

# STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Initial Filing Received
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Please type or print in ink.		
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Gandhi	Shruti	
1. Office, Agency, or Court		
Agency Name (Do not use acronyms)		
San Francisco Employees' Retirer	ment system	
Division, Board, Department, District, if applic	able	Your Position
		Retirement Board Commissioner
▶ If filing for multiple positions, list below or	on an attachment. (Do not	t use acronyms)
Agency:		Position:
2. Jurisdiction of Office (Check at lea	ast one box)	
☐ State		Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
Multi-County		County of San Francisco
City of San Francisco		
		Other
3. Type of Statement (Check at least of	one box)	
Annual: The period covered is January December 31, 2020.	1, <b>2020,</b> through	Leaving Office: Date Left/
The period covered is/. December 31, <b>2020</b> .	, throug	gh
Assuming Office: Date assumed		<ul> <li>The period covered is/</li></ul>
Candidate: Date of Election	and office sou	ught, if different than Part 1:
4. Schedule Summary (must comp	olete) ► Total numb	ber of pages including this cover page:
Schedules attached	,	
Schedule A-1 Investments sched	ule-attached	Schedule C - Income, Loans, & Business Positions – schedule attached
Schedule A-2 - Investments – sched		Schedule D - Income - Gifts - schedule attached
Schedule B - Real Property – sched	ule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached
-or- None - No reportable interes	its on any schedule	
5. Verification		
MAILING ADDRESS STREET	CITY	STATE ZIP CODE
(Business or Agency Address Recommended - Public Do 1145 Market St 5th Floor		n Francisco CA 94103
DAYTIME TELEPHONE NUMBER (415) 487-7000		EMAIL ADDRESS
I have used all reasonable diligence in prepar herein and in any attached schedules is true		reviewed this statement and to the best of my knowledge the information contained edge this is a public document.
I certify under penalty of perjury under th	e laws of the State of Cali	lifornia that the foregoing is true and correct.
Date Signed April 7th 2021		Signature
(month, day, year)		(File the originally signed paper statement with your filing official.)

#### **SCHEDULE A-1 Investments**

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

Investments must be itemized.

Do not attach brokerage or financial statements.

	CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
;	Name
	Shruti Gandhi

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Pfizer	Facebook
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Pharmaceutical	Social Media
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other(Describe)
(Describe)  Partnership Oncome Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY PPG Industries	► NAME OF BUSINESS ENTITY  Caterpillar
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Materials	Infrastructure
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	Stock Other(Describe)
☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//20	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Atlassian	Netflix
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Technology	Technology
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 <b>\$</b> 10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499 ☐ 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:
//20	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
	• •
Comments:	

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
Shruti Gandhi

(Ownership Interest is 10% or Greater)

▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Lalit Ventures LLC	Array Venture Partners II LLC
Name San Francisco, CA 94110	Name San Francisco, CA 94110
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one  Trust, go to 2  Business Entity, complete the box, then go to 2	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     \$2,000 - \$10,000     \$10,001 - \$100,000     \$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   DISPOSED   \$100,001 - \$1,000,000   Over \$1,000,000
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT Partnership Sole Proprietorship
YOUR BUSINESS POSITION General Partner	YOUR BUSINESS POSITION General Partner
➤ 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 OVER \$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	\$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.)  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  Check one box:  INVESTMENT REAL PROPERTY  Array Ventures LP  Name of Business Entity, if Investment, or	➤ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST  Check one box:  INVESTMENT ☐ REAL PROPERTY  Array Ventures II, LP  Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property Investment Fund	Assessor's Parcel Number or Street Address of Real Property  Investment Fund
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   \$100,001 - \$1,000,000   ACQUIRED   DISPOSED   Over \$1,000,000   NATURE OF INTEREST   Property Ownership/Deed of Trust   Stock   Partnership	FAIR MARKET VALUE
Property Ownership/Deed of Trust Stock Partnership  Leasehold Other	Property Ownership/Deed of Trust Stock Partnership  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: \_

### **SCHEDULE C** Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Shruti Gandhi

NAME OF SOURCE OF INCOME	
	NAME OF SOURCE OF INCOME
Lalit Ventures LLC	Array Venture Partners II LLC
ADDRESS (Business Address Acceptable) San Francisco, CA 94110	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Investment Fund Management	Investment Fund Management
YOUR BUSINESS POSITION Managing Director	YOUR BUSINESS POSITION Managing Director
GROSS INCOME RECEIVED No Income - Business Position Only  \$500 - \$1,000 \$1,000 \$1,000	GROSS INCOME RECEIVED No Income - Business Position Only  \$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED  Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	CONSIDERATION FOR WHICH INCOME WAS RECEIVED  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	Commission or Rental Income, list each source of \$10,000 or more
(Describe)	(Describe)
Other(Describe)	Other(Describe)
Other	Other
Other	Other
Other	Other
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in to members of the public without regard to your official regular course of business must be disclosed as follow NAME OF LENDER*	Other
Other	Other (Describe)  PERIOD  I lending institution, or any indebtedness created as part of he lender's regular course of business on terms available status. Personal loans and loans received not in a lender's:  INTEREST RATE  TERM (Months/Years)
Other	Other
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in to members of the public without regard to your official regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	Other
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in to members of the public without regard to your official regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	Other
* You are not required to report loans from a commercial a retail installment or credit card transaction, made in to members of the public without regard to your official regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	Other
Other  (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING F  You are not required to report loans from a commercial a retail installment or credit card transaction, made in to members of the public without regard to your official regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000	Other
Other  (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING IT  You are not required to report loans from a commercial a retail installment or credit card transaction, made in the tomembers of the public without regard to your official regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$10,001 - \$10,000	Other
Other  (Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING F  You are not required to report loans from a commercial a retail installment or credit card transaction, made in to members of the public without regard to your official regular course of business must be disclosed as follow NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000	Other