File No. <u>161007</u>

Committee Item No. <u>3</u> Board Item No. <u>35</u>

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Rules Committee

Date September 22, 2016

Board of Supervisors Meeting

Date October 4, 2016

Cmte Board

	Motion Resolution Ordinance Legislative Digest Budget and Legislative Analyst Report Legislative Analyst Report
	Youth Commission Report Introduction Form (for hearings) Department/Agency Cover Letter and/or Report MOU Grant Information Form Grant Budget Subcontract Budget Contract/Agreement Form 126 – Ethics Commission Award Letter Application Public Correspondence
OTHER	(Use back side if additional space is needed)
	Information Sheet Vacancy Notice Form 700

Completed by:	Derek Evans	Date	September 16, 2016	
Completed by:	Derek Evans	Date	September 29, 2016	

An asterisked item represents the cover sheet to a document that exceeds 25 pages. The complete document can be found in the file.

FILE NO. 161007

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PREPARED IN COMMITTEE 9/22/16

MOTION NO.

[Appointments - Assessment Appeals Board No. 2 - John Lee, Mervin Conlan, and Yosef Tahbazof]

Motion reappointing John Lee, Mervin Conlan, and Yosef Tahbazof, terms ending September 5, 2019, to the Assessment Appeals Board No. 2.

MOVED, That the Board of Supervisors of the City and County of San Francisco does hereby appoint the hereinafter designated persons to serve as members of the Assessment Appeals Board No. 2, pursuant to the provisions of California Revenue and Taxation Code, Section 1620 et seq., and San Francisco Administrative Code, Section 2B.1 et seq., for the terms specified:

John Lee, seat 2, succeeding themself, term expired, must have a minimum of five years professional experience in the State of California as one of the following: certified public accountant, licensed real estate broker, attorney; or a property appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization, for the unexpired portion of a three-year term ending September 5, 2019.

Mervin Conlan, seat 3, succeeding themself, term expired, must have a minimum of five years professional experience in the State of California as one of the following: certified public accountant or public accountant; licensed real estate broker; attorney; or a property appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization, for the unexpired portion of a three-year term ending September 5, 2019.

Yosef Tahbazof, seat 4, succeeding themself, term expired, must have a minimum of five years professional experience in the State of California as one of the following: certified public accountant or public accountant; licensed real estate broker; attorney; or a property

Rules Committee BOARD OF SUPERVISORS

Page 1

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appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization, for the unexpired portion of a three-year term ending September 5, 2019.

Rules Committee BOARD OF SUPERVISORS Assessment Appeals Board City and County of San Francisco (415) 554-6778 Fax (415) 554-6775



City Hall, Room 405 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102-4697

Complete and return this original Application to the Assessment Appeals Board
Application for Appointment to:Board 1orBoard 1 Alternate*(Please circle one)Board 2orBoard 2 AlternateBoard 3orBoard 3 Alternate
Enter your name, mailing address and daytime telephone number in the spaces provided. Because this form is a document available for public review, you may list your business/office address, telephone number and e-mail address in lieu of your home address or other personal contact information.
Do you authorize release of your private/personal information? 🐹 yes 🔲 no
Name:UHN LEE Home Address:
Name: JUHN LEE Home Address: City: State:
BUSINESS Address: 1699 VAN NESS ALTENNE City: SANFRANCISCO State: CA Zip Code: 94109
Home Phone: 415-447-6231 Work Phone: 415-447-6231 Fax #:
Pager #: E-Mail Address: johnlee & Pacinion com
Are you a United States citizen, or a resident alien who is eligible for and has applied for citizenship? X Yes 🗌 No
Have you ever been convicted of a felony in this state, or convicted of any offense which, if committed in this state, would be a felony? Yes Mo (If yes, please attach a statement describing the offense(s) for which you have been convicted, the date of the conviction(s), and the court(s) that convicted you.)
Pursuant to Ordinance No. 393-98 the following qualifications are required:
A person shall not be eligible for nomination for membership on an assessment appeals board unless he or she has a minimum of five years' professional experience in this state as one of the following: (1) certified public accountant or public accountant; (2) licensed real estate broker; (3) attorney; or (4) property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats.
Please state your qualifications: LICENSED REAL ESTATE BRUCER
Please state your business and/or professional experience: REAL ESTATE SCHER FOR OUGR 25 YEARCH
Occupation: REAL ESTATE BRUIGER Education: MBA FROM U.C.A. BS GIKINGERING
Civic Activities:
Ethnicity (optional): ASIAN Sex (optional): M C F
Other Personal Information (optional)
Would you be able to attend Day Meetings? Yes No Evening meetings? Yes No How many days a week would you be available for hearings? How many evenings a week? How many evenings a week? Have you attended an Assessment Appeals Board meeting? Yes No Appearance before the <i>RULES COMMITTEE</i> is a requirement before any appointment can be made.
Date: 725/2016 Applicant's Signature:
For Office Use Only: Appointed to Board #: Seat #: Term Expires:
Bevised July 2013

50600029-NFH-0029		Date Initial Filing
CALIFORNIA FORM 700	STATEMENT OF ECONOMIC INTERES	TS Received
AIR POLITICAL PRACTICES COMMISSION	COVER PAGE	E-Filed 03/20/2016
	OOVERTAGE	15:30:15 Filing ID:
ease type or print in ink.		159295880
ME OF FILER (LAST)	(FIRST)	(MIDDLE)
ee, John M.	······································	a
Office, Agency, or Court	·	·
Agency Name (Do not use acronyms) City and County of San Francisco	· · · ·	
Division, Board, Department, District, if applicat		
Assessment Appeals Board	Member	
► If filing for multiple positions, list below or or	n an attachment. (Do not use acronyms)	
Agency:	Position:	· ·
		· · · · · · · · · · · · · · · · · · ·
Jurisdiction of Office (Check at lease	-	- (Ot-touldo luciodistion)
Multi-County	Judge or Court Commissione	
X City of		······································
Type of Statement (Check at least on	-	
X Annual: The period covered is January December 31, 2015	/ 1, 2015, through · Leaving Office: Date Left (Check one)	
The period covered is/ December 31, 2015	, through O The period covered is leaving office.	January 1, 2015, through the date o
Assuming Office: Date assumed	_// O The period covered is of leaving office.	, through the date
Candidate: Election Year	and office sought, if different than Part 1:	
Candidate: Election Year Schedule Summary (must complet Schedules attached		
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Schedule Summary (must complet Schedules attached Image: Schedule A-1 - Investments - schedule Image: Schedule A-2 - Investments - schedule	te) ► Total number of pages including this cover ule attached Image: Schedule C - Income, Loans, & ule attached Image: Schedule D - Income - Gifts - state	page:15 Business Positions – schedule attached chedule attached
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SCHEDULE A-1 Investments

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name

Lee, John M

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

Do not attach brokerage or financial statements.

¥	NAME OF BUSINESS ENTITY	1	► NAME OF BUSINESS ENTITY
	Times Warner Cable		Bank of America
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS
•	Cable		Banking
	FAIR MARKET VALUE		FAIR MARKET VALUE
	x \$2,000 - \$10,000		X \$2,000 - \$10,000
	S100,001 - \$1,000,000	11	S100,001 - \$1,000,000
		11	
	NATURE OF INVESTMENT Image: Stock Other		NATURE OF INVESTMENT X Stock Other
	(Describe)		(Describe)
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
			· · · · · · · · · · · · · · · · · · ·
	ACQUIRED DISPOSED		ACQUIRED DISPOSED
►	NAME OF BUSINESS ENTITY		► NAME OF BUSINESS ENTITY
	Intel Corporation		IBM
	GENERAL DESCRIPTION OF THIS BUSINESS.		GENERAL DESCRIPTION OF THIS BUSINESS
	Computers		Commputers
	FAIR MARKET VALUE		FAIR MARKET VALUE
	\$2,000 \$10,000 X \$10,001 - \$100,000		\$2,000 - \$10,000 X \$10,001 - \$100,000
	S100,001 - \$1,000,000 Over \$1,000,000		S100,001 - \$1,000,000
	NATURE OF INVESTMENT Image: Stock		NATURE OF INVESTMENT
	(Describe)		(Describe)
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		Partnership O Income Received of \$0 - \$499
	O Income Received of \$500 of Mote (Report of Schedule C)		O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED		ACQUIRED DISPOSED
<u>.</u>	NAME OF BUSINESS ENTITY	╂╋	► NAME OF BUSINESS ENTITY
	Merck		Microsoft .
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS
	Pharmaceutical		Computers
	FAIR MARKET VALUE		FAIR MARKET VALUE
	\$2,000 - \$10,000		\$2,000 - \$10,000 X \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000		S \$100,001 - \$1,000,000
	NATURE OF INVESTMENT I .stock ☐ Other		NATURE OF INVESTMENT
	(Describe)		(Describe)
-	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		Partnership () Income Received of \$0 - \$499 () Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED	·	ACQUIRED DISPOSED

Comments:

FPPC Form 700 (2015/2016) Sch. A-1 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE A-1 Investments

CALIFC	RNIA F	ORM	00
FAIR POLIT	ICAL PRAC	TICES COM	MISSION

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

Lee, John M.

Do not attach brokerage or financial statements.

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Oracle	Qualcomm
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Software	Computer
FAIR MARKET VALUE	FAIR MARKET VALUE
X \$10,000 - \$10,000 X \$10,001 - \$100,000	X \$10,000 X \$10,000
Store \$1,000,000 Cver \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT
(Describe)	(Describe)
Partnership O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C)	C Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u> </u>	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
LSI Corporation	Time Warner
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Computers	Entertainment
FAIR MARKET VALUE	FAIR MARKET VALUE
X \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	X \$2,000 - \$10,000 □ \$10,001 - \$100,000 □ \$10,001 - \$100,000 □ \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other (Describe)	X Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS	. General Description of This business
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000
S100,001 - \$1,000,000	S100,001 - \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe) Partnership () Income Received of \$0 - \$499	(Describe)
O Income Received of \$500 or More (Report on Schedule C)	O income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
	11

Comments: _

FPPC Form 700 (2015/2016) Sch. A-1 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

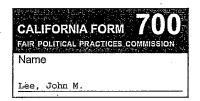
SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name

Lee, John M.

	► 1. BUSINESS ENTITY OF TRUST
SkyHigh Enterprises, Inc	John M Lee and Lily T Lee Revocable Trust
Name	Name
San Francisco, CA 94129	San Francisco, CA 94109
Address (Business Address Acceptable) Check one	Address (Business Address Acceptable) Check one
Trust, go to 2 I Business Entity, complete the box, then go to 2	Trust, go to 2 🔲 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Investments	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: [X] \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION SkyHigh Enterprises, Inc.	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST)	► 2. IDENTIEY THE GROSSINCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSSINCOME <u>TO</u> THE ENTITY TRUST)
X \$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 \$0 OVER \$100,000 \$1,001 - \$10,000 \$10,000
S. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if neurosato) X None or Names listed below:	LIST THE NAME OF FACH REPORTABLE SINGLE SOURCE OF THE NAME OF \$10,000 OR MORE (Alson a separate sheet indection) None or
· · ·	Peter Lowell
	Brett Pameles
4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
	Rental Property
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	X Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)



John M Lee and Lily T Lee Revocable	
Trust (CONTINUATION) Name	Name
Áddress (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999
NATURE OF INVESTMENT Partnership Sole Proprietorship Other Other	NATURE OF INVESTMENT Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000 \$10,000
S 1 LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet) if necessary) None or	S3.LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) None or Names listed below
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST	4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcei Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Rental Property Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	Leasehold Cher
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A- FPPC Advice Email: advice@fppc.ca.go

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

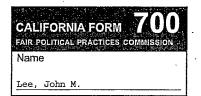


ee,		
	John	

Name	Name
סוווסי	I NGLITO
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one Trust, go to 2 Business Entity, complete the box, then go to	Check one
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
AIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999
VATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT
OUR BUSINESS POSITION	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITYITRUST)	A > 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO F SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499' \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000
3. LIST THE WAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach, a separate sheet if recessory) None or IN Names listed below	A LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Allicin Strategies in the even) None or
4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR	ANVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR
CHEASED BY THE BUSINESS ENTITY OR TRUST Check one box: INVESTMENT INVESTMENT INVESTMENT	
lame of Business Entity, if Investment, <u>or</u> ssessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
ental Property escription of Business Activity <u>or</u> ity or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
AIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
ATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	
Yrs remaining X Check box if additional schedules reporting investments or real property are attached	Yrs. remaining Check box if additional schedules reporting investments or real property are attached

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SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)



➤ 1 BUSINESS ENTIFY OR TRUST John M Lee and Lily T Lee Revocable	► 1. BUSINESS ENTITY OR TRUST
Trust (CONTINUATION) Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 /_///
NATURE OF INVESTMENT Partnership Sole Proprietorship Other Other	NATURE OF INVESTMENT
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST) 	 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$100,000
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) None or Names listed below	S. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach 5 depands shart () here sarr) None or
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▲ INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Rental Property	
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000
NATURE OF INTEREST [쵸] Property Ownership/Deed of Trust	NATURE OF INTEREST
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline:866/275-3772 www.fppc.ca.gov

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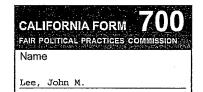
SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)



Lee, John M.

► 1. BUSINESS ENTITY OR TRUST
Name
Address (Business Address Acceptable)
Check one
Trust, go to 2 Business Entity, complete the box, then go
GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
510,001 - \$100,000 ACQUIRED DISPOSED
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000
NATURE OF INVESTMENT
Partnership Sole Proprietorship
Other
YOUR BUSINESS POSITION
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A INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
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Check one box:
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Check one box: INVESTMENT REAL PROPERTY Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
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Check one box: INVESTMENT REAL PROPERTY Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property Description of Business Activity or City or Other Precise Location of Real Property
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SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)



JOIN M. Lee and 1513 Y Lee Revocable Name Address (durines Address Acceptable) Concel coe Concel coe Charles (durines Address Acceptable) Concel coe Concel coe Charles (durines Address Acceptable) Concel coe Status	1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
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Other Other Other YOUR BUSINESS POSITION	NATURE OF INVESTMENT	NATURE OF INVESTMENT
YOUR BUSINESS POSITION	Partnership Sole Proprietorship	
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\$1,001 - \$10,000 \$1,001 - \$10,000 3: LIST THE NAME OF LACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 PMORE Makes of Subsect Processor INCOME OF \$10,000 PMORE Makes of Processor INVESTMENT 4: INVESTMENT INVESTMENT REAL PROPERTY INVESTMENT REAL PROPERTY Name of Business Entity, if Investment, gr Assessor's Parcel Number or Street Address of Real Property Real Property Real Property Property Property ARRKET VALUE IF APPLICABLE, LIST DATE: 152,000 - \$10,000 3: 10,001 - \$1,000,000 ACQUIRED DISPOSED NATURE OF INTEREST MARKET VALUE IF APPLICABLE, LIST DATE: 152,000 - \$10,000 3: 100,001 - \$1,000,000		
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FPPC Form 700 (2015/2016) Sch. A-2		
FPPC Form 700 (2015/2016) Sch. A-2		
	Comments:	FPPC Form 700 (2015/2016) Sch. A-2

FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

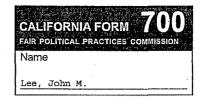
SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)



Lee, John M

Angustan and Lity T Lee Revocable Trust (CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE; \$0 - \$1,999
NATURE OF INVESTMENT	NATURE OF INVESTMENT
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) 	 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RAT SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000	\$10,001 - \$100,000 \$500 - \$1,000 \$10,001 - \$100,000 \$1,001 - \$10,000
X3: LIST THE WAME OF EACH REPORTABLE SINGLE SOURCE OF SINGUE OF SIGNOR MORE (Macha separate small (medistance)) None or Names listed below	S: LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) None or Names listed below
•	
4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Real Property Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 IF APPLICABLE, LIST DATE: \$10,001 - \$100,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Cher	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A- FPPC Advice Email: advice@fppc.ca.gc FPPC Toll-Free Helpline:866/275-3772 www.fppc.ca.gc

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)



► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
John M Lee and Lily T Lee Revocable Trust(CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999
NATURE OF INVESTMENT Partnership Sole Proprietorship Other Other	NATURE OF INVESTMENT
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR 'PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITYTRUST) 	► 2: IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000
3: LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Machine science) and it increases) None or Names listed below	3: LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF: INCOME OF \$10,000 OR MORE (Allech a separate sheet) necessary) None or Names listed below
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
INVESTMENT A REAL PROPERTY	
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Rental Property Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF-APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 ACQUIRED Over \$1,000,000 Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov

Additional Single Sources of Income of \$10,000 or more for John M Lee and Lily T Lee Revocable Trust

John DeFazio Tobi Stuart Alvin Chen Alice Sun Esmeralda Munoz Sarah Arnott Masud Kiburi Cunningham

.

1276

SCHEDU Income, Loans, Positio (Other than Gifts and	, & Business FAIR POLITICAL PRACTICES COMMISSION ons Name Travel Payments) Lee, John M.
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Dignity Health	Pacific Union International
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
San Francisco, CA 94109	San Francisco, CA 94129
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
X \$10,001 - \$100,000 OVER \$100,000	Stopping \$10,001 - \$100,000 SOVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary X Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)
Loan repayment	Loan repayment
Commission or Rental Income, list each source of \$10,000 or more	X Commission or Rental Income, list each source of \$10,000 or more
(Describe)	(Describe)
Other	C Other
(Describe)	(Describe)

> 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*	INTEREST RATE	TERM (Months/Years)
ADDRESS (Business Address Acceptable)	% [None
	SECURITY FOR LOA	N .
BUSINESS ACTIVITY, IF ANY, OF LENDER	None	Personal residence
· · · · · · · · · · · · · · · · · · ·	Real Property	Street address
HIGHEST BALANCE DURING REPORTING PERIOD		Sireet address
\$500 - \$1,000	. —	City
[] \$1,001 - \$10,000		
[] \$10,001 - \$100,000 ·	Guarantor	·
OVER \$100,000	Other	
		(Describe)
		• • •
Comments:		·
		·

FPPC Form 700 (2015/2016) Sch. C FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

Income, Loai Pos	EDULE C ns, & Business sitions and Travel Payments) CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Lee, John M.
NAME OF SOURCE OF INCOME	I. INCOME RECEIVED NAME OF SOURCE OF INCOME
,	
City of San Francisco ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
San Francisco, CA 94103	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
	_
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
□ \$500 - \$1,000 . X \$1,001 - \$10,000 □ \$400,000 . X \$1,001 - \$10,000	
S10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
(For self-employed use Schedule A-2.)	(For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of
Loan repayment	Loan repayment
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
(Дөвсківе)	(Describe)
Other	Other
retail installment or credit card transaction, made in	ial lending institutions, or any indebtedness created as part of a a the lender's regular course of business on terms available to al status. Personal loans and loans received not in a lender's llows: INTEREST RATE TERM (Months/Years)
	%
ADDRESS (Business Address Acceptable) .	
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	
	Real Property Street address
\$500 - \$1,000	City
\$1,001 - \$10,000	Guarantor
\$10,001 - \$100,000	
OVER \$100,000	Other
· · · ·	(Describe)
Comments:	
	FPPC Form 700 (2015/2016) Sch. C FPPC Advice Email: advice@fppc.ca.gov FPPC Toli-Free Helpine: 866/275-3772 www.fppc.ca.gov
	FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.go

SCHEDULE E

Income – Gifts Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM 700
Name
Lee, John M.

- Mark either the gift or income box.
- Mark the 501(c)(3) box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$460 gift limit, but may result in a disqualifying conflict of interest.
- For gifts of travel that occurred on or after January 1, 2016, provide the travel destination.

NAME OF SOURCE (Not an Acronym)	NAME OF SOURCE (Not an Acronym)		
San Francisco Association of Realtors			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
CITY AND STATE	CITY AND STATE		
San Francisco, CA 94102			
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE(S): <u>01 / 01 / 15</u> - <u>12 / 31 / 15</u> AMT: <u>998.71</u> (If giff)	DATE(S):// AMT: \$		
MUST CHECK ONE: Gift -or- X Income	► MUST CHECK ONE: Gift -or- Cincome		
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel		
X Other - Provide Description Reimbursement for travel	Other - Provide Description		
expenses to various conferences on behalf of SFAR.			
If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination		
NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
CITY AND STATE	CITY AND STATE		
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE(S):// AMT: \$	DATE(S):// AMT: \$		
MUST CHECK ONE: Gift -or- Income	► MUST CHECK ONE: Gift -or- Income		
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel		
Other - Provide Description	Other - Provide Description		
If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination		
	· · · · · · · · · · · · · · · · · · ·		
Comments:			
· · · · · · · · · · · · · · · · · · ·			

Assessment Appeals Board City and County of San Francisco (415) 554-6778 Fax (415) 554-6775



City Hall, Room 405 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102-4697

Complete and return this original Application to the Assessment Appeals Board
Application for Appointment to:Board 1orBoard 1 Alternate(Please circle one)Board 2orBoard 2 AlternateBoard 3orBoard 3 Alternate
Enter your name, mailing address and daytime telephone number in the spaces provided. Because this form is a document available for public review, you may list your business/office address, telephone number and e-mail address in lieu of your home address or other personal contact information.
Do you authorize release of your private/personal information? 🗭 yes 🗌 no
Name: MERVIN I. CONLAN Home Address: 16 Th AVE
City: SAN FRANCISCO State: CA Zip code: 94118
Business Add <u>ress: 333-16th AUE</u> City: <u>SF</u> State: <u>CA</u> Zip Code: <u>94118</u>
Home Phone, Work Phone /5-751-6132 Fax #: NA
Pager #: NA E-Mail Address: MERU- CONLAN @ SBC GLOBAL. NOT
Are you a United States citizen, or a resident alien who is eligible for and has applied for citizenship? 🔀 Yes 🗌 No
Have you ever been convicted of a felony in this state, or convicted of any offense which, if committed in this state, would be a felony? Yes No (If yes, please attach a statement describing the offense(s) for which you have been convicted, the date of the conviction(s); and the court(s) that convicted you.)
Pursuant to Ordinance No. 393-98 the following qualifications are required:
A person shall not be eligible for nomination for membership on an assessment appeals board unless he or she has a minimum of five years' professional experience in this state as one of the following: (1) certified public accountant or public accountant; (2) licensed real estate broker; (3) attorney; or (4) property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats.
Please state your qualifications: <u>Real ESTATE ApprilisER/Broken</u>
Please state your business and/or professional experience: <u>5415 Real Site Brokerage</u> 25415 Real ESTATE Appraising
Occupation: Real ESTATE Appraisen Education: BA ECON 2425 Grad ECON
Civic Activities: MEMber ASSESSMENT Appeals Board #2
Ethnicity (optional): White Sex (optional): KM [F
Other Personal Information (optional)
Would you be able to attend Day Meetings? Image: Sector of the secto
Appearance before the RULES COMMITTEE is a requirement before any appointment can be made. Please Note: Your application will be retained for one year Date: 8/9/16 Applicant's Signature: 1000000000000000000000000000000000000
For Office Use Only: Appointed to Board #: Seat #: Term Expires:

CALIFORNIA FORM 700 STATEMENT FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT	OF ECONOMIC INTERESTS COVER PAGE	Date Initial Filing Received official Use Only E-Filed 03/25/2016 14:01:42
Please type or print in ink.		Filing ID: 159870786
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Conlan, Mervin Ignatius		•
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	•
Assessment Appeals Board	Member	
► If filing for multiple positions, list below or on an attachment. (Do not	use acronyms)	
· · · · · ·		
Agency:	Position:	· · · · · · · · · · · · · · · · · · ·
. Jurisdiction of Office (Check at least one box)		
x State	Judge or Court Commissioner (Statewide Juri-	sdiction)
X Multi-County San Francisco	I County of San Francisco	
X City of San Francisco	Other	
 Type of Statement (Check at least one box) Annual: The period covered is January 1, 2015, through December 31, 2015 -or- The period covered is, through December 31, 2015 	 Leaving Office: Date Left/	
Assuming Office: Date assumed//	O The period covered is/	, through the date
Candidate: Election Year and office sought,	if different than Part 1:	······
4. Schedule Summary (must complete) ► Total numbe Schedules attached	r of pages including this cover page:4	
 Schedule A-1 - Investments – schedule attached Schedule A-2 - Investments – schedule attached Schedule B - Real Property – schedule attached 	 Schedule C - Income, Loans, & Business Position Schedule D - Income - Gifts - schedule attached Schedule E - Income - Gifts - Travel Payments - 	
□ None - No reportable interests on any schedule		
Verification		
MAILING ADDRESS STREET CITY	STATE ZI	P CODE
(Business or Agency Address Recommended - Public Document)	····	
DAYTIME TELEPHONE NUMBER	n Francisco CA 9	4118
I have used all reasonable diligence in preparing this statement. I have r herein and in any attached schedules is true and complete. I acknowle		e information contained
I certify under penalty of perjury under the laws of the State of Cal	· ·	· ·
Date Signed03/25/2016	Signature <u>Mervin Ignatius Conlan</u> (File the originally signed statement with your fi	ing official.)
		Form 700 (2015/2016 : advice@fppc.ca.go 3772 www.fppc.ca.go

SCHEDULE A-1

CALIFORNIA FORM 7000 FAIR POLITICAL PRACTICES COMMISSION Name Conlan, Mervin Ignatius

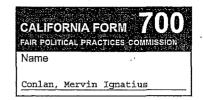
Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

►	NAME OF BUSINESS ENTITY	IΓ	► NAME OF BUSINESS ENTITY
	Ed Jones		
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS
	Investment advisory		
	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 Over \$1,000,000		FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT Stock Stocks/bonds/mutual funds (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	//// ACQUIRED DISPOSED		///// ACQUIRED DISPOSED
>	NAME OF BUSINESS ENTITY	T	► NAME OF BUSINESS ENTITY
	GENERAL DESCRIPTION OF THIS BUSINESS		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		FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000
	NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED		ACQUIRED DISPOSED
•	NAME OF BUSINESS ENTITY	╉	► NAME OF BUSINESS ENTITY
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS
	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 \$0ver \$1,000,000		FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 Over \$1,000,000
	NATURE OF INVESTMENT		NATURE OF INVESTMENT
	(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		(Describe)
	IF APPLIÇABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
			//// ACQUIRED DISPOSED
Co	mments:	,-	

FPPC Form 700 (2015/2016) Sch. A-1 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)



> 1. BUSINESS ENTITY OR TRUST	>AHBUSINESS ENTITY OR TRUSH
Conlan Appraisers	
Name	Name
San Francisco, CA 94118	·
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one Trust, go to 2 I Business Entity, complete the box, then go to 2	Check one
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Real Estate Appraisal	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0\$1,999
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Other YOUR BUSINESS POSITION Owner	YOUR BUSINESS POSITION
 2: IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST) 	▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
□ \$0 - \$499	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a scenario street if necessary) X None or Names listed below	AT LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Atlach o separate street if recessing) None or I Names listed below
	······································
 4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST 	4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST.
Check one box:	Check one box:
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST
Leasehold Dther	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline:866/275-3772_www.fppc.ca.gov

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SCHEDU Income, Loans, Positi (Other than Gifts and	, & Business FAIR POLITICAL PRACTICES COMMISSION Name
	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Conlan Appraisers	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
San Francisco, CA 94118	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Real Estate Appraising	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Owner .	
	GROSS INCOME RECEIVED
GROSS INCOME RECEIVED	\$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of
(Real property, car, boat, etc.)	(Real property, car, boal, etc.)
Li Luan repayment	
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
(Describe)	(Describe)
X Other professional fees	Other
(Describe)	(Describe)

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*	INTEREST RATE	TERM (Months/Years)
ADDRESS (Business Address Acceptable)	% [] None	
		nal residence
BUSINESS ACTIVITY, IF ANY, OF LENDER	· · ·	
HIGHEST BALANCE DURING REPORTING PERIOD		Street address
\$500 - \$1,000		City
\$1,001 - \$10,000	. Guarantor	· · · · · · · · · · · · · · · · · · ·
\$10,001 - \$100,000 Ver \$100,000		
OVER \$100,000	. Other	(Describe)
	•	
Comments:	·	· · ·
	FPPC	FPPC Form 700 (2015/2016) Sch. C Advice Email: advice@fppc.ca.gov ine: 866/275-3772 www.fppc.ca.gov

Assessment Appeals Board City and County of San Francisco

(415) 554-6778 Fax (415) 554-6775



City Hall, Room 405 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102-4697

no

Alternate Alternate Alternate

Complete and return this original Application to the Assessment Appeals Board

Application for Appointment to:	·	Board 1	or	Board 1
(Please circle one)		Board 2	or	Board 2
		Board 3	or	Board 3

Enter your name, mailing address and daytime telephone number in the spaces provided. Because this form is a document available for public review, you may list your business/office address, telephone number and e-mail address in lieu of your home address or other personal contact information.

Do you authorize release of your private/personal information?

Name: Yosef Tahbazof Home Address: -

City: - State: - Zip code: -

Business Address: 1256 Howard Street City: San Francisco State: CA Zip Code: 94103

Home Phone: Work Phone: 415-922-0200 x 111 Fax #: 415.922.0203

Pager #: N.A. E-Mail Address: yosef@tahbazoflaw.com

Are you a United States citizen, or a resident alien who is eligible for and has applied for citizenship? 🛛 Yes 🗌 No

Have you ever been convicted of a felony in this state, or convicted of any offense which, if committed in this state, would be a felony? Yes Xo

(If yes, please attach a statement describing the offense(s) for which you have been convicted,

the date of the conviction(s), and the court(s) that convicted you.)

Pursuant to Ordinance No. 393-98 the following qualifications are required:

A person shall not be eligible for nomination for membership on an assessment appeals board unless he or she has a minimum of five years' professional experience in this state as one of the following: (1) certified public accountant or public accountant; (2) licensed real estate broker; (3) attorney; or (4) property appraiser accredited by a nationally recognized professional organization, or property appraiser certified by either the Office of Real Estate Appraiser or by the State Board of Equalization. Documentation of qualifying experience must be submitted with this application form. This requirement does not apply to incumbent board members nominated for appointment to their same seats.

Please state your qualifications: Real estate attorney, background in accounting, experience as AAB commissioner (Board 2 and 3).

Please state your business and/or professional experience: Licensed attorney specializing in real estate law, including transactional assistance for acquisition and sales as well as property management supervision. I've also worked with PWC as a tax accountant (not a CPA) and been a member of the AAB (Board 2 and 3).

Occupation: Lawyer. Education: Undergrad in accounting; JD.

Civic Activities: Campaign volunteer.

Ethnicity (optional): - Sex (optional): M .

Other Personal Information (optional) -

Would you be able to attend Day Meetings? Xes No Evening meetings? Xes No How many days a week would you be available for hearings? As necessary. How many evenings a week? As necessary.

Have you attended an Assessment Appeals Board meeting? 🛛 Yes 🗌 No

Appearance before the RULES COMMITTEE is a requirement before any appointment can be made. Please Note: Your application will be retained for one year

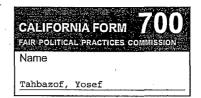
Date:

Applicant's Signature:

Revised July 2013

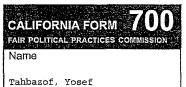
CALIFORNIA FORM 700 S		Date Initial Film Received
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IE OF FILER (LAST)	(FIRST)	(MIDDLE)
hbazof, Yosef		
Office, Agency, or Court		
Agency Name (Do not use acronyms)		
City and County of San Francisco		
Division, Board, Department, District, if applicable	Your Position	
Assessment Appeals Board	Member	
 If filing for multiple positions, list below or on an al 	ttachment. (Do not use acronyms)	
Agency;	Position:	
Jurisdiction of Office (Check at least one	box)	
x State	Judge or Court Commissioner (Statewi	•
Multi-County	X County of San Francisco	· · · · · · · · · · · · · · · · · · ·
X City of San Francisco	Other	
Type of Statement (Check at least one box,		
X Annual: The period covered is January 1, 20		I
December 31, 2015	(Check one)	********
-or- The period covered is/ December 31, 2015	, through O The period covered is January leaving office.	1, 2015, through the date
Assuming Office: Date assumed/	O The period covered is/ of leaving office.	, through the date
Candidate: Election Year	and office sought, if different than Part 1:	
Schedule Summary (must complete)	► Total number of pages including this cover page:	28
Schedules attached		
Schedule A-1 - Investments - schedule atta	ached Schedule C - Income, Loans, & Business I	Positions - schedule attache
X Schedule A-2 - Investments - schedule atta		
X Schedule B - Real Property – schedule atta	ached Schedule E - Income - Gifts - Travel Payr	ments - schedule attached
		nents - schedule attached
		nents – schedule attached
r-		nents – schedule attached
r- Description None - No reportable interests on any Verification MAILING ADDRESS STREET		nents – schedule attached ZIP CODE
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SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)



► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Tahbazof Law Firm, LLP	SST Investments, LLC
Name .	Name
San Francisco, CA 94103	San Francisco, CA 94103
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one Trust, go to 2 I Business Entity, complete the box, then go to 2	Check one
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	Real estate development & investment
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
□ \$2,000 - \$10,000//	\$2,000 - \$10,000/
\$10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000 \$100,001 \$100,000 \$100,	\$10,001 - \$100,000 ACQUIRED DISPOSED
Over \$1,000,000	X Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship X LLP	Partnership Sole Proprietorship : X LLC
YOUR BUSINESS POSITION Partner	YOUR BUSINESS POSITION
2 IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	2: IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
□ \$0 - \$499	\$0 - \$499 X \$10,001 - \$100,000
S500 - \$1,000 OVER \$100,000	↓↓ \$500 - \$1,000
L] \$1,001 - \$10,000	
 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) 	3: LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)
X None or Names listed below	X None or Names listed below
	·
 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST 	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
INVESTMENT REAL PROPERTY	
Name of Business Entity, if Investment, or	Name of Business Entity, If Investment, or
Assessor's Parcel Number or Street Address of Real Property	Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or	San Jose Description of Business Activity <u>or</u>
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000	\$2,000 - \$10,000
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NATURE OF INTEREST	
Property Ownership/Deed of Trust	NATURE OF INTEREST
L Leasehold Other	Leasehold Other Yrs. remaining
Check box if additional schedules reporting investments or real property are attached	X Check box if additional schedules reporting investments or real property are attached
Commenter	FPPC Form 700 (2015/2016) Sch. A-2
Comments:	FPPC Advice Email: advice@fppc.ca.gov

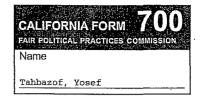
SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts



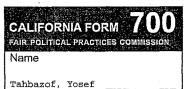
(Ownership Interest is 10% or Greater)

STTE Trave strendts, LLC Name Sam Prancisco, Ch. 94103 Address (Bachnes Address Acceptable) Check and San States San States <t< th=""><th>► 1. BUSINESS ENTITY OR TRUST</th><th>► 1. BUSINESS ENTITY OR TRUST</th></t<>	► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
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San Francisco Description of Business Activity or City or Other Precise Location of Real Property FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000 \$10,001 - \$100,000 \$10,001 - \$100,000 \$10,001 - \$100,000 \$10,001 - \$100,000 ACQUIRED DISPOSED \$10,001 - \$10,000,000 NATURE OF INTEREST Y Property Ownership/Deed of Trust Stock Pathership Other Leasehold Other Yrs. remaining Other X Check box if additional schedules reporting investments or real property are attached Other FPPC Form 700 (2015/2016) Sch. A-2	Name of Business Entity, if Investment, <u>or</u>	Name of Business Entity, if investment, or
Description of Business Activity or City or Other Precise Location of Real Property FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 \$10,001 - \$1,000,000 X Over \$1,000,000 NATURE OF INTEREST Property Ownership/Deed of Trust Stock Property Ownership/Deed of Trust Stock Other Other Check box if additional schedules reporting investments or real property are attached Other FPC Form 700 (2015/2016) Sch. A-2	Assessor's Parcel Number or Street Address of Real Property	Assessor's Parcel Number or Street Address of Real Property
City or Other Precise Location of Real Property City or Other Precise Location of Real Property FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$\$10,001 - \$100,000		
\$2,000 - \$10,000 /_// \$10,001 - \$100,000 /_// \$10,001 - \$1,000,000 ACQUIRED DISPOSED \$10,001 - \$1,000,000 NATURE OF INTEREST Disposed X Property Ownership/Deed of Trust Stock Yrs. remaining Other X Check box if additional schedules reporting investments or real property are attached Other Yrs. remaining Other Yrs. remaining Property Check box if additional schedules reporting investments or real property are attached		
\$10,001 - \$100,000 ////////////////////////////////////	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$100,001 - \$1,000,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000 ACQUIRED DISPOSED NATURE OF INTEREST Over \$1,000,000 NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership Leasehold Other Other Other Other Other Other X Check box if additional schedules reporting investments or real property are attached Other Other Other Yrs. remaining Check box if additional schedules reporting investments or real property are attached Property Courses in additional schedules reporting investments or real property are attached PPPC Form 700 (2015/2016) Sch. A-2		
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Image: Stock in the state		
Leasehold Other Other Other Other Other X Check box if additional schedules reporting investments or real property are attached FPPC Form 700 (2015/2016) Sch. A-2		
Yrs. remaining Yrs. remaining X Check box if additional schedules reporting investments or real property are attached Check box if additional schedules reporting investments or real property are attached FPPC Form 700 (2015/2016) Sch. A-2		
are attached I are attached FPPC Form 700 (2015/2016) Sch. A-2		
Comments: FPPC Advice Email: advice@fppc.ca.gov	Comments:	

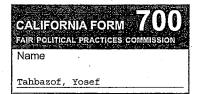
SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)



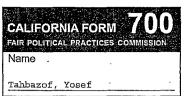
> 7. BUSINESS ENTITY OR TRUST	
SST Investments, LLC (CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 /_/ \$2,000 - \$10,000 / \$10,001 - \$100,000 ACQUIRED \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 ////////////////////////////////////
NATURE OF INVESTMENT Partnership Sole Proprietorship Other Other	NATURE OF INVESTMENT
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000
2: LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF S10000 OR MORE (Atlack's separate sheet if necessary) None or Names listed below	State Control of the second stress of the seco
4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	► 4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcei Number or Street Address of Real Property
San Francisco Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fopc.ca.gov



► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
SST Investments, LLC(CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one '	Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 // \$2,000 - \$10,000 // \$10,001 - \$100,000 ACQUIRED \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST)	 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000	□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000
Si LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) None or Names listed below	3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) None or Names listed below
4: INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	► 4: INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property San Francisco	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

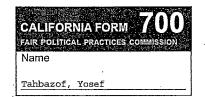


	>1 BUSINESS ENTITY OR TRUST
SST Investments, LLC(CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE; LIST DATE: \$0 - \$1,999
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA' SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/I RUST)	2: IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA) SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000	\$10,001 - \$100,000 \$500 - \$1,000 \$10,001 - \$100,000 \$1,001 - \$10,000
G. UST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE TAmento separate shift durenteen J None or Names listed below	S. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a senate shart if necessary) None .or Names listed below
4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	► 4: INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
San Francisco Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 IF APPLICABLE, LIST DATE: \$10,001 - \$100,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000
NATURE OF INTEREST	NAŢURE OF INTEREST
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline:866/275-3772 www.fppc.ca.gov

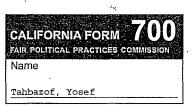


1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
SST Investments, LLC(CONTINUATION)	·
Namė	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one Trust, go to 2 . Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999
NATURE OF INVESTMENT Partnership Sole Proprietorship Other Other	NATURE OF INVESTMENT
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
 2: IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) 	2: IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000
A. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) None or Names listed below	S. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) None or Names listed below
 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST. 	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST.
Check one box: Investment REAL PROPERTY	Check one box:
480 Potrero	
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
San Francisco Description of Business Activity <u>or</u>	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	Leasehold [] Other
Check box if additional schedules reporting investments or real property are attached	Yrs. remaining Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Heipline: 866/275-3772 www.fppc.ca.gov

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

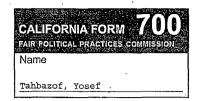


► 1. BUSINESS ENTITY OF TRUST	> 1. BUSINESS ENTITY OR TRUST
SST Investments, LLC(CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
□ \$0 - \$1,999	\$0 - \$1,999
\$2,000 - \$10,000	□ \$2,000 - \$10,000
\$10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000	□ \$10,001 - \$100,000 ACQUIRED DISPOSED □ \$100,001 - \$1,000,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship	Partnership Sole Proprietorship
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
L	
 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) 	▶ 2 IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
□ \$0 - \$499	\$0 - \$499 \$10,001 - \$100,000
S500 - \$1,000 OVER \$100,000	5500 - \$1,000 OVER \$100,000
\$1,001 - \$10,000	\$1,001 - \$10,000
 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet it necessary) 	3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$19,000 OR MORE (Attach a separate sheet if newspary)
None or Names listed below	None or Names listed below
••••••••••••••••••••••••••••••••••••••	
	A INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR
▲4: INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	LEASED BY THE BUSINESS ENTITY OR TRUST
. Check one box:	Check one box:
INVESTMENT	
Name of Business Entity, if Investment, or	Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property	Assessor's Parcel Number or Street Address of Real Property
San Francisco	· · · · · · · · · · · · · · · · · · ·
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
[\$2,000 - \$10,000 [\$10,001 - \$100,000	[] \$2,000 - \$10,000 ∫ \$10,001 - \$100,000/
S100,001 - \$1,000,000 ACQUIRED DISPOSED	S100,001 - \$1,000,000 ACQUIRED DISPOSED
X Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
T Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Yrs. remaining X Check box if additional schedules reporting investments or real property	Yrs. remaining Check box if additional schedules reporting investments or real property
are attached	are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.go

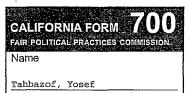


> 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
SST Investments, LLC (CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS .
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$0 - \$1,999	□ \$0 - \$1,999
\$2,000 - \$10,000	
\$10,001 - \$100,000 ACQUIRED DISPOSED	S10,001 - \$100,000 ACQUIRED DISPOSED
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000	S100,001 - \$1,000,000
NATURE OF INVESTMENT	
Partnership Sole Proprietorship	NATURE OF INVESTMENT
Other	Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST)	► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
SHARE OF THE GROSSINCOME TO THE ENTITY (RUST)	SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST
□ \$0 - \$499 □ \$10,001 - \$100,000	\$0 - \$499
S500 - \$1,000 OVER \$100,000	500 - \$1,000 OVER \$100,000
LJ \$1,001 - \$10,000	
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if measure)	 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)
None or Names listed below	None or Names listed below
	· · · · · · · · · · · · · · · · · · ·
A INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR
LEASED BY THE BUSINESS ENTITY OR TRUST	LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
	INVESTMENT REAL PROPERTY.
	· ·
Name of Business Entity, if Investment, or	Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property	Assessor's Parcel Number or Street Address of Real Property
San Francisco	
Description of Business Activity or	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
[] \$10,001 - \$100,000/	\$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED	S100,001 - \$1,000,000 ACQUIRED DISPOSED
T Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
The Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property	Check box if additional schedules reporting investments or real property
are attached	are attached
	FPPC Form 700 (2015/2016) Sch. A-2
Comments:	FPPC Advice Email: advice@fppc.ca.gov
•	FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

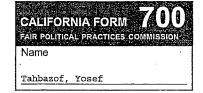
SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)



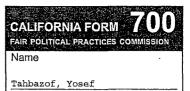
>1. BUSINESS ENTITY OR TRUST	
SST Investments, LLC (CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
-FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
50 - \$1,999	\$0 - \$1,999
\$2,000 - \$10,000 \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED	
\$100,001 - \$1,000,000	\$100,001 - \$1,000,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship	Partnership Sole Proprietorship Conter
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	> 2 IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000	□ \$0 - \$499 □ \$10,001 - \$100,000
U \$500 - \$1,000 OVER \$100,000	Stoo - \$1,000 OVER \$100,000
L] \$1,001 - \$10,000	
3: LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate street if more same)	3: LIST-THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate street of parcesser))
None or Names listed below	None or Names listed below
······································	· · · · · · · · · · · · · · · · · · ·
	<u></u>
▲ 1 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST.	▲ INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
· ·	
Name of Business Entity, if investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
San Francisco	
Description of Business Activity or	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000	\$2,000 - \$10,000
[] \$10,001 - \$100,000//	\$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED Acquires \$1,000,000<	Stoo,001 - \$1,000,000 ACQUIRED DISPOSED
^A Over \$1,000,000	
	NATURE OF INTEREST
Property Ownership/Deed of Trust	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property	Yrs. remaining Check box if additional schedules reporting investments or real property
are attached	are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.go
	TELO MUNICE ENAUL AUVICEIU/IDDC.CO.00



> 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
SST Investments, LLC(CONTINUATION)	
Name	Name .
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE;	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$0 - \$1,999	\$0 - \$1,999
\$2,000 - \$10,000	\$2,000 - \$10,000
\$10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000	10,001 - \$10,000 \$10,001 - \$1,000,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship Other	Partnership Sole Proprietorship
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
	22 IDEM IEVATHE GROSSINGOME RECEIVED VINGUIDE YOUR PROTRATA
2: IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST).	24 IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
\$10,001 - \$100,000	. \$0 - \$499 S10,001 - \$100,000
□ \$500 - \$1,000 □ OVER \$100,000	S500 - \$1,000 OVER \$100,000
	THE ISTATILE NAME OF EACH REPORTABLE SINGLE SOURCE OF
INCOME OF \$10,000 OR MORE (Attack a separate sheet if necessary)	INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)
None or Names listed below	None or Names listed below
······	
A INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR	► 4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR
LEASED BY THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
	INVESTMENT REAL PROPERTY
Name of Business Entity, if Investment, or	Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property	Assessor's Parcel Number or Street Address of Real Property
San Francisco Description of Business Activity <u>or</u>	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 - \$100,000	\$10,001 - \$100,000 /
Cver \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Trust Distock Partnership/Deed of Trust Stock	Property Ownership/Deed of Trust
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
	FPPC Form 700 (2015/2016) Sch. A-2
Comments:	FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

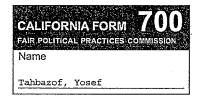


	AT BUSINESS FIGHT UK IKUSI
SST Investments, LLC(CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 ////////////////////////////////////	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Partnership Partnership Sole Proprietorship YOUR BUSINESS POSITION Other
22. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTIFY/(RUST) □ \$0 - \$499 □ \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$10,000 \$10,000 \$10,000	> 2: IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA' SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) \$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$10,001 - \$10,000 \$10,000
Stillst THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF SIN 000 OR MORE (Mast a separate shad in decising) None or Names listed below	S. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Atlach & Explanate Sheat If recessary) None or Names listed below
	·
▲ INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	► 4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
INVESTMENT	
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Reai Property
San Francisco Description of Business Activity <u>or</u>	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE; \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 ////////////////////////////////////
NATURE OF INTEREST [X] Property Ownership/Deed of Trust Interstore Partnership	NATURE OF INTEREST
Leasehold Other	Leasehold Other
Yrs. remaining Yrs. remaining X Check box if additional schedules reporting investments or real property are attached	Yrs. remaining Yrs. remaining Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline:866/275-3772 www.fppc.ca.gov



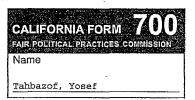
► 1. BUSINESS ENTITY OF TRUST	► 1. BUSINESS ENTITY OR TRUST
SST Investments, LLC(CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED \$100,001 - \$1,000,000 Over \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT
Partnership Sole Proprietorship Other Other	Partnership Sole Proprietorship Other Other YOUR BUSINESS POSITION
2: IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST)	
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000	□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000
S. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Allocity separate affect if increasing) None or Names listed below	3: LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate check if necessary.) None or Names listed below
4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
San Francisco Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	Leasehold Other
Yrs. remaining Check box if additional schedules reporting investments or real property are attached	Yrs. remaining Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline:866/275-3772 www.fppc.ca.gov

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

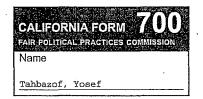


1. BUSINESS ENTITY OR TRUST	► 1. BUSINESSIENTITY OF TRUST
SST Investments, LLC(CONTINUATION) Name	Name
Address (Business Address Acceptable) Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Address (Business Address Acceptable) Check one Trust, go to 2 Dusiness Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 Qver \$1,000,000 NATURE OF INVESTMENT Partnership Sole Proprietorship Other	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999
2: IDENTIFY THE GROSSINCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSSINCOME TO THE ENTIFY/TRUST) \$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000 \$10,001	>23 DENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PROTATA SHARE OF THE GROSS INCOME TO THE ENTRY/TRUST) \$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$10,001 \$100,000
S LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a contract solid) (Interesting) None or Names listed below	3.1 LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach & separate sheat if necessary) None or Names listed below
A INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:	A INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
San_Francisco Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fopc.ca.gov

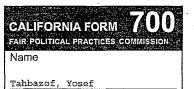
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov



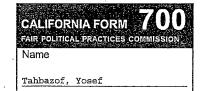
► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
SST Investments, LLC (CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Partnership Sole Proprietorship Other	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 //
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
21 DENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) \$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$10,001 - \$100,000 \$10,001 - \$100,000	2 IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) \$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000 OVER \$100,000
SULIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attache separate sheet (recession) None or Names listed below	S. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a contraty shad if necessary) None or
	· · · ·
 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST. 	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
San Francisco Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	Leasehold Other
Yrs. remaining Check box if additional schedules reporting investments or real property are attached	Yrs. remaining Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov



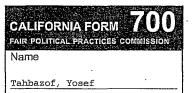
►1 BUSINESS ENTITY OR TRUST	> 1 BUSINESS ENTITY OR TRUST
SST Investments, LLC(CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 ////////////////////////////////////
NATURE OF INVESTMENT	NATURE OF INVESTMENT
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST)	2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITYITRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000 OVER \$100,000
SUMENTIAL NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE AVENUE CONTROL OF None or Names listed below	3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a connect street if necessary) None or Names listed below
	· · · · · · · · · · · · · · · · · · ·
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	▲ INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
San Francisco Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST [X] Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST
Leasehold Other	· Leasehold Other
X Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline:866/275-3772 www.fppc.ca.gov



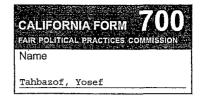
> 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
SST Investments, LLC (CONTINUATION)	
Name .	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 /
NATURE OF INVESTMENT	NATURE OF INVESTMENT
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST)	2: IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITYITRUST)
\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000	\$10,001 - \$100,000 \$500 - \$1,000 \$10,001 - \$10,000 \$1,001 - \$10,000
SPLIST THE NAME OF EACH REPORTABLE SINGLE SOURCE (OF INCOME OF \$10,000 OR MORE (And a source safet in rest ser)) None or Names listed below .	States of the NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a sense of other it accessing) None or Names listed below
4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
San Francisco Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: [2] \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	Leasehold Other
Yrs. remaining Check box if additional schedules reporting investments or real property are attached	Yrs. remaining Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov



SST Investments, LLC(CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITYTRUST)	> 2 JDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) \$ 0 - \$499 \$ 10,001 - \$100,000
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000
31 LISE THE NAME OF EACH REPORTABLE SINGLE SOURCE OF TNCOME OF \$10,000 OR MORE (Allest contract should have any) None or Names listed below	3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheat it meressay) None or Names listed below
4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST.
Check one box:	Check one box:
INVESTMENT A REAL PROPERTY	
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
San Francisco Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: ☐ \$2,000 - \$10,000
\$10,001 - \$100,000/ /	\$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED A Over \$1,000,000	\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST Image: Antice and the second state of the se	NATURE OF INTEREST
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline:866/275-3772 www.fppc.ca.gov

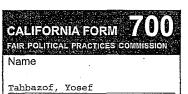


► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
SST Investments, LLC(CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 ////////////////////////////////////
NATURE OF INVESTMENT Partnership Sole Proprietorship Other YOUR BUSINESS POSITION	NATURE OF INVESTMENT Partnership Sole Proprietorship Other YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITYITRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000	\$10,001 - \$100,000 \$500 - \$1,000 \$10,001 - \$100,000 \$1,001 - \$10,000
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF S10,000 OR MORE (Attach A separate sheet (represent)) None or Names listed below	S. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Atlack a separate start if necessary) None or Names listed below
4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property San Francisco	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 /	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	Leasehold Other
 Check box if additional schedules reporting investments or real property are attached 	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

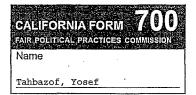


> TEBUSINESS ENTITY OF TRUST	PATHOSIN⊕STEIMITE UKSIKUSI
SST Investments, LLC(CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS.BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPUCABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999
 22 IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST) 	2 IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR 'PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000
ALLISTFTHE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE Magua separato sheet if necessary) None or Names listed below	S. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Alloch 3 separate sheet if necessary) None or Names listed below
◆ 4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST.	 4: INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST.
Check one box:	Check one box:
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
San Francisco	· · · · · · · · · · · · · · · · · · ·
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000	\$2,000 - \$10,000
\$10,001 - \$100,000ACQUIRED DISPOSED	\$10,001 - \$1,000,000
Account 51,000,000 Account 51,000,000 Account 5	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
C Leasehold Other	Leasehold Other
Yrs. remaining Check box if additional schedules reporting investments or real property are attached	Yrs. remeining Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline:866/275-3772 www.fppc.ca.gov

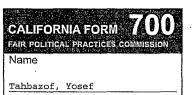
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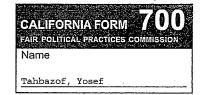
► 1, BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
SST Investments, LLC (CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$0 - \$1,999 \$2,000 - \$10,000	□ \$0 - \$1,999 □ \$2,000 - \$10,000//////
\$10,001 - \$100,000 ACQUIRED DISPOSED	S10,001 - \$100,000 ACQUIRED DISPOSED
S100,001 - \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship	Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) 	► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
□ \$0 - \$499	□ \$0 - \$499 □ \$10,001 - \$100,000
Store \$1,000 OVER \$100,000	\$500 - \$1,000 OVER \$100,000
L \$1,001 - \$10,000	[] \$1,001 - \$10,000
 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) 	► 3: LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate since (Inspession)).
None or Names listed below	None or Names listed below
 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST 	 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
Name of Business Entity, if Investment, or	Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property San Francisco	Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 · ACQUIRED DISPOSED	\$100,001 - \$1,000,000 ACQUIRED DISPOSED
△ Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST Image: Start Structure Image: Start S	NATURE OF INTEREST
Leasehold Cther	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
	FPPC Form 700 (2015/2016) Sch. A-2
Comments:	FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline:866/275-3772 www.fppc.ca.gov



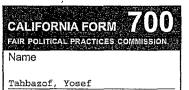
2418USINESS ENTITYOR IRUSI	DATABUSINESS FRATILY OR TRUST
SST Investments, LLC(CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE. IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999
NATURE OF INVESTMENT	NATURE OF INVESTMENT
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000	□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000
SUBSET THE MAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF S10,000 OR MORE (all all a social to all and a social to all all all all all all all all all al	3. LISH THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE Attach a service sheart necessary) None or Names listed below
· · ·	
A INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST.	▲ INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST.
Check one box:	Check one box:
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
San Francisco Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST [최] Property Ownership/Deed of Trust [] Stock [] Partnership	NATURE OF INTEREST
Leasehold Other	Leasehold
Yrs. remaining Check box if additional schedules reporting investments or real property are attached	Yrs. remaining Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov



► 1. BUSINESS ENTITY OR TRUST	> 1. BUSINESS ENTITY OR TRUST
SST Investments, LLC(CONTINUATION)	
Name	Name
	· · ·
Address (Business Address Acceptable) Check one	Address (Business Address Acceptable) Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE; \$0 - \$1,999 \$2,000 - \$100,000 \$100,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Partnership Sole Proprietorship Other	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED \$100,001 - \$1,000,000 Over \$1,000,000 Over \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) 50 - \$499	2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTIFYITRUST) 30 - \$499 \$10,001 - \$100,000
□ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000	S500 - \$1,000 OVER \$100,000
32 LISIT THEINAME OF EACH REPORTABLE SINGLE SOURCE OF UNCOME OF \$10,000 OR MORE (Atlant & separate sheet tracessary) None or Names listed below	3: LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate street if necessary) None or
▲ INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
San Francisco Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: ¹ ¹ ² ¹ ¹⁰⁰⁰⁰ ¹ ¹⁰⁰⁰⁰ ¹ ¹⁰⁰⁰⁰⁰ ¹⁰⁰⁰⁰⁰ ¹⁰⁰⁰⁰⁰⁰ ¹⁰⁰⁰⁰⁰⁰⁰⁰⁰ ¹⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰⁰	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST 전 Property Ownership/Deed of Trust	NATURE OF INTEREST
Leasehold Other	Leasehold Other
Yrs. remaining Check box if additional schedules reporting investments or real property are attached	Yrs. remaining Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Heipline: 866/275-3772 www.fppc.ca.gov

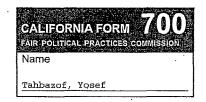


> 1. BUSINESS ENTITY OR TRUST	>1. BUSINESS ENTITY OR TRUST
SYTS Investments, LLC(CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000	↓ \$2,000 - \$10,000 / / ↓ \$10,001 - \$100,000 ACQUIRED DISPOSED ↓ \$100,001 - \$1,000,000 Over \$1,000,000 /
NATURE OF INVESTMENT	NATURE OF INVESTMENT
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2: IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST).	2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000 \$10,000
St. LIST. THE WAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a segurite should need by) None or Names listed below	33 LIST THEINAME OF EACH REPORTABLE SNIGLE SOURCE OF INCOME OF \$10,000 OR MORE (Austria separate sheat) increasing) None or INCOME Isted below
4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST.
Check one box:	Check one box:
•	
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
San Francisco Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 - \$100,000	\$10,001 - \$100,000
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov



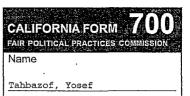
► 1. BUSINESS ENTITY OR TRUST	> 1. BUSINESS ENTITY OR TRUST
SYTS Investments, LLC(CONTINUATION)	
Name	Name *
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST) \$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$10,001 - \$100,000 \$10,000	2: IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) \$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000 OVER \$100,000
S. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Atlach dispersive source of measures of) None or Names listed below	S. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) None or Names listed below
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property San Francisco	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 ////////////////////////////////////
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	Leasehold Other
Yrs. remaining Check box if additional schedules reporting investments or real property are attached	Yrs. remaining Yrs. remaining Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline:866/275-3772 www.fppc.ca.gov

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)



► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
SYTS Investments, LLC (CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	·
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
□ \$0 - \$1,999 □ \$2,000 - \$10,000	□ \$2,000 - \$10,000///////
S10,001 - \$100,000 ACQUIRED DISPOSED	S10,001 - \$100,000 ACQUIRED DISPOSED
\$100,001 - \$1,000,000	100,001 - \$1,000,000
C. Over \$1,000,000	Over \$1,000,000
Partnership Sole Proprietorship Other	Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST)	2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499 \$10,001 - \$100,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000
└ \$500 - \$1,000	↓ \$500 - \$1,000
	STASIATIENAME OF EACHREPORTABLE SINGLE SOURCE OF
INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)	INCOME OF \$10,000 OR MORE (Attach a separate sheet) if necessary)
None or Names listed below	None or Names listed below
	· · · · · · · · · · · · · · · · · · ·
	•
4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
Norma of Duplinger Cables & Instanting and	Nome of Dukinger Feitht if Investment en
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
San Francisco	
Description of Business Activity or	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
<u> </u>	<u></u> \$2,000 - \$10,000
\$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$10,001 - \$100,000
Over \$1,000,000	│
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
	FPPC Form 700 (2015/2016) Sch. A-2
Comments:	FPPC Advice Email: advice@fppc.ca.gov

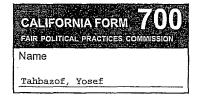
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov



>1. BUSINESS ENTITY OR TRUST	
SYTS Investments, LLC(CONTINUATION)	
Name	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 ///	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 ////////////////////////////////////
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST)	 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000 \$10,000
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) None or Names listed below	S. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary) None or Names listed below
······	
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
San Jose	Description of Dustreese Antiphy of
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2015/2016) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

Comments:

SCHEDULE B			
Interests	in	Real	Property



(Including Rental Income)

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
50-52 Elgin Park	
СІТҮ	CITY
San Francisco	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST.DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
X Ownership/Deed of Trust Easement	Ownership/Deed of Trust
Leasehold [] Other	Leasehold [] Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499\$500 - \$1,000\$1,001 - \$10,000	□ \$0 - \$499 □ \$500 - \$1,000 □ \$1,001 - \$10,000
S10,001 - \$100,000	S10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
	•

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
% [] None	% []_None%
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
□ \$500 - \$1,000 □ \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000	S10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable

FPPC Form 700 (2015/2016) Sch. B FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov **BOARD of SUPERVISORS**



City Hall 1 Dr. Carlton B. Goodlett Place, Room 244 San Francisco 94102-4689 Tel. No. 554-5184 Fax No. 554-5163 TDD/TTY No. 554-5227

VACANCY NOTICE

ASSESSMENT APPEALS BOARD NO. 2

Replaces All Previous Notices

NOTICE IS HEREBY GIVEN of the following vacancies:

Vacant seat 2, succeeding John Lee, term expiring on September 5, 2016, must have a minimum of five years professional experience in the State of California as one of the following: certified public accountant or public accountant; licensed real estate broker; attorney; or a property appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization, for a three-year term ending September 5, 2019.

Vacant seat 3, succeeding Mervin Conlan, term expiring on September 5, 2016, must have a minimum of five years professional experience in the State of California as one of the following: certified public accountant or public accountant; licensed real estate broker; attorney; or a property appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization, for a three-year term ending September 5, 2019.

Vacant seat 3, succeeding Yosef Tahbazof, term expiring on September 5, 2016, must have a minimum of five years professional experience in the State of California as one of the following: certified public accountant or public accountant; licensed real estate broker; attorney; or a property appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization, for a three-year term ending September 5, 2019.

<u>Prohibition</u>: No member shall, within the three years immediately preceding his/her appointment to the Board, have been an employee of an assessor's office.

Report: None.

Sunset Date: None.

Additional information relating to the Assessment Appeals Board No. 2 may be obtained by reviewing Administrative Code, Chapter 2B, available at <u>http://www.sfbos.org/sfmunicodes</u> or by visiting the Assessment Appeals Board's website at <u>http://www.sfbos.org/aab</u>.

Assessment Appeals Board No. 2 VACANCY NOTICE September 2, 2016

Interested persons may obtain an application from the Assessment Appeals Board website at <u>http://www.sfbos.org/aab_app</u> or from the Rules Committee Clerk, and should be submitted to: 1 Dr. Carlton B. Goodlett Place, Room 244, San Francisco, CA. 94102-4689. All applicants must be residents of San Francisco, unless otherwise stated.

Pursuant to Board of Supervisors Rules of Order 2.32 (<u>Motion No. 05-92</u>) all applicants applying for this Board must complete and submit, with their application, a copy (not original) of their Form 700, Statement of Economic Interests. Applications will not be considered if a copy of the Form 700 is not submitted. Form 700, Statement of Economic Interests, may be obtained at <u>http://www.sfbos.org/form700</u>.

<u>Next Steps</u>: Applicants who meet minimum qualifications will be contacted by the Rules. Committee Clerk once the Rules Committee Chair determines the date of the hearing. Members of the Rules Committee will consider the appointment(s) at the meeting and applicant(s) may be asked to state their qualifications. The appointment(s) of the individual(s) who are recommended by the Rules Committee will be forwarded to the Board of Supervisors for final approval.

Please Note: Depending upon the posting date, a vacancy may have already been filled. To determine if a vacancy for this Board is still available, or if you require additional information, please call the Rules Committee Clerk at (415) 554-7702.

Angela Calvillo

Clerk of the Board

DATED/POSTED: September 2, 2016

San Francisco BOARD OF SUPERVISORS

Date Printed: September 18, 2015

Date Established:

December 24, 1998

Active

ASSESSMENT APPEALS BOARD NO. 2

Contact and Address:

Dawn Duran Assessment Appeals Board City Hall, Room 405

Phone: (415) 554-6778 Fax: (415) 554-6775 Email: Dawn.Duran@sfgov.org

Authority:

Administrative Code, Chapter 2B et seq. (Added by Ordinance No. 37-67; Amended by Ordinances Nos. 110-68, 82-94, 86-96, 393-98, 273-99, and 128-13) and California Revenue and Taxation Code, Section 1620-1630.

Board Qualifications:

The Assessment Appeals Board No. 2 consists of eight (8) members (five (5) regular members, and three (3) alternate members) all appointed by the Board of Supervisors. No person may concurrently hold a seat on more than one of the three Assessment Appeals Boards.

The Board members' term of office is three years, beginning on the first Monday in September. In the event of a vacancy, the newly appointed member shall serve for the remainder of the unexpired term.

The Board shall have the following qualifications as stated in the eligibility criteria set forth in California Revenue and Taxation Code, Section 1624.05, as follows: Must have a minimum of five years professional experience in the State of California as one of the following: Certified Public Accountant or Public Accountant; licensed Real Estate Broker; Attorney; or a Property Appraiser accredited by a nationally recognized professional organization, certified by the Office of Real Estate Appraisers, or certified by the State Board of Equalization.

Hearing Officers: The regular and alternate members of the Board shall also serve as hearing officers. The Clerk shall designate members to act as hearing officers for particular applications using a rotating system designed to assure that all members with the same priority level have an equal opportunity over time to participate as hearing officers. The Clerk shall designate hearing

"R Board Description" (Screen Print)

San Francisco BOARD OF SUPERVISORS

officers in the following priority order: (1) the regular member of Assessment Appeals Board No. 3; (2) the alternate members of Assessment Appeals Board No. 3; (3) the alternate members of Assessment Appeals Board No. 2; (4) the alternate members of Assessment Appeals Board No. 1; (5) the regular members of Assessment Appeals Board No. 2; and (6) the regular members of Assessment Appeals Board No. 1. In their capacity as assessment hearing officers, the officers shall serve at the pleasure of and by contract with the Board of Supervisors.

It shall be the duty of each Assessment Appeals Board to equalize the valuation of the taxable property within the City and County for the purposes of taxation in the manner and subject to the limitations contained in Article XIII of the California State Constitution. Assessment Appeals Board No. 2 shall have jurisdiction to hear applications for reductions only for property assessed at less than \$50,000,000, excluding applications involving possessory interests or real property located all or in part within Assessor's Block Nos. 1-876 or 3701-3899, and reduction for residential real property consisting of four units or less within Assessor's Block Nos. 1-876 or 3701-3899.

Compensation: \$100 for each one-half day of service.

Report: Pursuant to California Revenue and Taxation Code, Section 1639, the hearing officer shall prepare a summary report of the proceedings together with a recommendation on the application and shall transmit this report and recommendation to the Clerk of the Board of Supervisors.

Sunset Clause: None

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