FORM	4
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Check this box if no STATEMENT OF CHANGES IN BENEFICIAL OW longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

OMB APPROVAL UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person – FOSTER VINCENT D				ol Street	Cap	nd Ticker or ital CORP Fransaction		C	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) XDirector10% Owner X_Officer (give titleOther (specify below)			
1300 POST OAK BLVD., STE. 800				th/Day/Y 5/2012		Tansaction			Chief Executive Officer			
(Street) HOUSTON, TX 77056				Amendme Month/Day		Date Original			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Та	ble I - N	on-l	Derivative S	ecur	ities Acqu	ired, Disposed of, o	r Beneficiall	y Owned	
1.Title of Security (Instr. 3)	ecurity Date Execution D nstr. 3) (Month/Day/Year) any					4. Securities or Disposed (Instr. 3, 4 a	of (D)	Securities Beneficially Owned Following	Direct (D)	Beneficial Ownership	
				Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock	07/16/2012			P <u>(1)</u>	v	2,628.472	A	\$ 23.6365	1,317,172.3296	D		
Common Stock	07/16/2012			P <u>(1)</u>	v	616.25	А	\$ 25.15	1,317,788.5796	D		
Common Stock	07/16/2012			P <u>(1)</u>	v	459.772	A	\$ 23.637	1,318,248.3516	D		
Common Stock	07/16/2012			P <mark>(1)</mark>	v	63.062	A	\$ 23.637	10,342.8017	Ι	Foster Irrevocable Trust ⁽²⁾	
Common Stock	07/16/2012			P <u>(1)</u>	v	17.051	А	\$ 25.3644	2,999.761	I	Amy Foster Custodial Account (3	
Common Stock	07/16/2012			P <u>(1)</u>	v	16.6848	А	\$ 25.3644	2,935.3104	I	Brittany Foster Custodial Account (3	

directly or indirectly. Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned • • •

	(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.			6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n N	umb	er	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	of	f		(Month/Day	/Year)	Unde	erlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	D	eriva	tive			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				S	ecuri	ties			(Inst	r. 3 and		Owned	Security:	(Instr. 4)
	Security				Α	.cquii	red			4)			Following	Direct (D)	
					(/	A) or							Reported	or Indirect	
					D	ispos	sed						Transaction(s)	(I)	
						f (D)							(Instr. 4)	(Instr. 4)	
					`	nstr.									
					4,	, and	5)								
											Amount				
								Date	Emination		or				
								Exercisable	Expiration Date	Title	Number				
								Exercisable	Date		of				
				Code V	/ (/	A) ((D)				Shares				

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address		10% Owner	Officer	Other				
FOSTER VINCENT D 1300 POST OAK BLVD. STE. 800 HOUSTON, TX 77056	Х		Chief Executive Officer					

Signatures

/s/ Rodger A. Stout as Attorney-in-Fact for Vincent D. Foster	08/15/2012
	Date

Explanation of Responses:

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) The reporting person acquired these shares under a dividend reinvestment plan, pursuant to a dividend reinvestment transaction exempt from Section 16 under Rule 16a-11.
- (2) Shares purchased by irrevocable trust for the benefit of children.
- (3) Shares purchased by custodial account of daughter.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

^{*} If the form is filed by more than one reporting person, see Instruction 4(b)(v).