



STATEMENT OF ECONOMIC INTERESTS COVER PAGE A PUBLIC DOCUMENT

Date Initial Filing Received Filing Official Use Only

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)

So, Lydia

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City and County of San Francisco

Division, Board, Department, District, if applicable Your Position

Planning Commission Planning Commissioner

If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: Position:

2. Jurisdiction of Office (Check at least one box)

- State, Multi-County, City of, Judge (Supreme, Appellate, Superior Court), Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction), County of San Francisco, Other

3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2025, through December 31, 2025. Leaving Office: Date Left. Assuming Office: Date assumed. Candidate: Date of Election and office sought.

4. Schedule Summary (required)

Total number of pages including this cover page: 5

Schedules attached

- Schedule A-1 - Investments - schedule attached, Schedule A-2 - Investments - schedule attached, Schedule B - Real Property - schedule attached, Attachment 700-P - Prospective Employment (87200 Filers Only) - schedule attached, Schedule C - Income, Loans, & Business Positions - schedule attached, Schedule D - Income - Gifts - schedule attached, Schedule E - Income - Gifts - Travel Payments - schedule attached

-or- None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE 49 South Van Ness Avenue San Francisco CA 94103 DAYTIME TELEPHONE NUMBER EMAIL ADDRESS (415) 336-5512 lydia.so@sfgov.org

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 03/28/2026 (month, day, year)

Signature Lydia So (File the originally signed paper statement with your filing official.)

# SCHEDULE A-1 Investments

## Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

*Investments must be itemized.*

*Do not attach brokerage or financial statements.*

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

So, Lydia

▶ **NAME OF BUSINESS ENTITY**  
Palantir Technologies Inc

**GENERAL DESCRIPTION OF THIS BUSINESS**  
An American publicly traded company that specializes in software platforms for big data

**FAIR MARKET VALUE**  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

**NATURE OF INVESTMENT**  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**  
 \_\_\_\_\_/\_\_\_\_\_/25      \_\_\_\_\_/\_\_\_\_\_/25  
 ACQUIRED                      DISPOSED

▶ **NAME OF BUSINESS ENTITY**  
SmithGroup Companies, Inc.

**GENERAL DESCRIPTION OF THIS BUSINESS**  
Architecture and engineering professional services firm

**FAIR MARKET VALUE**  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

**NATURE OF INVESTMENT**  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**  
 \_\_\_\_\_/\_\_\_\_\_/25      \_\_\_\_\_/\_\_\_\_\_/25  
 ACQUIRED                      DISPOSED

▶ **NAME OF BUSINESS ENTITY**  
ConocoPhillips

**GENERAL DESCRIPTION OF THIS BUSINESS**  
An American company engaged in hydrocarbon exploration and production.

**FAIR MARKET VALUE**  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

**NATURE OF INVESTMENT**  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**  
 \_\_\_\_\_/\_\_\_\_\_/25      \_\_\_\_\_/\_\_\_\_\_/25  
 ACQUIRED                      DISPOSED

▶ **NAME OF BUSINESS ENTITY**  
Apple, Inc.

**GENERAL DESCRIPTION OF THIS BUSINESS**  
Consumer electronics.

**FAIR MARKET VALUE**  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

**NATURE OF INVESTMENT**  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**  
 \_\_\_\_\_/\_\_\_\_\_/25      \_\_\_\_\_/\_\_\_\_\_/25  
 ACQUIRED                      DISPOSED

▶ **NAME OF BUSINESS ENTITY**  
Tesla

**GENERAL DESCRIPTION OF THIS BUSINESS**  
An American multinational automotive and clean energy company.

**FAIR MARKET VALUE**  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

**NATURE OF INVESTMENT**  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**  
 \_\_\_\_\_/\_\_\_\_\_/25      \_\_\_\_\_/\_\_\_\_\_/25  
 ACQUIRED                      DISPOSED

▶ **NAME OF BUSINESS ENTITY**  
\_\_\_\_\_

**GENERAL DESCRIPTION OF THIS BUSINESS**  
\_\_\_\_\_

**FAIR MARKET VALUE**  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

**NATURE OF INVESTMENT**  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership     Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

**IF APPLICABLE, LIST DATE:**  
 \_\_\_\_\_/\_\_\_\_\_/25      \_\_\_\_\_/\_\_\_\_\_/25  
 ACQUIRED                      DISPOSED

**Comments:** \_\_\_\_\_



**SCHEDULE D**  
**Income – Gifts**

▶ **NAME OF SOURCE (Not an Acronym)**  
SF Chinese Chambers of Commerce  
**ADDRESS (Business Address Acceptable)**  
 730 Sacramento St  
 San Francisco, CA 94108  
**BUSINESS ACTIVITY, IF ANY, OF SOURCE**  
 Non-profit advocate for socioeconomic progress and civic interests in San Francisco

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 15 / 25	\$ 200.00	Alaska Airlines® Chinese New Year Parade
02 / 14 / 25	\$ 300.00	Miss Chinatown USA Pegeant Coronation Ball
____ / ____ / ____	\$ _____	_____

▶ **NAME OF SOURCE (Not an Acronym)**  
Episcopal Community Services  
**ADDRESS (Business Address Acceptable)**  
 1055 Taylor Street  
 San Francisco, CA 94108  
**BUSINESS ACTIVITY, IF ANY, OF SOURCE**  
 Non-profit for children, family and homelessness and mental health services.

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 10 / 25	\$ 375.00	Episcopal Community Services CHEFS gala
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ **NAME OF SOURCE (Not an Acronym)**  
YMCA  
**ADDRESS (Business Address Acceptable)**  
 169 Steuart Street  
 San Francisco, CA 94105  
**BUSINESS ACTIVITY, IF ANY, OF SOURCE**  
 Non-profit for youth and family

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 27 / 25	\$ 150.00	YMCA 23rd annual Urban Services fundraiser event
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ **NAME OF SOURCE (Not an Acronym)**  
Self help for elderly  
**ADDRESS (Business Address Acceptable)**  
 731 Sansome Street, Suite 100  
 San Francisco, CA 94111  
**BUSINESS ACTIVITY, IF ANY, OF SOURCE**  
 Non-profit for senior services

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 14 / 25	\$ 300.00	Self help for elderly 2025 Longevity Gala
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ **NAME OF SOURCE (Not an Acronym)**  
Deloitte  
**ADDRESS (Business Address Acceptable)**  
 555 Mission St #1400  
 San Francisco, CA 94105  
**BUSINESS ACTIVITY, IF ANY, OF SOURCE**  
 Tax and consulting services company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 02 / 25	\$ 150.00	Giants game
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ **NAME OF SOURCE (Not an Acronym)**  
Chinatown Community Development Center  
**ADDRESS (Business Address Acceptable)**  
 615 Grant Avenue  
 San Francisco, CA 94108  
**BUSINESS ACTIVITY, IF ANY, OF SOURCE**  
 non-profit to advocate Chinatown living conditions

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 19 / 25	\$ 200.00	CCDC Annual Gala
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

**Comments:** \_\_\_\_\_

**SCHEDULE D**  
**Income – Gifts**

▶ NAME OF SOURCE *(Not an Acronym)*

San Francisco Public Utilities

ADDRESS *(Business Address Acceptable)*

525 Golden Gate Ave  
 San Francisco, CA 94102

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Government agency manages water, power, and sewer services.

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 12 / 25	\$ 150.00	Moose Feed
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*

\_\_\_\_\_

ADDRESS *(Business Address Acceptable)*

\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE

\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*

\_\_\_\_\_

ADDRESS *(Business Address Acceptable)*

\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE

\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*

\_\_\_\_\_

ADDRESS *(Business Address Acceptable)*

\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE

\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*

\_\_\_\_\_

ADDRESS *(Business Address Acceptable)*

\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE

\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*

\_\_\_\_\_

ADDRESS *(Business Address Acceptable)*

\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF SOURCE

\_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: \_\_\_\_\_