GUIDE when completing this form.

ACCOUNT # 00067723

1 NAME

TITLE, FIRST, MI
Dr. James G.

NICKNAME, LAST, SUFFIX
Greg Bonnen

2 ADDRESS

405 David Street
Friendswood, TX 77546

☒ (CHECK IF FILER'S HOME ADDRESS)

3 TELEPHONE NUMBER

AREA CODE NUMBER; EXTENSION
(281) 922-5099

OFFICE USE ONLY

Date Received

RECEIVED
JUN 28 2013
Texas Ethics Commission

Receipt #
HD PM 6/27 Amount
Legal
Date Processed
PROCESSED JUN 28 2013
Date Imaged

4 REASON FOR FILING STATEMENT

- ☐ CANDIDATE _____ (INDICATE OFFICE)
- ☒ ELECTED OFFICER State Representative, District 24 (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 (filer must report information about the financial activity of the filer's spouse or dependent children if the filer had actual control over that activity):

SPOUSE Kimberly Durst Bonnen

DEPENDENT CHILD 1. _____

2. _____

3. _____

In parts 1 through 18, you will disclose your financial activity during the 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 if you had actual control over that person's financial activity.

30 **COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY** R: 576493

SOURCES OF OCCUPATIONAL INCOME

PART 1A

☐ NOT APPLICABLE

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 INFORMATION RELATES TO	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____
2 EMPLOYMENT ☐ EMPLOYED BY ANOTHER	NAME AND ADDRESS OF EMPLOYER / POSITION HELD ☐ (Check if Filer's Home Address) Texas Brain and Spine Center, P.A. 11914 Astoria Blvd Suite 300 Houston, TX 77089-6048 Owner, President & Practicing Physician
☒ SELF-EMPLOYED	NATURE OF OCCUPATION neurosurgery

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

STOCK

PART 2

☐ NOT APPLICABLE

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 BUSINESS ENTITY	NAME: iShares MSCI Australia Index
2 STOCK HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
3 NUMBER OF SHARES	☐ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☒ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
4 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

BUSINESS ENTITY	NAME: iShares MSCI Hong Kong Index
STOCK HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
NUMBER OF SHARES	☐ LESS THAN 100 ☒ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

BUSINESS ENTITY	NAME: iShares MSCI Switzerland Index
STOCK HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
NUMBER OF SHARES	☐ LESS THAN 100 ☐ 100 TO 499 ☒ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

BUSINESS ENTITY	NAME: iShares MSCI UK Index
STOCK HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
NUMBER OF SHARES	☐ LESS THAN 100 ☒ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

BUSINESS ENTITY	NAME: iShares MSCI UK Index
STOCK HELD OR ACQUIRED BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
NUMBER OF SHARES	☐ LESS THAN 100 ☐ 100 TO 499 ☒ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

STOCK

PART 2

☐ NOT APPLICABLE

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.

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1 BUSINESS ENTITY	NAME: iShares MSCI Hong Kong Index (held by Bonnen Family, L.P.)
2 STOCK HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
3 NUMBER OF SHARES	☐ LESS THAN 100 ☐ 100 TO 499 ☒ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
4 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

BUSINESS ENTITY	NAME: iShares MSCI Singapore Index (held by Bonnen Family, L.P.)
STOCK HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
NUMBER OF SHARES	☐ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☒ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

BUSINESS ENTITY	NAME: iShares MSCI Taiwan Index (held by Bonnen Family, L.P.)
STOCK HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
NUMBER OF SHARES	☐ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☒ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

BUSINESS ENTITY	NAME: iShares MSCI UK Index (held by Bonnen Family, L.P.)
STOCK HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
NUMBER OF SHARES	☐ LESS THAN 100 ☐ 100 TO 499 ☒ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

BUSINESS ENTITY	NAME: iShares Comex Gold Trust (held by Bonnen Family, L.P.)
STOCK HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
NUMBER OF SHARES	☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☐ NET GAIN ☒ NET LOSS	☒ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

STOCK

PART 2

☐ NOT APPLICABLE

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.

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1 BUSINESS ENTITY	NAME: iShares MSCI Thailand Index
2 STOCK HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
3 NUMBER OF SHARES	☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
4 IF SOLD ☒ NET GAIN ☐ NET LOSS	☒ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

BUSINESS ENTITY	NAME: iShares MSCI Thailand Index
STOCK HELD OR ACQUIRED BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
NUMBER OF SHARES	☐ LESS THAN 100 ☒ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☒ NET GAIN ☐ NET LOSS	☒ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

BUSINESS ENTITY	NAME: iShares Comex Gold Trust
STOCK HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
NUMBER OF SHARES	☐ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☒ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☒ NET GAIN ☐ NET LOSS	☒ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

BUSINESS ENTITY	NAME: iShares Comex Gold Trust
STOCK HELD OR ACQUIRED BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
NUMBER OF SHARES	☐ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☒ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☒ NET GAIN ☐ NET LOSS	☒ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

BUSINESS ENTITY	NAME: iShares Barclays 1-3 Yr Treas (held by Bonnen Family, L.P.)
STOCK HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
NUMBER OF SHARES	☐ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☒ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☒ NET GAIN ☐ NET LOSS	☒ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

STOCK

PART 2

☐ NOT APPLICABLE

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.

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1 BUSINESS ENTITY	NAME: iShares MSCI ACWI Index (held by Bonnen Family, L.P.)
2 STOCK HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
3 NUMBER OF SHARES	☐ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☒ 5,000 TO 9,999 ☐ 10,000 OR MORE
4 IF SOLD ☒ NET GAIN ☐ NET LOSS	☒ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

BUSINESS ENTITY	NAME: iShares MSCI Thailand Index (held by Bonnen Family, L.P.)
STOCK HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
NUMBER OF SHARES	☐ LESS THAN 100 ☒ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☒ NET GAIN ☐ NET LOSS	☒ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

BUSINESS ENTITY	NAME: Heritage Bancorp
STOCK HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
NUMBER OF SHARES	☐ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☒ 10,000 OR MORE
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

BUSINESS ENTITY	NAME: Verizon
STOCK HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
NUMBER OF SHARES	☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☐ NET GAIN ☒ NET LOSS	☒ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

BUSINESS ENTITY	NAME: Frontier
STOCK HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
NUMBER OF SHARES	☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
IF SOLD ☐ NET GAIN ☒ NET LOSS	☒ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

STOCK

PART 2

☐ NOT APPLICABLE

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.

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1 BUSINESS ENTITY	NAME	Security State Bank & Trust
2 STOCK HELD OR ACQUIRED BY	☐ FILER	☒ SPOUSE ☐ DEPENDENT CHILD ____
3 NUMBER OF SHARES	☐ LESS THAN 100	☒ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999
	☐ 5,000 TO 9,999	☐ 10,000 OR MORE
4 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000	☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

MUTUAL FUNDS

PART 4

☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE
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 MUTUAL FUND	NAME JPMorgan Inflation Mgd Bond
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
3 NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☒ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
4 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

MUTUAL FUND	NAME JPMorgan Strat Income Oppor
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	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

MUTUAL FUND	NAME PIMCO Commodities PLUS
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	☒ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

MUTUAL FUNDS

PART 4

☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE
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1 MUTUAL FUND	NAME JPMorgan Strat Income Oppor
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
3 NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100 ☒ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
4 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

MUTUAL FUND	NAME Fidelity Cash Reserves
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	☒ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

MUTUAL FUND	NAME Fidelity Cash Reserves
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	☒ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

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MUTUAL FUNDS

PART 4

☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE
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1 MUTUAL FUND	NAME Texas Brain and Spine Center, P.A. Profit Sharing Plan (Plan is managed on a consolidated basis for all employees. Greg holds around 85% of the total balance.)
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
3 NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☒ 10,000 OR MORE
4 IF SOLD ☒ NET GAIN ☐ NET LOSS	☒ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

MUTUAL FUND	NAME Allianz NFJ Dividend Value (held by Bonnen Family, L.P.)
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	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

MUTUAL FUND	NAME Edgewood Growth Instl (held by Bonnen Family, L.P.)
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	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

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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 information, see FORM PFS--INSTRUCTION GUIDE
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1 MUTUAL FUND	NAME Wasatch Small Cap Growth (held by Bonnen Family, L.P.)
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
3 NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100 ☐ 100 TO 499 ☒ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
4 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

MUTUAL FUND	NAME American EuroPacific Gr F-2 (held by Bonnen Family, L.P.)
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	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

MUTUAL FUND	NAME Lord Abbett Intl Dividend I (held by Bonnen Family, L.P.)
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	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

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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 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 MUTUAL FUND	NAME RS Emerging Markets Instl (held by Bonnen Family, L.P.)
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
3 NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☒ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☐ 10,000 OR MORE
4 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

MUTUAL FUND	NAME Touchstone Emerg Mkts Y (held by Bonnen Family, L.P.)
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	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

MUTUAL FUND	NAME JPMorgan Inflation Mgd Bond (held by Bonnen Family, L.P.)
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	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

MUTUAL FUNDS

PART 4

☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE
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 MUTUAL FUND	NAME JPMorgan Strat Income Oppor (held by Bonnen Family, L.P.)
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
3 NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 TO 9,999 ☒ 10,000 OR MORE
4 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

MUTUAL FUND	NAME Loomis Sayles Bond Instl (held by Bonnen Family, L.P.)
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	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

MUTUAL FUND	NAME PIMCO Total Return Instl (held by Bonnen Family, L.P.)
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	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

MUTUAL FUNDS

PART 4

☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE
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 MUTUAL FUND	NAME PIMCO Commodities PLUS (held by Bonnen Family, L.P.)
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
3 NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☒ 5,000 TO 9,999 ☐ 10,000 OR MORE
4 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

MUTUAL FUND	NAME PIMCO Commodity Real Return (held by Bonnen Family, L.P.)
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	☒ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

MUTUAL FUND	NAME Fidelity Municipal MM (held by Bonnen Family, L.P.)
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	☒ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

☐ NOT APPLICABLE

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

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 SOURCE OF INCOME	NAME AND ADDRESS National Financial Services LLC (to Bonnen Family, L.P.) 499 Washington Blvd Jersey City, NJ 07310
2 RECEIVED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
3 AMOUNT	☐ $500 - $4,999 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☒ $25,000--OR MORE

SOURCE OF INCOME	NAME AND ADDRESS Texas Brain and Spine Center, P.A. 11914 Astoria Blvd Suite 300 Houston, TX 77089-3048
RECEIVED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
AMOUNT	☒ $500 - $4,999 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

SOURCE OF INCOME	NAME AND ADDRESS M. Durst Company 3501 Jung Lane Fredericksburg, TX 78624
RECEIVED BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
AMOUNT	☐ $500 - $4,999 ☐ $5,000 - $9,999 ☒ $10,000 - $24,999 ☐ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

☐ NOT APPLICABLE

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

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 SOURCE OF INCOME	NAME AND ADDRESS Bonnen Investments, L.P. 405 David Street Friendswood, TX 77546
2 RECEIVED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
3 AMOUNT	☐ $500 - $4,999 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☒ $25,000--OR MORE

SOURCE OF INCOME	NAME AND ADDRESS National Financial Services LLC P.O. Box 145438 Cincinnati, OH 45250-5438
RECEIVED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
AMOUNT	☒ $500 - $4,999 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

SOURCE OF INCOME	NAME AND ADDRESS National Financial Services LLC P.O. Box 145438 Cincinnati, OH 45250-5438
RECEIVED BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
AMOUNT	☒ $500 - $4,999 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

☐ NOT APPLICABLE

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

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 SOURCE OF INCOME	NAME AND ADDRESS Security Holding Company 201 W. Main Street Fredericksburg, TX 78624
2 RECEIVED BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
3 AMOUNT	☐ $500 - $4,999 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☒ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN REAL PROPERTY

PART 7A

☐ NOT APPLICABLE

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 HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
2 STREET ADDRESS ☐ NOT AVAILABLE ☒ CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY AND STATE 405 David Street Friendswood, TX 77546 Galveston
3 DESCRIPTION ☒ LOTS ☐ ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1 lot Galveston
4 NAMES OF PERSONS RETAINING AN INTEREST ☐ NOT APPLICABLE (SEVERED MINERAL INTEREST)	Wells Fargo Home Mortgage
5 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN BUSINESS ENTITIES

PART 7B

☐ NOT APPLICABLE

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 HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
2 DESCRIPTION	NAME AND ADDRESS ☒ (check if Filer's Home Address) Bonnen Holdings, L.L.C. 405 David Street Friendswood, TX 77546
3 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

HELD OR ACQUIRED BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
DESCRIPTION	NAME AND ADDRESS ☒ (check if Filer's Home Address) Bonnen Family, L.P. 405 David Street Friendswood, TX 77546
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
DESCRIPTION	NAME AND ADDRESS ☒ (check if Filer's Home Address) Bonnen Investments, L.P. 405 David Street Friendswood, TX 77546
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN BUSINESS ENTITIES

PART 7B

☐ NOT APPLICABLE

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 HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
2 DESCRIPTION	NAME AND ADDRESS ☐ (check if Filer's Home Address) Texas Brain and Spine Center, P.A. 11914 Astoria Blvd. Suite 300 Houston, TX 77089
3 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
DESCRIPTION	NAME AND ADDRESS ☐ (check if Filer's Home Address) Sentinel Neurology, P.A. 939 Magdalene Dr. Houston, TX 77024
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
DESCRIPTION	NAME AND ADDRESS ☐ (check if Filer's Home Address) Brazoria County Surgery LLC 1415 North Loop West Suite 1100 Houston, TX 77008
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN BUSINESS ENTITIES

PART 7B

☐ NOT APPLICABLE

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 HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
2 DESCRIPTION	NAME AND ADDRESS ☐ (check if Filer's Home Address) Jamison Medical Complex LLC 1415 North Loop West Suite 1100 Houston, TX 77008
3 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
DESCRIPTION	NAME AND ADDRESS ☐ (check if Filer's Home Address) Chios Management LLC 1 Spreading Oaks Court Angleton, TX 77515
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

HELD OR ACQUIRED BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
DESCRIPTION	NAME AND ADDRESS ☐ (check if Filer's Home Address) K-M Bar 3501 Jung Lane Fredericksburg, TX 78624
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN BUSINESS ENTITIES

PART 7B

☐ NOT APPLICABLE

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 HELD OR ACQUIRED BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
2 DESCRIPTION	NAME AND ADDRESS ☐ (check if Filer's Home Address) Keller Land & Cattle 3501 Jung Lane Fredericksburg, TX 78624
3 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

HELD OR ACQUIRED BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
DESCRIPTION	NAME AND ADDRESS ☐ (check if Filer's Home Address) M. Durst Company 3501 Jung Lane Fredericksburg, TX 78624
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

HELD OR ACQUIRED BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
DESCRIPTION	NAME AND ADDRESS ☐ (check if Filer's Home Address) Security Holding Company 201 W. Main Street Fredericksburg, TX 78624
IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN BUSINESS ENTITIES

PART 7B

☐ NOT APPLICABLE

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 HELD OR ACQUIRED BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
2 DESCRIPTION	NAME AND ADDRESS ☒ (check if Filer's Home Address) Brazoria County Real Estate Partners 405 David Street Friendswood, TX 77546
3 IF SOLD ☐ NET GAIN ☐ NET LOSS	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

ASSETS OF BUSINESS ASSOCIATIONS

PART 11A

☐ NOT APPLICABLE

Describe all assets of each coporation, 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 BUSINESS ASSOCIATION	NAME AND ADDRESS ☒ (Check if Filer's Home Address) Bonnen Family, L.P. 405 David Street Friendswood, TX 77546
2 BUSINESS TYPE	Limited Partnership
3 HELD, ACQUIRED, OR SOLD BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____
4 ASSETS	DESCRIPTION: See listings under: Stocks (Part 2) & Mutual Funds (Part 4) CATEGORY: ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☒ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

ASSETS OF BUSINESS ASSOCIATIONS

PART 11A

☐ NOT APPLICABLE

Describe all assets of each coporation, 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 BUSINESS ASSOCIATION	NAME AND ADDRESS ☐ (Check if Filer's Home Address) Texas Brain and Spine Center, P.A. 11914 Astoria Blvd. Suite 300 Houston, TX 77089
2 BUSINESS TYPE	Professional Association
3 HELD, ACQUIRED, OR SOLD BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____

4 ASSETS	DESCRIPTION	CATEGORY
	Liquid assets	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☒ $25,000--OR MORE
	Personal property fixed assets	☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☒ $25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BOARDS AND EXECUTIVE POSITIONS

PART 12

☐ NOT APPLICABLE

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 ORGANIZATION	Texas Brain & Spine Center, P.A.
2 POSTITION HELD	President
3 POSITION HELD BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
ORGANIZATION	Medical Strategic Network
POSTITION HELD	Treasurer
POSITION HELD BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
ORGANIZATION	Houston Physicians' Hospital
POSTITION HELD	Chairman of the Board
POSITION HELD BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
ORGANIZATION	Bonnen Holdings, L.L.C.
POSTITION HELD	Manager
POSITION HELD BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____
ORGANIZATION	Bonnen Holdings, L.L.C.
POSTITION HELD	Manager
POSITION HELD BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BOARDS AND EXECUTIVE POSITIONS

PART 12

☐ NOT APPLICABLE

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 ORGANIZATION	Bonnen Equities, L.L.C.
2 POSTITION HELD	Manager
3 POSITION HELD BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____

ORGANIZATION	Bonnen Equities, L.L.C.
POSTITION HELD	Manager
POSITION HELD BY	☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____

ORGANIZATION	Heritage Bank
POSTITION HELD	Board member
POSITION HELD BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____

ORGANIZATION	Heritage Bancorp
POSTITION HELD	Board member
POSITION HELD BY	☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ____

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTEREST IN BUSINESS IN COMMON WITH LOBBYIST

PART 14

☐ NOT APPLICABLE

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 BUSINESS ENTITY	NAME AND ADDRESS Heritage Bancorp 1850 Pearland Parkway Pearland, TX 78701
2 INTEREST HELD BY	☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD ____

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

PERSONAL FINANCIAL STATEMENT
PARTS MARKED 'NOT APPLICABLE' BY FILER

Rather than printing a page for each Part the filer checked 'Not Applicable,' this page summarizes whether the 'Not Applicable' checkbox was checked for each Part. If the checkbox is checked next to a Part below, then no pages for that Part should be present in the report. If a checkbox is not checked, then pages for that Part should be present in the report.

- ☐ N/A Part 1A - Sources of Occupational Income
- ☒ N/A Part 1B - Retainers
- ☐ N/A Part 2 - Stock
- ☒ N/A Part 3 - Bonds, Notes & Other Commercial Paper
- ☐ N/A Part 4 - Mutual Funds
- ☐ N/A Part 5 - Income from Interest, Dividends, Royalties & Rents
- ☒ N/A Part 6 - Personal Notes and Lease Agreements
- ☐ N/A Part 7A - Interests in Real Property
- ☐ N/A Part 7B - Interests in Business Entities
- ☒ N/A Part 8 - Gifts
- ☒ N/A Part 9 - Trust Income
- ☒ N/A Part 10A - Blind Trusts
- ☒ N/A Part 10B - Trustee Statement
- ☐ N/A Part 11A - Assets of Business Associations
- ☒ N/A Part 11B - Liabilities of Business Associations
- ☐ N/A Part 12 - Boards and Executive Positions
- ☒ N/A Part 13 - Expenses Accepted Under Honorarium Exception
- ☐ N/A Part 14 - Interest in Business in Common with Lobbyist
- ☒ N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
- ☒ N/A Part 16 - Representation by Legislator Before State Agency
- ☒ N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
- ☒ N/A Part 18 - Legislative Continuances

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

PERSONAL FINANCIAL STATEMENT AFFIDAVIT

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

I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, **2012**, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

Greg Bonnen
Signature of Filer

AFFIX NOTARY STAMP / SEAL ABOVE

SHERRY GOLFARINI NOTARY PUBLIC STATE OF TEXAS EXPIRES 4-30-2016

Sworn to and subscribed before me by Sherry Golfarini this the 27th day of June, 2013, to certify which, witness my hand and seal of office.

Sherry Golfarini Sherry Golfarini

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