

PERSONAL FINANCIAL STATEMENT

FORM PFS COVER SHEET

Filed in accordance with chapter 572 of the Government Code.
For filings required in 2008, covering calendar year ending December 31, 2007.
Use FORM PFS--INSTRUCTION GUIDE when completing this form.

TOTAL NUMBER OF PAGES FILED:

ACCOUNT #

00062309

OFFICE USE ONLY

Date Received

RECEIVED

FEB 14 2008

Texas Ethics Commission

Receipt #

HD / PM

Amount

Date Processed

PROCESSED FEB 15 2008

Date Imaged

1 NAME

TITLE; FIRST; MI

Angie C.

NICKNAME; LAST; SUFFIX

Button

2 ADDRESS

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



6914 Clear Springs Cir.
Garland, TX 75044

(Check if Filer's Home Address)

3 TELEPHONE NUMBER

AREA CODE

PHONE NUMBER; EXTENSION

(214) 801-9725

4 REASON FOR FILING STATEMENT

- CANDIDATE** State House Representative District 112 (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 (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):

Darcy Button

SPOUSE _____

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 if you had actual control over that person's financial activity.

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY R: 365227

45

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	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
2 EMPLOYMENT <input checked="" type="checkbox"/> EMPLOYED BY ANOTHER <input type="checkbox"/> SELF-EMPLOYED	NAME AND ADDRESS OF EMPLOYER / POSITION HELD <input type="checkbox"/> (Check if Filer's Home Address) Texas Instruments Incorporated P.O. Box 650311 Mail Station 3990 Dallas, Texas 75265 Marketing Executive ----- NATURE OF OCCUPATION
INFORMATION RELATES TO	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
EMPLOYMENT <input checked="" type="checkbox"/> EMPLOYED BY ANOTHER <input type="checkbox"/> SELF-EMPLOYED	NAME AND ADDRESS OF EMPLOYER / POSITION HELD <input type="checkbox"/> (Check if Filer's Home Address) Texas Instruments Incorporated P.O. Box 650311 Mail Station 3990 Dallas, Texas 75265 IRS Audit Principal ----- NATURE OF OCCUPATION
INFORMATION RELATES TO	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
EMPLOYMENT <input checked="" type="checkbox"/> EMPLOYED BY ANOTHER <input type="checkbox"/> SELF-EMPLOYED	NAME AND ADDRESS OF EMPLOYER / POSITION HELD <input type="checkbox"/> (Check if Filer's Home Address) DART 1401 Pacific Ave. Dallas, TX 75202 Member of the Board of Directors (pays \$50 per meeting) ----- NATURE OF OCCUPATION

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			
	Texas Instruments ESPP			
2 STOCK HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
3 NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input checked="" type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
4 IF SOLD	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000		
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

BUSINESS ENTITY	NAME			
	Texas Instruments ESPP			
STOCK HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input checked="" type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
IF SOLD	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000		
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

BUSINESS ENTITY	NAME			
	Texas Instruments Executive Stock Options			
STOCK HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input checked="" type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
IF SOLD	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000		
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

BUSINESS ENTITY	NAME			
	Texas Instruments Executive Stock Options			
STOCK HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input checked="" type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
IF SOLD	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000		
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE

BUSINESS ENTITY	NAME			
STOCK HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
IF SOLD	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000		
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$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.

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		
	One World Holding, Inc.		
2 STOCK HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
3 NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input checked="" type="checkbox"/> 10,000 OR MORE
4 IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE
BUSINESS ENTITY	NAME		
	Various Stocks (see attached pages 5, 6, & of 12/31/07 E-Trade Statement)		
STOCK HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE <i>(see attached)</i>
IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE <i>(see attached)</i>
BUSINESS ENTITY	NAME		
STOCK HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE
BUSINESS ENTITY	NAME		
STOCK HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999 <input checked="" type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE
BUSINESS ENTITY	NAME		
STOCK HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$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.

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		
	Texas Instruments 401(k) TI Stock Units		
2 STOCK HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
3 NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input checked="" type="checkbox"/> 10,000 OR MORE
4 IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
BUSINESS ENTITY	NAME		
	Texas Instruments 401(k) TI Stock Units		
STOCK HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input checked="" type="checkbox"/> 5,000 TO 9,999 <input checked="" type="checkbox"/> 10,000 OR MORE
IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
BUSINESS ENTITY	NAME		
	Various Stock Sales		
STOCK HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
BUSINESS ENTITY	NAME		
	Incyte Corporation Com		
STOCK HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100	<input checked="" type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999 <input checked="" type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
BUSINESS ENTITY	NAME		
	Incyte Corporation Com		
STOCK HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100	<input checked="" type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BONDS, NOTES & OTHER COMMERCIAL PAPER

PART 3

NOT APPLICABLE

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

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 DESCRIPTION OF INSTRUMENT	
2 HELD OR ACQUIRED BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
DESCRIPTION OF INSTRUMENT	
HELD OR ACQUIRED BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
DESCRIPTION OF INSTRUMENT	
HELD OR ACQUIRED BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$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 Vanguard U.S. Growth Fund Admiral Shares			
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
3 NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input checked="" type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
4 IF SOLD	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000		
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> \$5,000-\$9,999	<input type="checkbox"/> \$10,000-\$24,999	<input type="checkbox"/> \$25,000-OR MORE
MUTUAL FUND	NAME Vanguard Emerging Markets Stock Index Fund Admiral Shares			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input checked="" type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
IF SOLD	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000		
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> \$5,000-\$9,999	<input type="checkbox"/> \$10,000-\$24,999	<input type="checkbox"/> \$25,000-OR MORE
MUTUAL FUND	NAME			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
IF SOLD	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000		
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> \$5,000-\$9,999	<input type="checkbox"/> \$10,000-\$24,999	<input type="checkbox"/> \$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 Various from E-Trade Account (see attached Form 1099)
2 RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 AMOUNT	<input type="checkbox"/> \$500-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input checked="" type="checkbox"/> \$25,000-OR MORE
SOURCE OF INCOME	NAME AND ADDRESS Various from TD Ameritrade Account (see attached Form 1099)
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
AMOUNT	<input type="checkbox"/> \$500-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input checked="" type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE
SOURCE OF INCOME	NAME AND ADDRESS E-Trade Bank
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
AMOUNT	<input checked="" type="checkbox"/> \$500-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$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	<small>NAME AND ADDRESS</small> Vanguard U.S. Growth Fund Admiral Shares
2 RECEIVED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 AMOUNT	<input checked="" type="checkbox"/> \$500-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE

SOURCE OF INCOME	<small>NAME AND ADDRESS</small> Vanguard Emerging Markets Stock Index Fund Admiral Shares
RECEIVED BY	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
AMOUNT	<input checked="" type="checkbox"/> \$500-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE

SOURCE OF INCOME	<small>NAME AND ADDRESS</small>
RECEIVED BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
AMOUNT	<input type="checkbox"/> \$500-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$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 Texas Instruments ESPP
2 RECEIVED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 AMOUNT	<input checked="" type="checkbox"/> \$500-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE
SOURCE OF INCOME	NAME AND ADDRESS Texas Instruments ESPP
RECEIVED BY	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
AMOUNT	<input checked="" type="checkbox"/> \$500-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE
SOURCE OF INCOME	NAME AND ADDRESS
RECEIVED BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
AMOUNT	<input type="checkbox"/> \$500-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$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 Texas Instruments 401(k) TI Stock Units
² RECEIVED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
³ AMOUNT	<input type="checkbox"/> \$500-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input checked="" type="checkbox"/> \$25,000-OR MORE
SOURCE OF INCOME	NAME AND ADDRESS Texas Instruments 401(k) TI Stock Units
RECEIVED BY	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
AMOUNT	<input type="checkbox"/> \$500-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input checked="" type="checkbox"/> \$25,000-OR MORE
SOURCE OF INCOME	NAME AND ADDRESS
RECEIVED BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
AMOUNT	<input type="checkbox"/> \$500-\$4,999 <input type="checkbox"/> \$5,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

PERSONAL NOTES AND LEASE AGREEMENTS

PART 6

NOT APPLICABLE

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

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 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	
2 LIABILITY OF	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 GUARANTOR	
4 AMOUNT	<input type="checkbox"/> \$1,000--\$4,999 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	
LIABILITY OF	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
GUARANTOR	
AMOUNT	<input type="checkbox"/> \$1,000--\$4,999 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	
LIABILITY OF	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
GUARANTOR	
AMOUNT	<input type="checkbox"/> \$1,000--\$4,999 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$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	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
2 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input checked="" type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 6914 Clear Springs Cir., Garland, Dallas County, Texas
3 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED One lot
4 NAMES OF PERSONS RETAINING AN INTEREST <input checked="" type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)	
5 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

HELD OR ACQUIRED BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE
DESCRIPTION <input type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED
NAMES OF PERSONS RETAINING AN INTEREST <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)	
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN BUSINESS ENTITIES

PART 7B

NOTAPPLICABLE

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	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
2 DESCRIPTION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address)
3 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
HELD OR ACQUIRED BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
DESCRIPTION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address)
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
HELD OR ACQUIRED BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
DESCRIPTION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address)
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

GIFTS

PART 8

NOT APPLICABLE

Identify any person or organization that has given a gift *worth more than \$250* 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 DONOR	NAME AND ADDRESS
² RECIPIENT	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
³ DESCRIPTION OF GIFT	
DONOR	NAME AND ADDRESS
RECIPIENT	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
DESCRIPTION OF GIFT	
DONOR	NAME AND ADDRESS
RECIPIENT	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
DESCRIPTION OF GIFT	

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

TRUST INCOME

PART 9

NOTAPPLICABLE

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

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	NAME OF TRUST
2 BENEFICIARY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 INCOME	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
4 ASSETS FROM WHICH OVER \$500 WAS RECEIVED	<input type="checkbox"/> UNKNOWN
SOURCE	NAME OF TRUST
BENEFICIARY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
INCOME	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED	<input type="checkbox"/> UNKNOWN
SOURCE	NAME OF TRUST
BENEFICIARY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
INCOME	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED	<input type="checkbox"/> UNKNOWN

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BLIND TRUSTS

PART 10A

NOTAPPLICABLE

Identify each blind trust that complies with section 572.023(c) of the Government Code. 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 NAME OF TRUST	
2 TRUSTEE	NAME AND ADDRESS
3 BENEFICIARY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
4 FAIR MARKET VALUE	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
5 DATE CREATED	

NAME OF TRUST	
TRUSTEE	NAME AND ADDRESS
BENEFICIARY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
FAIR MARKET VALUE	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
DATE CREATED	

NAME OF TRUST	
TRUSTEE	NAME AND ADDRESS
BENEFICIARY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
FAIR MARKET VALUE	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
DATE CREATED	

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

TRUSTEE STATEMENT**PART 10B**
 NOTAPPLICABLE

An individual who is required to identify a blind trust on Part 10A of the Personal Financial Statement must submit a statement signed by the trustee of each blind trust listed on Part 10A. The portions of section 572.023 of the Government Code that relate to blind trusts are listed below.

1 NAME OF TRUST	
2 TRUSTEE NAME	
3 FILER ON WHOSE BEHALF STATEMENT IS BEING FILED	NAME
4 TRUSTEE STATEMENT	<p>I affirm, under penalty of perjury, that I have not revealed any information to the beneficiary of this trust except information that may be disclosed under section 572.023 (b)(8) of the Government Code and that to the best of my knowledge, the trust complies with section 572.023 of the Government Code.</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Trustee Signature</p>

§ 572.023. Contents of Financial Statement in General

(b) The account of financial activity consists of:

(8) identification of the source and the category of the amount of all income received as beneficiary of a trust, other than a blind trust that complies with Subsection (c), and identification of each trust asset, if known to the beneficiary, from which income was received by the beneficiary in excess of \$500;

(14) identification of each blind trust that complies with Subsection (c), including:

(A) the category of the fair market value of the trust;

(B) the date the trust was created;

(C) the name and address of the trustee; and

(D) a statement signed by the trustee, under penalty of perjury, stating that:

(i) the trustee has not revealed any information to the individual, except information that may be disclosed under Subdivision (8); and

(ii) to the best of the trustee's knowledge, the trust complies with this section.

(c) For purposes of Subsections (b)(8) and (14), a blind trust is a trust as to which:

(1) the trustee:

(A) is a disinterested party;

(B) is not the individual;

(C) is not required to register as a lobbyist under Chapter 305;

(D) is not a public officer or public employee; and

(E) was not appointed to public office by the individual or by a public officer or public employee the individual supervises; and

(2) the trustee has complete discretion to manage the trust, including the power to dispose of and acquire trust assets without consulting or notifying the individual.

(d) If a blind trust under Subsection (c) is revoked while the individual is subject to this subchapter, the individual must file an amendment to the individual's most recent financial statement, disclosing the date of revocation and the previously unreported value by category of each asset and the income derived from each asset.

ASSETS OF BUSINESS ASSOCIATIONS

PART 11A

NOT APPLICABLE

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 BUSINESS ASSOCIATION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address)	
2 BUSINESS TYPE		
3 HELD, ACQUIRED, OR SOLD BY	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE
4 ASSETS	DESCRIPTION	CATEGORY
		<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999
		<input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
		<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999
		<input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
		<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999
		<input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
		<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999
		<input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
		<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999
		<input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
		<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999
	<input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE	

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

LIABILITIES OF BUSINESS ASSOCIATIONS

PART 11B

NOT APPLICABLE

Describe all liabilities 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 BUSINESS ASSOCIATION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address)																															
2 BUSINESS TYPE																																
3 HELD, ACQUIRED, OR SOLD BY	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE																														
4 LIABILITIES	DESCRIPTION	<table border="1"> <thead> <tr> <th colspan="2">CATEGORY</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> LESS THAN \$5,000</td> <td><input type="checkbox"/> \$5,000--\$9,999</td> </tr> <tr> <td><input type="checkbox"/> \$10,000--\$24,999</td> <td><input type="checkbox"/> \$25,000--OR MORE</td> </tr> <tr> <td><input type="checkbox"/> LESS THAN \$5,000</td> <td><input type="checkbox"/> \$5,000--\$9,999</td> </tr> <tr> <td><input type="checkbox"/> \$10,000--\$24,999</td> <td><input type="checkbox"/> \$25,000--OR MORE</td> </tr> <tr> <td><input type="checkbox"/> LESS THAN \$5,000</td> <td><input type="checkbox"/> \$5,000--\$9,999</td> </tr> <tr> <td><input type="checkbox"/> \$10,000--\$24,999</td> <td><input type="checkbox"/> \$25,000--OR MORE</td> </tr> <tr> <td><input type="checkbox"/> LESS THAN \$5,000</td> <td><input type="checkbox"/> \$5,000--\$9,999</td> </tr> <tr> <td><input type="checkbox"/> \$10,000--\$24,999</td> <td><input type="checkbox"/> \$25,000--OR MORE</td> </tr> <tr> <td><input type="checkbox"/> LESS THAN \$5,000</td> <td><input type="checkbox"/> \$5,000--\$9,999</td> </tr> <tr> <td><input type="checkbox"/> \$10,000--\$24,999</td> <td><input type="checkbox"/> \$25,000--OR MORE</td> </tr> <tr> <td><input type="checkbox"/> LESS THAN \$5,000</td> <td><input type="checkbox"/> \$5,000--\$9,999</td> </tr> <tr> <td><input type="checkbox"/> \$10,000--\$24,999</td> <td><input type="checkbox"/> \$25,000--OR MORE</td> </tr> <tr> <td><input type="checkbox"/> LESS THAN \$5,000</td> <td><input type="checkbox"/> \$5,000--\$9,999</td> </tr> <tr> <td><input type="checkbox"/> \$10,000--\$24,999</td> <td><input type="checkbox"/> \$25,000--OR MORE</td> </tr> </tbody> </table>	CATEGORY		<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999	<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE
CATEGORY																																
<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999																															
<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE																															
<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999																															
<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE																															
<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999																															
<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE																															
<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999																															
<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE																															
<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999																															
<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE																															
<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999																															
<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$25,000--OR MORE																															
<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000--\$9,999																															
<input type="checkbox"/> \$10,000--\$24,999	<input type="checkbox"/> \$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	Dallas Area Rapid Transit (DART)
² POSITION HELD	Member of the Board of Directors
³ POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION	Dallas Regional Mobility Coalition
POSITION HELD	Executive Committee Member
POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION	DFW Asian-American Citizens Council
POSITION HELD	Chair Emeritus
POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION	Greater Dallas Asian American Chamber of Commerce
POSITION HELD	Past Chair
POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
ORGANIZATION	
POSITION HELD	
POSITION HELD BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION

PART 13

NOT APPLICABLE

Identify any person who provided you with necessary transportation, meals, or lodging, as permitted under section 36.07(b) of the Penal Code, in connection with a conference or similar event in which you rendered services, such as addressing an audience or participating in a seminar, that were more than perfunctory. Also provide the amount of the expenditures on transportation, meals, or lodging. You are not required to include items you have already reported as political contributions on a campaign finance report, or expenditures required to be reported by a lobbyist under the lobby law (chapter 305 of the Government Code). For more information, see FORM PFS-INSTRUCTION GUIDE.

1 PROVIDER	NAME AND ADDRESS
2 AMOUNT	
PROVIDER	NAME AND ADDRESS
AMOUNT	
PROVIDER	NAME AND ADDRESS
AMOUNT	
PROVIDER	NAME AND ADDRESS
AMOUNT	

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
2 INTEREST HELD BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
BUSINESS ENTITY	NAME AND ADDRESS
INTEREST HELD BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
BUSINESS ENTITY	NAME AND ADDRESS
INTEREST HELD BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
BUSINESS ENTITY	NAME AND ADDRESS
INTEREST HELD BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
BUSINESS ENTITY	NAME AND ADDRESS
INTEREST HELD BY	<input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

FEES RECEIVED FOR SERVICES RENDERED TO A LOBBYIST OR LOBBYIST'S EMPLOYER

PART 15

NOT APPLICABLE

Report any fee you received for providing services to or on behalf of a person required to be registered as a lobbyist under chapter 305 of the Government Code, or for providing services to or on behalf of a person you actually know directly compensates or reimburses a person required to be registered as a lobbyist. Report the name of each person or entity for which the services were provided, and indicate the category of the amount of each fee. For more information, see FORM PFS-INSTRUCTION GUIDE.

1 PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	
2 FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

REPRESENTATION BY LEGISLATOR BEFORE STATE AGENCY

PART 16

NOT APPLICABLE

This section applies only to members of the Texas Legislature. A member of the Texas Legislature who represents a person for compensation before a state agency in the executive branch must provide the name of the agency, the name of the person represented, and the category of the amount of the fee received for the representation. For more information, see FORM PFS--INSTRUCTION GUIDE.

Note: Beginning September 1, 2003, legislators may not, for compensation, represent another person before a state agency in the executive branch. The prohibition does not apply if: (1) the representation is pursuant to an attorney/client relationship in a criminal law matter; (2) the representation involves the filing of documents that involve only ministerial acts on the part of the agency; or (3) the representation is in regard to a matter for which the legislator was hired before September 1, 2003.

¹ STATE AGENCY	
² PERSON REPRESENTED	
³ FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
STATE AGENCY	
PERSON REPRESENTED	
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
STATE AGENCY	
PERSON REPRESENTED	
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE
STATE AGENCY	
PERSON REPRESENTED	
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BENEFITS DERIVED FROM FUNCTIONS HONORING PUBLIC SERVANT

PART 17

NOT APPLICABLE

Section 36.10 of the Penal Code provides that the gift prohibitions set out in section 36.08 of the Penal Code do not apply to a benefit derived from a function in honor or appreciation of a public servant required to file a statement under chapter 572 of the Government Code or title 15 of the Election Code if the benefit and the source of any benefit over \$50 in value are: 1) reported in the statement and 2) the benefit is used solely to defray expenses that accrue in the performance of duties or activities in connection with the office which are nonreimbursable by the state or a political subdivision. If such a benefit is received and is not reported by the public servant under title 15 of the Election Code, the benefit is reportable here. For more information, see FORM PFS-INSTRUCTION GUIDE.

¹ SOURCE OF BENEFIT	NAME AND ADDRESS
² BENEFIT	
SOURCE OF BENEFIT	NAME AND ADDRESS
BENEFIT	
SOURCE OF BENEFIT	NAME AND ADDRESS
BENEFIT	
SOURCE OF BENEFIT	NAME AND ADDRESS
BENEFIT	

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

LEGISLATIVE CONTINUANCES

PART 18

NOT APPLICABLE

Identify any legislative continuance that you have applied for or obtained under section 30.003 of the Civil Practice and Remedies Code, or under another law or rule that requires or permits a court to grant continuances on the grounds that an attorney for a party is a member or member-elect of the legislature.

1 NAME OF PARTY REPRESENTED	
2 DATE RETAINED	
3 STYLE, CAUSE NUMBER, COURT & JURISDICTION	
4 DATE OF CONTINUANCE APPLICATION	
5 WAS CONTINUANCE GRANTED?	<input type="checkbox"/> YES <input type="checkbox"/> NO

NAME OF PARTY REPRESENTED	
DATE RETAINED	
STYLE, CAUSE NUMBER, COURT, & JURISDICTION	
DATE OF CONTINUANCE APPLICATION	
WAS CONTINUANCE GRANTED?	<input type="checkbox"/> YES <input type="checkbox"/> NO

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

PERSONAL FINANCIAL STATEMENT AFFIDAVIT

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

I swear, or affirm, under penalty of perjury, that my financial statement is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

[Handwritten Signature]

Signature of Filer

AFFIX NOTARY STAMP / SEAL ABOVE



Sworn to and subscribed before me, by the said Angie Chen Butler this the 8th day of February, 20 08, to certify which, witness my hand and seal of office.

[Handwritten Signature]

Signature of officer administering oath

MARY J KAYSER
Print name of officer administering oath

[Handwritten Title]

Title of officer administering oath



Account Number: ~~XXXXXXXXXX~~

Statement Period : December 1, 2007 - December 31, 2007

Account Type: JOINT

ACCOUNT HOLDINGS

CASH & CASH EQUIVALENTS (0.04% of Holdings)

DESCRIPTION	SYMBOL	ACCT TYPE	QUANTITY	PRICE	TOTAL MKT VALUE	PORTFOLIO (%)	EST ANNUAL INTRNLC YIELD (%)	EST ANNUAL YIELD (%)	AVERAGE BALANCE
JPMORGAN GEN MUNI - E*TRADE CL	BG	Margin	2,000	116.4100	232,820.00	7.64	1.340	0.58%	61,654.46
TOTAL CASH & CASH EQUIVALENTS					27,390.00	0.54			\$61,654.46
									\$1,247.79
									0.04%
									45,973.30

STOCKS, OPTIONS & EXCHANGE-TRADED FUNDS (95.76 % of Holdings)

***BUNGE LTD	BG	Margin	2,000	116.4100	232,820.00	7.64	1.340	0.58%	61,654.46
***NABORS INDUSTRIES LTD	NBR	Margin	600	27.3900	16,434.00	0.54			\$61,654.46
NEW									\$1,247.79
***SINA CORPORATION	SINA	Margin	1,000	44.3100	44,310.00	1.45			0.04%
FORMERLY SINA COM									45,973.30
***TRANSOCEAN INC	RIG	Margin	349	143.1500	49,959.35	1.64			
NEW									
***WEATHERFORD INTERNATIONAL LTD, NEW (BERMUDA)	WFT	Margin	400	68.5000	27,400.00	0.90			
***CHECK POINT SOFTWARE TECHNOLOGIES LTD	CHKP	Margin	6,050	21.9600	132,858.00	4.36			
***RRSAT GLOBAL COMMUNICATIONS NETWORK LTD	RRST	Margin	2,000	19.6900	39,380.00	1.29			
***AMERICA MOVL S A B DE CV SPONSORED ADR REPSTG SER L SHS	AMX	Margin	900	61.3900	55,251.00	1.81			
ANADARKO PETROLEUM CORP	APC	Margin	600	65.6900	39,414.00	1.29			
***BANCO ITAU HOLDING FINANCERA SA SPONSORED ADR	ITU	Margin	2,400	25.8600	62,064.00	2.04			
REPSTG 1 PFD SHS									
***BANCOLOMBA SA SPONSORED ADR REPSTG 4 PREF	CIB	Margin	2,000	34.0200	68,040.00	2.23			
BANK OF AMERICA CORP	BAC	Margin	1,728	41.2600	71,488.32	2.45			
CVS CAREMARK CORPORATION	CVS	Margin	900	39.2000	35,280.00	1.16			
CHESSPEAKE ENERGY CORP	CHK	Margin	1,000	93.3300	93,330.00	3.06			
CHEVRON CORPORATION	CVX	Margin	1,000	148.2000	148,200.00	4.86			
***CHINA PETE & CHEM CORP SPONSORED ADR REPSTG H SHS	SNP	Margin	1,000	148.2000	148,200.00	4.86			
CITIGROUP INC	C	Margin	500	29.4400	14,720.00	0.50			
CONOCOPHILLIPS	COP	Margin	3,000	88.3000	264,900.00	8.88			
COUNTRYWIDE FINANCIAL CORP	CFC	Margin	3,000	8.9400	26,820.00	0.88			

Part 2
Page 5

Account Number: [REDACTED] Statement Period : December 1, 2007 - December 31, 2007 Account Type: JOINT

Part 2
Page 6

STOCKS, OPTIONS & EXCHANGE-TRADED FUNDS (Continued)

DESCRIPTION	SYMBOL	ACCT TYPE	QUANTITY	PRICE	TOTAL MKT VALUE	PORTFOLIO %	EST ANNUAL INCOME	EST ANNUAL YIELD (%)
DEVON ENERGY CORPORATION	DVN	Margin	280	88.9100	24,894.80	0.82	157.00	0.63%
DIAMOND OFFSHORE DRILLING INC	DO	Margin	500	142.0000	71,000.00	2.33	250.00	0.35%
DIODES INC	DIOD	Margin	750	30.0700	22,552.50	0.74	420.00	0.65%
GOLDMAN SACHS GROUP INC	GS	Margin	300	215.0500	64,515.00	2.12		
HEADWATERS INC	HW	Margin		11.7400	0.00	0.00		
IRSA INVERSIONES Y REPRESENTACIONES SA-GDR	IRS	Margin	4,000	14.5600	58,240.00	1.91		
ICI BANK LTD SPONSORED ADR	IBN	Margin	1,500	61.5000	92,250.00	3.03	743.00	0.81%
INTERCONTINENTAL EXCHANGE INC	ICE	Margin	400	192.5000	77,000.00	2.53		
L-3 COMMUNICATIONS HOLDINGS INC	LLL	Margin	500	105.9400	52,970.00	1.74	500.00	0.94%
LAS VEGAS SANDS CORP	LVS	Margin	550	103.0500	56,677.50	1.86		
MEMC ELECTRONIC MATERIALS INC	WFR	Margin	1,000	88.4900	88,490.00	2.90		
NYSE EURONEXT	NYX	Margin	1,250	87.7700	109,712.50	3.60	1,250.00	1.14%
NETEASE.COM INC	NTE	Margin	2,200	18.9600	41,712.00	1.37		
OCEANEERING INTERNATIONAL INC	OIL	Margin	500	67.3500	33,675.00	1.10		
PICO HOLDINGS INC-NEW	PICO	Margin		33.6200	0.00	0.00		
PETRO-CANADA	PCZ	Margin	500	53.6200	26,810.00	0.88	269.00	1.00%
PETROCHINA CO ADS EACH REPR	PTR	Margin	1,000	175.4700	175,470.00	5.76	4,698.00	2.68%
100 ORD HKD								
PFIZER INC	PFE	Margin	2,000	22.7300	45,460.00	1.49	2,560.00	5.63%
QUANTA SERVICES INC	PWR	Margin	1,000	26.2400	26,240.00	0.86		
SEAGATE TECHNOLOGY INC	811804988	Margin	2,000		0.00	0.00		
SOHU.COM INC	SOHU	Margin	700	54.5200	38,164.00	1.25		
SOUTHERN COPPER CORPORATION	PCU	Margin	1,000	105.1300	105,130.00	3.45	8,000.00	7.61%
SUNCOR ENERGY INC	SU	Margin	500	108.7300	54,365.00	1.78	203.00	0.37%
TOLL BROTHERS INC	TOL	Margin	1,000	20.0600	20,060.00	0.66		
TURKCELL ILETISIM HIZMETLERI AS SPONSORED ADR	TKC	Margin	3,594	27.5700	99,086.58	3.25	3,019.00	3.05%
UNITEDHEALTH GROUP INC	UNH	Margin	1,100	58.2000	64,020.00	2.10	33.00	0.05%
VALERO ENERGY CORP NEW	VLO	Margin	2,000	70.0300	140,060.00	4.59	960.00	0.69%



Account Number: **88888888**

Statement Period : December 1, 2007 - December 31, 2007

Part 2
Page 7

Account Type: JOINT

STOCKS, OPTIONS & EXCHANGE-TRADED FUNDS (Continued)

DESCRIPTION	SYMBOL	ACCT TYPE	QUANTITY	PRICE	TOTAL MKT VALUE	PORTFOLIO (%)	EST ANNUAL INCOME	EST ANNUAL YIELD (%)
VERIFONE HOLDINGS INC	PAY	Margin	2,000	23.2500	46,500.00	1.53		
WELLPOINT INC	WLP	Margin	500	87.7300	43,865.00	1.44		
WYNN RESORTS LTD	WYNN	Margin	500	112.1300	56,065.00	1.84		
TOTAL STOCKS, OPTIONS & ETF					\$2,919,423.23	95.76%	\$34,889.00	1.20%

MUTUAL FUNDS (4.20% of Holdings)

DESCRIPTION	SYMBOL	ACCT TYPE	QUANTITY	PRICE	TOTAL MKT VALUE	PORTFOLIO (%)	EST ANNUAL INCOME	EST ANNUAL YIELD (%)
KOREA FUND INC	KF	Margin	2,000	26.5200	53,040.00	1.74	342.00	
TEMPLETON RUSSIA AND EAST EUROPEAN FUND INC	TRF	Margin	1,000	75.0000	75,000.00	2.46	502.00	
TOTAL MUTUAL FUNDS					\$128,040.00	4.20%	\$844.00	

TOTAL PRICED PORTFOLIO HOLDINGS (ON 12/31/07) **\$3,054,682.52**

TOTAL ESTIMATED ACCOUNT HOLDINGS ANNUAL INCOME **\$35,733.00**

TRANSACTION HISTORY

SECURITIES PURCHASED OR SOLD

TRADE DATE	SETTLEMENT DATE	DESCRIPTION	SYMBOL	QUANTITY	PRICE	AMOUNT PURCHASED	AMOUNT SOLD	
12/13/07	12/18/07	HEADWATERS INC	HW	Sold	12.3100		24,612.63	
09:31								
12/13/07	12/18/07	PICO HOLDINGS INC-NEW	PICO	Sold	800	36,5800	29,256.56	
09:30								
12/13/07	12/18/07	VERIFONE HOLDINGS INC	PAY	Bought	2,000	22,0100	44,026.99	
09:30								
12/26/07	12/31/07	BANK OF AMERICA CORP	BAC	Sold	1,000	41,9700	41,962.36	
09:30								
12/26/07	12/31/07	CITIGROUP INC	C	Sold	1,000	30,6400	30,632.54	
09:30								
TOTAL SECURITIES ACTIVITY							\$44,026.99	\$126,464.09

DIVIDENDS & INTEREST ACTIVITY

DATE	TRANSACTION TYPE	DESCRIPTION	SYMBOL	AMOUNT DEBITED	AMOUNT CREDITED
12/03/07	Dividend	CONOCOPHILLIPS	COP		205.00
		CASH DIV ON 500 SHS			
		REC 10/31/07 PAY 12/03/07			



E*TRADE
FINANCIAL
 E*TRADE Clearing LLC
 P.O. Box 1542
 Merrifield, VA 22116-9949

Telephone Number: (800) 387-2331

RECIPIENT'S Name, Street Address, City, State, and Zip Code

00033924 03 AT 0.824 03 TR 00299 ET9MFD09 100000
 DARCY GLEN BUTTON &
 ANGIE BUTTON JTWROS
 6914 CLEAR SPRINGS CIR.
 GARLAND TX 75044-2828



Payer's Federal ID Number 32-0012683	Account Number [REDACTED]
Recipient's ID Number [REDACTED]	Account Executive ET1

Copy B for Recipient

Original 12/31/07 2nd TIN Notice

2007 FORM 1099-INT: INTEREST INCOME

(OMB NO. 1545-0112)

(BOX)	(AMOUNT)
1. Interest Income not Included in Box 3	6.32
2. Early Withdrawal Penalty	0.00
3. Interest on US Savings Bonds & Treas. Obligations	0.00
4. <u>Federal Income Tax Withheld</u>	0.00
5. Investment Expenses	0.00
6. Foreign Tax Paid	0.00
8. Tax Exempt Interest	184.78
9. Specified Private Activity Bond Interest	95.73

2007 FORM 1099-DIV: DIVIDENDS & DISTRIBUTIONS

(OMB NO. 1545-0110)

(BOX)	(AMOUNT)
1a. Total Ordinary Dividends	29,610.53
1b. Qualified Dividends	29,238.07
2a. Total Capital Gain Distributions	42,358.30
2b. Unrecaptured Section 1250 Gain	0.00
2c. Section 1202 Gain	0.00
2d. Collectibles (28%) Gain	0.00
3. Nondividend Distributions	0.00
4. <u>Federal Income Tax Withheld</u>	0.00
5. Investment Expenses	0.00
6. Foreign Tax Paid	458.03
8. Cash Liquidation Distributions	0.00
9. Noncash Liquidation Distributions	0.00

- CONTINUED -



E*TRADE
FINANCIAL
 E*TRADE Clearing LLC
 P.O. Box 1542
 Merrifield, VA 22116-9949

Telephone Number: (800) 387-2331

RECIPIENT'S Name, Street Address, City, State, and Zip Code
 DARCY GLEN BUTTON &
 ANGIE BUTTON JTWROS
 6914 CLEAR SPRINGS CIR.
 GARLAND TX 75044-2828

Payer's Federal ID Number 32-0012683	Account Number [REDACTED]
Recipient's ID Number [REDACTED]	Account Executive ET1

Original 12/31/07 2nd TIN Notice

DATE	DESCRIPTION	DISTRIBUTION	AMOUNT	COMMENT
<u>DIVIDENDS</u>				
02/28	***BUNGE LTD	DIVIDEND	160.00	
05/31	***BUNGE LTD	DIVIDEND	320.00	
08/31	***BUNGE LTD	DIVIDEND	340.00	
11/30	***BUNGE LTD	DIVIDEND	340.00	
06/01	***OMI CORP NEW	DIVIDEND	300.00	
06/06	***AMERICA MOVIL S A B DE C V	DIVIDEND	326.97	
06/13	***AMERICA MOVIL S A B DE C V	DIVIDEND	1,679.89	
06/27	ANADARKO PETROLEUM CORP	DIVIDEND	54.00	
09/26	ANADARKO PETROLEUM CORP	DIVIDEND	54.00	
12/26	ANADARKO PETROLEUM CORP	DIVIDEND	54.00	
07/13	***BANCO ITAU HOLDING	DIVIDEND	14.89	
		FOREIGN TAX PAID	0.06-	
08/13	***BANCO ITAU HOLDING	DIVIDEND	15.22	
		FOREIGN TAX PAID	0.06-	
09/06	***BANCO ITAU HOLDING	DIVIDEND	200.90	
		FOREIGN TAX PAID	0.76-	
09/13	***BANCO ITAU HOLDING	DIVIDEND	14.63	
		FOREIGN TAX PAID	0.06-	
10/12	***BANCO ITAU HOLDING	DIVIDEND	15.64	
		FOREIGN TAX PAID	0.06-	
11/13	***BANCO ITAU HOLDING	DIVIDEND	16.38	
		FOREIGN TAX PAID	0.06-	
12/11	***BANCO ITAU HOLDING	DIVIDEND	16.03	
		FOREIGN TAX PAID	0.06-	
07/13	***BANCOLOMBIA SA	DIVIDEND	481.82	
10/10	***BANCOLOMBIA SA	DIVIDEND	471.52	
12/28	BANK OF AMERICA CORP	DIVIDEND	640.00	
06/22	BEAZER HOMES USA INC	DIVIDEND	150.00	

- CONTINUED -

THIS STATEMENT IS NOT A SUBSTITUTE FOR FORM 1099 AND IS PROVIDED FOR INFORMATIONAL PURPOSES ONLY



E*TRADE
FINANCIAL
 E*TRADE Clearing LLC
 P.O. Box 1542
 Merrifield, VA 22116-9949

YEAR END SUMMARY STATEMENT

Page 2

RECIPIENT'S Name, Street Address, City, State, and Zip Code
 DARCY GLEN BUTTON &
 ANGIE BUTTON JTWROS
 6914 CLEAR SPRINGS CIR.
 GARLAND TX 75044-2828

Telephone Number: (800) 387-2331

Payer's Federal ID Number 32-0012683	Account Number [REDACTED]
Recipient's ID Number [REDACTED]	Account Executive ET1

Original 12/31/07 2nd TIN Notice

DATE	DESCRIPTION	DISTRIBUTION	AMOUNT	COMMENT
08/03	CVS CAREMARK CORPORATION	DIVIDEND	103.68	
11/02	CVS CAREMARK CORPORATION	DIVIDEND	103.68	
07/16	CHESAPEAKE ENERGY CORP	DIVIDEND	60.75	
10/15	CHESAPEAKE ENERGY CORP	DIVIDEND	60.75	
06/11	CHEVRON CORPORATION	DIVIDEND	580.00	
09/10	CHEVRON CORPORATION	DIVIDEND	580.00	
12/10	CHEVRON CORPORATION	DIVIDEND	580.00	
07/11	***CHINA PETE & CHEM CORP	DIVIDEND	1,437.43	
07/11	***CHINA PETE & CHEM CORP	ADR FEES	20.00-	
10/04	***CHINA PETE & CHEM CORP	DIVIDEND	662.41	
10/04	***CHINA PETE & CHEM CORP	ADR FEES	20.00-	
06/01	CONOCOPHILLIPS	DIVIDEND	205.00	
09/04	CONOCOPHILLIPS	DIVIDEND	205.00	
12/03	CONOCOPHILLIPS	DIVIDEND	205.00	
03/30	DEVON ENERGY CORPORATION NEW	DIVIDEND	39.20	
06/29	DEVON ENERGY CORPORATION NEW	DIVIDEND	39.20	
09/28	DEVON ENERGY CORPORATION NEW	DIVIDEND	39.20	
12/28	DEVON ENERGY CORPORATION NEW	DIVIDEND	39.20	
09/04	DIAMOND OFFSHORE DRILLING INC	DIVIDEND	62.50	
12/03	DIAMOND OFFSHORE DRILLING INC	DIVIDEND	687.50	
08/01	FREEPORT MCMORAN COPPER & GOLD	DIVIDEND	52.19	
08/30	GOLDMAN SACHS GROUP INC	DIVIDEND	203.00	
11/26	GOLDMAN SACHS GROUP INC	DIVIDEND	105.00	
08/02	***ICICI BANK LTD	DIVIDEND	743.10	
08/01	JPMORGAN MUNICIPAL MONEY MARKET FD E TRADE CLASS	DIVIDEND, NON-QUAL	0.07	
09/04	JPMORGAN MUNICIPAL MONEY MARKET FD E TRADE CLASS	DIVIDEND, NON-QUAL	0.02	
10/01	JPMORGAN MUNICIPAL MONEY MARKET FD E TRADE CLASS	DIVIDEND, NON-QUAL	0.04	

- CONTINUED -

THIS STATEMENT IS NOT A SUBSTITUTE FOR FORM 1099 AND IS PROVIDED FOR INFORMATIONAL PURPOSES ONLY



E*TRADE
FINANCIAL
 E*TRADE Clearing LLC
 P.O. Box 1542
 Merrifield, VA 22116-9949

YEAR END SUMMARY STATEMENT

Page 3

RECIPIENT'S Name, Street Address, City, State, and Zip Code

DARCY GLEN BUTTON &
 ANGIE BUTTON JTWROS
 6914 CLEAR SPRINGS CIR.
 GARLAND TX 75044-2828

Telephone Number: (800) 387-2331

Payer's Federal ID Number 32-0012683	Account Number [REDACTED]
Recipient's ID Number [REDACTED]	Account Executive ET1

Original 12/31/07 2nd TIN Notice

DATE	DESCRIPTION	DISTRIBUTION	AMOUNT	COMMENT
11/01	JPMORGAN MUNICIPAL MONEY MARKET FD E TRADE CLASS	DIVIDEND, NON-QUAL	0.01	
12/03	JPMORGAN MUNICIPAL MONEY MARKET FD E TRADE CLASS	DIVIDEND, NON-QUAL	0.38	
11/28	KOREA FUND INC	S/T GAINS ,NON-QUAL	121.09	
		FOREIGN TAX PAID	60.32-	
11/28	KOREA FUND INC	S/T GAINS ,QUAL	357.11	
		FOREIGN TAX PAID	177.88-	
11/29	KOREA FUND INC	L/T CAP GAINS	31,640.00	
12/31	KOREA FUND INC	S/T GAINS ,NON-QUAL	141.05	
12/31	KOREA FUND INC	S/T GAINS ,QUAL	415.95	
12/31	KOREA FUND INC	DIVIDEND	323.81	
		FOREIGN TAX PAID	132.71-	
'31	KOREA FUND INC	DIVIDEND, NON-QUAL	109.80	
		FOREIGN TAX PAID	45.00-	
12/31	KOREA FUND INC	L/T CAP GAINS	1,380.50	
06/15	L-3 COMMUNICATIONS HOLDINGS	DIVIDEND	125.00	
09/17	L-3 COMMUNICATIONS HOLDINGS	DIVIDEND	125.00	
12/17	L-3 COMMUNICATIONS HOLDINGS	DIVIDEND	125.00	
08/24	LEHMAN BROTHERS HOLDINGS INC	DIVIDEND	165.00	
07/13	NYSE EURONEXT	DIVIDEND	250.00	
09/28	NYSE EURONEXT	DIVIDEND	312.50	
12/28	NYSE EURONEXT	DIVIDEND	312.50	
03/19	OPTION CARE INC	DIVIDEND	2.78	
07/05	***PETRO-CANADA	DIVIDEND	61.11	
		FOREIGN TAX PAID	9.17-	
10/01	***PETRO-CANADA	DIVIDEND	65.27	
		FOREIGN TAX PAID	9.79-	
10/09	***PETROCHINA CO ADS EACH REPR	DIVIDEND	2,724.58	
10/09	***PETROCHINA CO ADS EACH REPR	ADR FEES	20.00-	
06/05	PFIZER INC	DIVIDEND	580.00	
'05	PFIZER INC	DIVIDEND	580.00	

- CONTINUED -

THIS STATEMENT IS NOT A SUBSTITUTE FOR FORM 1099 AND IS PROVIDED FOR INFORMATIONAL PURPOSES ONLY



E*TRADE
FINANCIAL
 E*TRADE Clearing LLC
 P.O. Box 1542
 Merrifield, VA 22116-9949

YEAR END SUMMARY STATEMENT

Page 4

RECIPIENT'S Name, Street Address, City, State, and Zip Code
 DARCY GLEN BUTTON &
 ANGIE BUTTON JTWROS
 6914 CLEAR SPRINGS CIR.
 GARLAND TX 75044-2828

Telephone Number: (800) 387-2331

Payer's Federal ID Number 32-0012683	Account Number XXXXXXXXXX
Recipient's ID Number XXXXXXXXXX	Account Executive ET1

Original 12/31/07 2nd TIN Notice

DATE	DESCRIPTION	DISTRIBUTION	AMOUNT	COMMENT
12/04	PFIZER INC	DIVIDEND	580.00	
07/02	PULTE HOMES INC	DIVIDEND	56.00	
06/22	RELIANCE STEEL & ALUMINUM CO	DIVIDEND	40.00	
12/31	SEAGATE TECHNOLOGY INC	DIVIDEND	48.98	
06/01	SOUTHERN COPPER CORPORATION	DIVIDEND	1,500.00	
08/31	SOUTHERN COPPER CORPORATION	DIVIDEND	1,600.00	
11/27	SOUTHERN COPPER CORPORATION	DIVIDEND	2,000.00	
06/25	***SUNCOR ENERGY INC	DIVIDEND	46.60	
		FOREIGN TAX PAID	6.99-	
/26	***SUNCOR ENERGY INC	DIVIDEND	49.77	
		FOREIGN TAX PAID	7.47-	
12/24	***SUNCOR ENERGY INC	DIVIDEND	50.53	
		FOREIGN TAX PAID	7.58-	
06/19	TEMPLETON RUSSIA AND EAST EUROPEAN FUND INC	L/T CAP GAINS	3,927.20	
12/31	TEMPLETON RUSSIA AND EAST EUROPEAN FUND INC	S/T GAINS ,QUAL	59.00	
12/31	TEMPLETON RUSSIA AND EAST EUROPEAN FUND INC	DIVIDEND	501.90	
12/31	TEMPLETON RUSSIA AND EAST EUROPEAN FUND INC	L/T CAP GAINS	5,410.60	
06/13	VALERO ENERGY CORP NEW	DIVIDEND	240.00	
09/06	VALERO ENERGY CORP NEW	DIVIDEND	240.00	
12/12	VALERO ENERGY CORP NEW	DIVIDEND	240.00	
12/11	WYNN RESORTS LTD	DIVIDEND	3,000.00	

- CONTINUED -

THIS STATEMENT IS NOT A SUBSTITUTE FOR FORM 1099 AND IS PROVIDED FOR INFORMATIONAL PURPOSES ONLY



E*TRADE
FINANCIAL
 E*TRADE Clearing LLC
 P.O. Box 1542
 Merrifield, VA 22116-9949

Telephone Number: (800) 387-2331

YEAR END SUMMARY STATEMENT

Page 5

RECIPIENT'S Name, Street Address, City, State, and Zip Code
 DARCY GLEN BUTTON &
 ANGIE BUTTON JTWROS
 6914 CLEAR SPRINGS CIR.
 GARLAND TX 75044-2828

Payer's Federal ID Number 32-0012683	Account Number XXXXXXXXXX
Recipient's ID Number XXXXXXXXXX	Account Executive ET1

Original 12/31/07 2nd TIN Notice

DATE	DESCRIPTION	DISTRIBUTION	AMOUNT	COMMENT
TOTAL DIVIDENDS - UNITED STATES				
	TAXABLE QUALIFIED DIVIDENDS		29,238.07	
	TAXABLE NON-QUALIFIED DIVIDENDS		372.46	
	TOTAL TAXABLE DIVIDENDS (INCL. S/T CAP GAINS)		29,610.53	
	ADR FEES		60.00-	
	LONG-TERM CAPITAL GAINS		42,358.30	
	TOTAL CAPITAL GAINS		42,358.30	
	FOREIGN TAX PAID		458.03-	
TOTAL DIVIDENDS				
	TAXABLE QUALIFIED DIVIDENDS		29,238.07	
	TAXABLE NON-QUALIFIED DIVIDENDS		372.46	
	TOTAL TAXABLE DIVIDENDS (INCL. S/T CAP GAINS)		29,610.53	
	ADR FEES		60.00-	
	LONG-TERM CAPITAL GAINS		42,358.30	
	TOTAL CAPITAL GAINS		42,358.30	
	FOREIGN TAX PAID		458.03-	
INTEREST DETAILS		NON-GOVERNMENT INTEREST		
01/26	E TRADE FINANCIAL	INTEREST	0.21	
02/26	E TRADE FINANCIAL	INTEREST	0.10	
03/26	E TRADE FINANCIAL	INTEREST	0.10	
04/25	E TRADE FINANCIAL	INTEREST	1.74	
05/29	E TRADE FINANCIAL	INTEREST	2.13	
06/05	E TRADE FINANCIAL	INTEREST	0.47	
06/25	E TRADE FINANCIAL	INTEREST	1.57	
TOTAL NON GOVERNMENT INTEREST			6.32	
NON GOVERNMENT INTEREST			6.32	
TOTAL MARGIN INTEREST			201.28-	
TAX EXEMPT INTEREST/DIVIDENDS DETAILS				
07/02	JPMORGAN MUNICIPAL	DIVIDEND/AMT	0.12	
	MONEY MARKET FD E TRADE CLASS			

- CONTINUED -

THIS STATEMENT IS NOT A SUBSTITUTE FOR FORM 1099 AND IS PROVIDED FOR INFORMATIONAL PURPOSES ONLY



E*TRADE
FINANCIAL
 E*TRADE Clearing LLC
 P.O. Box 1542
 Merrifield, VA 22116-9949

Telephone Number: (800) 387-2331

YEAR END SUMMARY STATEMENT

Page 6

RECIPIENT'S Name, Street Address, City, State, and Zip Code

DARCY GLEN BUTTON &
 ANGIE BUTTON JTWR0S
 6914 CLEAR SPRINGS CIR.
 GARLAND TX 75044-2828

Payer's Federal ID Number 32-0012683	Account Number [REDACTED]
Recipient's ID Number [REDACTED]	Account Executive ET1

Original 12/31/07 2nd TIN Notice

DATE	DESCRIPTION	DISTRIBUTION	AMOUNT	COMMENT
07/02	JPMORGAN MUNICIPAL MONEY MARKET FD E TRADE CLASS	DIVIDEND	0.12	
08/01	JPMORGAN MUNICIPAL MONEY MARKET FD E TRADE CLASS	DIVIDEND/AMT	12.29	
08/01	JPMORGAN MUNICIPAL MONEY MARKET FD E TRADE CLASS	DIVIDEND	11.43	
09/04	JPMORGAN MUNICIPAL MONEY MARKET FD E TRADE CLASS	DIVIDEND/AMT	4.03	
09/04	JPMORGAN MUNICIPAL MONEY MARKET FD E TRADE CLASS	DIVIDEND	3.75	
10/01	JPMORGAN MUNICIPAL MONEY MARKET FD E TRADE CLASS	DIVIDEND/AMT	6.25	
10/01	JPMORGAN MUNICIPAL MONEY MARKET FD E TRADE CLASS	DIVIDEND	5.81	
/01	JPMORGAN MUNICIPAL MONEY MARKET FD E TRADE CLASS	DIVIDEND/AMT	3.14	
11/01	JPMORGAN MUNICIPAL MONEY MARKET FD E TRADE CLASS	DIVIDEND	2.92	
12/03	JPMORGAN MUNICIPAL MONEY MARKET FD E TRADE CLASS	DIVIDEND/AMT	69.90	
12/03	JPMORGAN MUNICIPAL MONEY MARKET FD E TRADE CLASS	DIVIDEND	65.02	
TOTAL TAX EXEMPT INCOME				
TAX EXEMPT INTEREST/DIVIDENDS			89.05	
INCOME SUBJECT TO AMT			95.73	

DATE	DESCRIPTION	TRANSACTION	PRICE	CUSIP	AMOUNT	COMMENT
INVESTMENT ACTIVITY DETAILS						
05/17	***RRSAT GLOBAL COMMUNICATIONS NETWORK LTD	BOUGHT	16.99	M8183P102	8,501.99	
	QUANTITY: 500					
05/17	***RRSAT GLOBAL COMMUNICATIONS NETWORK LTD	BOUGHT	17	M8183P102	25,500.00	
	QUANTITY: 1,500					
11/08	BANK OF AMERICA CORP	BOUGHT	43.74	060505104	43,746.99	
	QUANTITY: 1,000					
11/08	CITIGROUP INC	BOUGHT	33.5	172967101	33,506.99	
	QUANTITY: 1,000					

- CONTINUED -

THIS STATEMENT IS NOT A SUBSTITUTE FOR FORM 1099 AND IS PROVIDED FOR INFORMATIONAL PURPOSES ONLY



2007 CONSOLIDATED 1099

Tax Identification Number: 614-48-7262
Account Number: 144-068735

Your Representative:
TD AMERITRADE
DIVISION OF TD AMERITRADE INC
PO BOX 2209
OMAHA, NE 68105-2209

17-011253017
028830 117 28830
DARCY G BUTTON &
ANGIE C BUTTON JT TEN
6914 CLEAR SPRINGS CIRCLE
GARLAND, TX 75044-2828

For 1099 questions, please call:
800-669-3900

Part 5



Form 1099-DIV Dividends and Distributions (OMB No: 1545-0110)

Line #	Category	Amount
1a	Total Ordinary Dividends	19,167.76
1b	Qualified Dividends	19,167.76
2a	Total Capital Gain Distributions (Includes Line 2b, 2c, 2d)	0.00
2b	Unrecaptured Section 1250 Gain	0.00
2c	Section 1202 Gain	0.00
2d	Collectibles (28% Gain)	0.00
3	Nontaxable Distributions	0.00
4	Federal Income Tax Withheld	0.00
5	Investment Expenses	0.00
6	Foreign Tax Paid	132.72
7	Foreign Country Or U.S. Possession	See Details
8	Liquidation Distribution - Cash	0.00
9	Liquidation Distribution - Noncash	0.00

Form 1099-B Proceeds From Broker & Barter Exchange Transactions (OMB No: 1545-0715)

Line #	Category	Amount
1a	Date of Sale or Exchange	\$
1b	CUSIP No.	See Details
2	Stocks, Bonds, Etc. Reported To IRS	See Details
4	Federal Income Tax Withheld	260,020.35
5	No. of Shares Exchanged	6,400
6	Classes of stock exchanged	See Details
7	Description	See Details
8	Profit or (loss) realized in 2007	0.00
9	Unrealized profit or (loss) on open contracts - 12/31/2006	0.00
10	Unrealized profit or (loss) on open contracts - 12/31/2007	0.00
11	Aggregate profit or (loss)	0.00

This is important tax information and is being furnished to the Internal Revenue Service (IRS). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. TD AMERITRADE Clearing, Inc., Federal Tax Identification Number: 47-06336729

January 28, 2008

144-068735

Page 3 of 6

GG80CZ 028830 078103



2007 CONSOLIDATED 1099

Details of Form 1099-B - Proceeds From Broker and Barter Exchange Transactions

(OMB No: 1545-0715)

LINE #2 STOCKS, BONDS, ETC. REPORTED TO IRS - GROSS PROCEEDS LESS COMMISSIONS AND OPTIONS PREMIUMS

Part 5

DATE (LINE #1A)	DESCRIPTION (LINE #7)	SYMBOL (LINE #1B)	CUSIP (LINE #11B)	INFORMATION	# SHARES EXCHANGED (LINE #5)	CLASS (LINE #6)	AMOUNT (LINE #2)	FEDERAL INCOME TAX WITHHELD (LINE #4)	NO LOSS IF CHECKED (LINE #12)
01/03/07	WELLPOINT INC COM	WLP	94973V107	SELL	500	C	\$ 39,134.19	\$	0.00
01/04/07	BANK OF AMERICA CORP COM	BAC	060505104	SELL	1,000	C	53,855.14		0.00
01/19/07	DIODES INC COM	DIOD	254543101	SELL	650	C	21,873.32		0.00
02/07/07	LENNAR CORP COM	LEN	526057104	SELL	1,000	C	54,991.31		0.00
02/27/07	MELCO PBL ENTERTAINMENT COM	MPBL	585464100	SELL	746	O	12,982.46		0.00
02/27/07	MELCO PBL ENTERTAINMENT COM	MPBL	585464100	SELL	754	O	13,128.24		0.00
03/19/07	IPC HOLDINGS INC. COM	IPCR	G4833P101	SELL	1,500	O	42,010.36		0.00
03/20/07	\$FZM: PHELPS DODGE CORP GSH & STK		717265102	CASH MERGER	250	C	22,000.00		0.00
	\$98 & .67:1								
03/20/07	\$FZM: PHELPS DODGE CORP GSH & STK		717265102	CASH IN LIEU	0	C	30.36		0.00
	\$98 & .67:1								
04/11/07	CVS CAREMARK CORPORATION COM	CVS	126650100	CASH IN LIEU	0	C	14.97		0.00
TOTALS					6,400		\$ 260,020.35	\$	0.00

Details of Form 1099-DIV - Dividends and Distributions
** Indicates the amount includes all or a portion of a payment received in January 2008. Please refer to the enclosed insert for more details.

(OMB No: 1545-0110)

LINE #1a ORDINARY DIVIDENDS (INCLUDING QUALIFIED DIVIDENDS)

DESCRIPTION	CUSIP	INFORMATION	AMOUNT
CVS CAREMARK CORPORATION COM	126650100	QUALIFIED DIVIDEND	\$ 103.88
\$FZR: CAREMARK RX INC 1.67:1 EXC 3/22/07 1266	141705103	QUALIFIED DIVIDEND	7,866.00
CHESAPEAKE ENERGY CORP COM	165167107	QUALIFIED DIVIDEND	108.00



2007 CONSOLIDATED 1099

Details of Form 1099-DIV - Dividends and Distributions, continued

(OMB No: 1545-0110)

** Indicates the amount includes all or a portion of a payment received in January 2008. Please refer to the enclosed insert for more details.

LINE #1a ORDINARY DIVIDENDS (INCLUDING QUALIFIED DIVIDENDS), CONTINUED

Part 5

DESCRIPTION	CUSIP	INFORMATION	AMOUNT
CHEVRON CORP COM	166764100	QUALIFIED DIVIDEND	520.00
L-3 COMMUNICATIONS CORP COM	502424104	QUALIFIED DIVIDEND	125.00
LENNAR CORP COM	526057104	QUALIFIED DIVIDEND	160.00
PFIZER INC COM	717081103	QUALIFIED DIVIDEND	580.00
\$FZM: PHELPS DODGE CORP CSH & STK \$88 & .67.1	717265102	QUALIFIED DIVIDEND	50.00
PULTE HOMES INC COM	7459867101	QUALIFIED DIVIDEND	112.00
SUNCOR INC COM	867229106	QUALIFIED DIVIDEND	34.41
TURKCELL ILETISM HIZMETLERI COM	900111204	QUALIFIED DIVIDEND	1,700.32
ANADARKO PETE CORP COM	032511107	QUALIFIED DIVIDEND	54.00
BANCO ITAU HLDG FINANCIERA SA ADR	059602201	QUALIFIED DIVIDEND	824.32
BANCOLUMBIA S.A. COM	059688102	QUALIFIED DIVIDEND	854.36
BEAZER HOMES USA INC COM	075560105	QUALIFIED DIVIDEND	150.00
CONOCOPHILLIPS CORP COM	20825C104	QUALIFIED DIVIDEND	205.00
DIAMOND OFFSHORE DRILLING CM	26271C102	QUALIFIED DIVIDEND	62.50
FREEPORT MCMORAN COPPER & GOLD CL B	36671D857	QUALIFIED DIVIDEND	52.19
GOLDMAN SACHS GROUP INC COM	38141G104	QUALIFIED DIVIDEND	210.00
PETRO-CDA COM	71644E102	QUALIFIED DIVIDEND	99.08
PETROCHINA CO LTD COM	71646E100	QUALIFIED DIVIDEND	1,993.90
SOUTHERN COPPER CORP COM	84285V105	QUALIFIED DIVIDEND	1,700.00
UNITED HEALTH GROUP INC COM	91324P102	QUALIFIED DIVIDEND	33.00
VALERO ENERGY NEW COM	91913V100	QUALIFIED DIVIDEND	240.00
BUNGE LTD COM	G16962105	QUALIFIED DIVIDEND	160.00
IPC HOLDINGS INC. COM	G4933P101	QUALIFIED DIVIDEND	300.00
\$FZM: OMI CORP CSH MRG \$29.25/SH 6/8/07	Y8476W104	QUALIFIED DIVIDEND	870.00
TOTAL LINE #1a			\$ 19,167.76

LINE #6 FOREIGN TAX PAID

DESCRIPTION	CUSIP	COUNTRY (LINE #7)	AMOUNT
SUNCOR INC COM	867229106	CANADA	\$ 5.16
BANCO ITAU HLDG FINANCIERA SA ADR	059602201	BRAZIL	112.70
PETRO-CDA COM	71644E102	CANADA	14.86
TOTAL LINE #6			\$ 132.72

Capital Gains - Last year
1/1/2007 through 12/31/2007

Part 2 (Attachment pages 1-4)
Stock sales & transfers from
7B Ameritrade to E-Trade Page 1

Account	Security	Shares	Bought	Sold	Gross Proceeds	Cost Basis	Realized Gain/Loss
SHORT TERM							
Ameritrade Plus	Diodes Inc	500	11/27/2006	1/19/2007	16,825.63	20,064.95	-3,239.32
Ameritrade Plus	Diodes Inc	150	12/27/2006	1/19/2007	5,047.69	5,449.99	-402.30
Ameritrade Plus	MELCO PBL ENTERTAINM...	54	1/3/2007	2/27/2007	940.22	1,149.12	-208.90
Ameritrade Plus	MELCO PBL ENTERTAINM...	250	1/3/2007	2/27/2007	4,352.86	5,322.60	-969.74
Ameritrade Plus	MELCO PBL ENTERTAINM...	450	1/3/2007	2/27/2007	7,835.16	9,560.50	-1,725.34
Ameritrade Plus	MELCO PBL ENTERTAINM...	746	1/3/2007	2/27/2007	12,982.46	15,874.88	-2,892.42
Ameritrade Plus	ipc holdings	200	9/23/2006	3/19/2007	5,601.38	6,021.84	-420.46
Ameritrade Plus	ipc holdings	1,300	9/29/2006	3/19/2007	36,408.96	39,146.00	-2,737.04
Ameritrade Plus	PHELPS DODGE CORP	250	5/31/2006	3/20/2007	22,000.00	21,375.00	625.00
Ameritrade Plus	Anadarko Pete Corp	800	1/4/2007	5/7/2007	24,710.84	24,710.94	-0.10
Ameritrade Plus	BANCO ITAU HLDG FINAN...	1,200	7/18/2006	5/7/2007	31,425.56	31,425.56	0.00
Ameritrade Plus	CONOCOPHILLIPS	500	1/4/2007	5/7/2007	33,259.00	33,259.00	0.00
Ameritrade Plus	CVS CAREMARK CORPDR...	1,728	3/22/2007	5/7/2007	0.00	0.00	0.00
Ameritrade Plus	DIAMOND OFFSHORE DRIL...	500	2/22/2007	5/7/2007	39,785.00	39,785.00	0.00
Ameritrade Plus	Diodes Inc	500	2/28/2007	5/7/2007	19,725.00	19,725.00	0.00
Ameritrade Plus	FREEFORT-MCMORAN C...	187	3/20/2007	5/7/2007	0.00	0.00	0.00
Ameritrade Plus	GOLDMAN SACHS GROUP	300	6/15/2006	5/7/2007	42,125.00	42,125.00	0.00
Ameritrade Plus	LAM RESEARCH CORP	500	1/13/2007	5/7/2007	23,105.00	23,105.00	0.00
Ameritrade Plus	LAS VEGAS SANDS CORP	350	3/27/2007	5/7/2007	30,863.38	30,863.38	0.00
Ameritrade Plus	Nabors Industries Inc	400	8/14/2006	5/7/2007	13,304.60	13,304.60	0.00
Ameritrade Plus	Nabors Industries Inc	200	1/16/2007	5/7/2007	5,867.00	5,867.00	0.00
Ameritrade Plus	SIFY LTD SPONSORED ADR	200	2/27/2007	5/7/2007	1,754.20	1,754.20	0.00
Ameritrade Plus	SIFY LTD SPONSORED ADR	2,800	2/27/2007	5/7/2007	24,568.80	24,568.80	0.00
Ameritrade Plus	SOUTHERN COPPER COR...	1,000	6/14/2006	5/7/2007	44,504.95	44,504.95	0.00
Ameritrade Plus	UNDERLYING SECURITY F...	1,500	4/4/2007	5/7/2007	0.00	0.00	0.00
Ameritrade Plus	WEATHERFORD INTERNA...	400	1/10/2007	5/7/2007	15,040.20	15,040.20	0.00
Ameritrade Plus	WYNN RESORTS LTD COM	500	3/19/2007	5/7/2007	46,870.80	46,870.80	0.00
Ameritrade Plus	ZZZ14	94	6/16/2006	5/7/2007	0.00	0.00	0.00
Ameritrade Plus	ZZZ14	0	6/1/2006	5/7/2007	0.00	0.00	0.00
Ameritrade Plus	ZZZ14	185	8/4/2006	5/7/2007	0.00	0.00	0.00
Ameritrade Plus	TKC	1,786	5/24/2007	5/7/2007	0.00	0.00	0.00
E*Trade	LAM RESEARCH CORP	500	1/13/2007	5/16/2007	25,677.66	23,105.00	2,572.66
E*Trade	FREEPORT-MCMORAN C.	167	3/20/2007	7/26/2007	14,794.83	0.00	14,794.83
E*Trade	SIFY LTD SPONSORED ADR	200	2/27/2007	7/26/2007	1,472.48	1,754.20	-281.72
E*Trade	SIFY LTD SPONSORED ADR	200	2/27/2007	7/26/2007	1,472.48	1,754.20	-281.72
E*Trade	SIFY LTD SPONSORED ADR	100	2/27/2007	7/26/2007	735.99	977.10	-141.12

Capital Gains - Last year

1/1/2007 through 12/31/2007

Account	Security	Shares	Bought	Sold	Gross Proceeds	Cost Basis	Realized Gain/Loss
E*Trade	SIFY LTD SPONSORED ADR	2,500	2/27/2007	7/26/2007	18,424.71	21,927.50	-3,502.79
E*Trade	INDONESIA FD INC COM	400	7/24/2007	8/16/2007	3,872.95	5,481.75	-1,608.80
E*Trade	INDONESIA FD INC COM	200	7/24/2007	8/16/2007	1,941.97	2,740.87	-798.90
E*Trade	INDONESIA FD INC COM	200	7/24/2007	8/16/2007	1,929.97	2,740.87	-810.90
E*Trade	INDONESIA FD INC COM	800	7/24/2007	8/16/2007	7,687.88	10,983.50	-3,275.62
E*Trade	RELANCE STEEL & ALUMI...	30	5/17/2007	6/16/2007	1,305.27	1,892.49	-526.22
E*Trade	RELANCE STEEL & ALUMI...	470	5/17/2007	8/16/2007	20,484.95	28,818.25	-8,153.30
E*Trade	RELIANCE STEEL & ALUMI...	200	6/12/2007	8/16/2007	8,708.49	11,468.99	-2,758.50
E*Trade	PENSON WORLDWIDE IN...	2,000	7/20/2007	8/29/2007	31,882.52	36,608.99	-6,614.47
E*Trade	LEHMAN BROS HLDGS INC ...	600	7/23/2007	8/29/2007	32,477.50	41,148.99	-8,671.49
E*Trade	LEHMAN BROS HLDGS INC ...	200	7/26/2007	8/29/2007	10,825.83	12,546.00	-1,722.17
E*Trade	LEHMAN BROS HLDGS INC ...	300	7/26/2007	8/29/2007	16,234.76	18,821.99	-2,587.23
E*Trade	GOLDMAN SACHS GROUP ...	260	7/26/2007	8/29/2007	48,506.46	53,717.88	-5,211.42
E*Trade	HEADWATERS INC COM	2,000	8/16/2007	12/13/2007	24,612.63	29,846.99	-5,234.36
E*Trade	PICO HOLDINGS INC	800	7/23/2007	12/13/2007	29,256.56	35,206.99	-5,950.43
E*Trade	BAC	1,000	11/3/2007	12/28/2007	41,952.36	43,748.99	-1,794.63
E*Trade	CITIGROUP INC COM	1,000	11/8/2007	12/28/2007	30,632.54	33,506.99	-2,874.45
TOTAL SHORT TERM					882,895.49	940,310.64	-57,415.15

LONG TERM

Ameritrade Plus	Vwellpoint Hlth Networks	500	9/16/2004	1/3/2007	39,184.18	16,606.25	22,527.94
Ameritrade Plus	BAC	1,000	10/27/2003	1/4/2007	53,855.14	36,883.00	16,972.14
Ameritrade Plus	LEN	1,000	7/20/2004	2/7/2007	54,991.31	41,615.00	13,376.31
Ameritrade Plus	CMX	1,035	8/12/2002	3/22/2007	9,224.25	9,224.25	0.00
Ameritrade Plus	NYSE GROUP INC COM	1,500	3/14/2005	4/4/2007	28,809.75	28,809.75	0.00
Ameritrade Plus	811904988	2,000	10/4/2003	5/7/2007	0.00	0.00	0.00
Ameritrade Plus	AMX	900	8/16/2004	5/7/2007	9,869.00	9,869.00	0.00
Ameritrade Plus	BANCOLOMBA S A PREF ...	2,000	3/14/2005	5/7/2007	30,019.00	30,010.00	0.00
Ameritrade Plus	bunge	200	6/6/2003	5/7/2007	5,932.00	5,932.00	0.00
Ameritrade Plus	bunge	200	6/6/2003	5/7/2007	5,926.00	5,926.00	0.00
Ameritrade Plus	bunge	800	6/6/2003	5/7/2007	17,802.00	17,802.00	0.00
Ameritrade Plus	BZH	1,200	7/21/2003	5/7/2007	31,200.00	31,200.00	0.00
Ameritrade Plus	BZH	300	7/21/2003	5/7/2007	7,797.00	7,797.00	0.00
Ameritrade Plus	Check Point Softwa	6,050	10/7/1998	5/7/2007	14,438.41	14,438.41	0.00
Ameritrade Plus	CHESAPEAKE ENERGY C...	800	2/27/2006	5/7/2007	23,408.00	23,408.00	0.00
Ameritrade Plus	CHESAPEAKE ENERGY C...	100	3/27/2006	5/7/2007	2,930.00	2,930.00	0.00
Ameritrade Plus	CHEVRON CORP NEW COM	200	10/16/2005	5/7/2007	11,577.00	11,577.00	0.00
Ameritrade Plus	CHEVRON CORP NEW COM	300	1/23/2006	5/7/2007	18,328.40	18,328.40	0.00

Capital Gains - Last year

1/1/2007 through 12/31/2007

Account	Security	Shares	Bought	Sold	Gross Proceeds	Cost Basis	Realized Gain/Loss
Ameritrade Plus	CHEVRON CORP NEW COM	500	1/27/2006	5/7/2007	30,124.00	30,124.00	0.00
Ameritrade Plus	INTERCONTINENTALEXCH...	400	4/7/2006	5/7/2007	22,461.00	22,461.00	0.00
Ameritrade Plus	IRS	4,000	7/10/2003	5/7/2007	34,013.00	34,013.00	0.00
Ameritrade Plus	KF	300	7/23/2004	5/7/2007	5,153.00	5,153.00	0.00
Ameritrade Plus	KF	1,700	7/23/2004	5/7/2007	28,240.00	28,240.00	0.00
Ameritrade Plus	LIFECCELL CORP COM	1,500	2/14/2006	5/7/2007	30,485.00	30,485.00	0.00
Ameritrade Plus	LLL	500	3/22/2004	5/7/2007	27,252.50	27,252.50	0.00
Ameritrade Plus	NTE5	1,000	6/3/2004	5/7/2007	8,489.50	8,489.50	0.00
Ameritrade Plus	NTE5	1,200	6/3/2004	5/7/2007	10,185.00	10,185.00	0.00
Ameritrade Plus	OMI CORP NEW	1,000	5/29/2002	5/7/2007	4,601.30	4,601.30	0.00
Ameritrade Plus	PETRO-CDA COM	500	1/12/2005	5/7/2007	18,915.00	18,915.00	0.00
Ameritrade Plus	PFE	2,000	12/8/2005	5/7/2007	41,963.20	41,963.20	0.00
Ameritrade Plus	PHM	1,000	7/27/2004	5/7/2007	28,505.00	28,505.00	0.00
Ameritrade Plus	PHM	400	10/5/2004	5/7/2007	10,387.00	10,387.00	0.00
Ameritrade Plus	PTR	100	5/17/2004	5/7/2007	4,156.00	4,156.00	0.00
Ameritrade Plus	PTR	900	5/17/2004	5/7/2007	37,638.00	37,638.00	0.00
Ameritrade Plus	QUANTA SVCS INC COM	1,000	6/6/2005	5/7/2007	11,705.00	11,705.00	0.00
Ameritrade Plus	SINA	700	7/22/2004	5/7/2007	16,362.60	16,362.60	0.00
Ameritrade Plus	SINA	300	7/22/2004	5/7/2007	7,011.00	7,011.00	0.00
Ameritrade Plus	SNP	900	6/29/2003	5/7/2007	27,441.00	27,441.00	0.00
Ameritrade Plus	SNP	100	6/29/2003	5/7/2007	3,056.00	3,056.00	0.00
Ameritrade Plus	SOHU	700	6/11/2005	5/7/2007	12,365.60	12,365.60	0.00
Ameritrade Plus	SUNCOR ENERGY INC	500	10/19/2005	5/7/2007	25,525.00	25,525.00	0.00
Ameritrade Plus	THE9 LTD ADR	1,000	3/8/2006	5/7/2007	22,110.00	22,110.00	0.00
Ameritrade Plus	TKC	3,535	1/16/2004	5/7/2007	21,168.21	21,168.21	0.00
Ameritrade Plus	TOL	200	6/14/2004	5/7/2007	3,958.00	3,958.00	0.00
Ameritrade Plus	TOL	800	5/14/2004	5/7/2007	15,416.00	15,416.00	0.00
Ameritrade Plus	TRF	1,000	2/25/2004	5/7/2007	37,025.00	37,025.00	0.00
Ameritrade Plus	UNITEDHEALTH GROUP IN	1,100	12/23/2005	5/7/2007	13,640.92	13,640.92	0.00
Ameritrade Plus	Valero Energy Corporation	2,000	6/20/2001	5/7/2007	16,779.75	16,779.75	0.00
Ameritrade Plus	Wellpoint Hlth Networks	500	8/16/2004	5/7/2007	16,606.25	16,606.25	0.00
Ameritrade Plus	ZZZ14	2,678	10/13/2005	5/7/2007	0.00	0.00	0.00
Ameritrade Plus	OMI CORP NEW	2,000	5/29/2002	5/7/2007	9,202.60	9,202.60	0.00
E*Trade	Option Care Inc Com	93	5/30/2001	5/16/2007	1,329.00	1,264.80	64.20
E*Trade	Option Care Inc Com	46	4/1/2005	5/16/2007	657.36	0.00	657.36
E*Trade	LIFECCELL CORP COM	1,500	2/14/2006	5/16/2007	42,705.30	30,485.00	12,220.30
E*Trade	UNDERLYING SECURITY F...	500	3/14/2005	6/1/2007	41,737.37	0.00	41,737.37
E*Trade	PHM	1,000	7/27/2004	7/23/2007	21,286.18	26,505.00	-5,218.82

Capital Gains - Last year

1/1/2007 through 12/31/2007

Account	Security	Shares	Bought	Sold	Gross Proceeds	Cost Basis	Realized Gain/L...
E*Trade	PHM	400	10/6/2004	7/23/2007	8,514.47	10,367.00	-1,872.53
E*Trade	BZH	1,200	7/21/2003	7/23/2007	22,531.02	31,200.00	-8,668.98
E*Trade	BZH	300	7/21/2003	7/23/2007	5,632.75	7,797.00	-2,164.25
E*Trade	THE9 LTD ADR	200	3/8/2006	7/26/2007	9,891.84	4,422.00	5,469.84
E*Trade	THE9 LTD ADR	200	3/8/2006	7/26/2007	9,989.84	4,422.00	5,467.84
E*Trade	THE9 LTD ADR	139	3/8/2006	7/26/2007	9,327.00	4,178.79	5,148.21
E*Trade	THE9 LTD ADR	111	3/8/2006	7/26/2007	5,482.20	2,454.21	3,027.99
E*Trade	THE9 LTD ADR	100	3/8/2006	7/26/2007	4,937.92	2,211.00	2,726.92
E*Trade	THE9 LTD ADR	100	3/8/2006	7/26/2007	4,939.93	2,211.00	2,728.93
E*Trade	THE9 LTD ADR	100	3/8/2006	7/26/2007	4,936.92	2,211.00	2,724.92
TOTAL LONG TERM					1,159,901.98	1,042,976.29	116,925.69
OVERALL TOTAL					2,042,797.47	1,963,286.93	59,510.54