

COVER PAGE

Filed Date: 02/20/2017 02:18 PM
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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Federoff Howard J

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
California Institute of Regenerative Medicine
Division, Board, Department, District, if applicable Your Position
ICOC Board Member

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

Agency: _____ Position: _____

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

State Judge or Court Commissioner (Statewide Jurisdiction)
 Multi-County _____ County of _____
 City of _____ Other _____

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

Annual: The period covered is January 1, 2016, through December 31, 2016.
-or-
The period covered is 02 / 09 / 2016, through December 31, 2016.
 Assuming Office: Date assumed ____/____/_____
 Candidate: Election year _____ and office sought, if different than Part 1: _____
 Leaving Office: Date Left ____/____/_____
(Check one)
 The period covered is January 1, 2016, through the date of leaving office.
-or-
 The period covered is ____/____/_____, through the date of leaving office.

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 3

Schedules attached

Schedule A-1 - Investments – schedule attached **Schedule C - Income, Loans, & Business Positions** – schedule attached
 Schedule A-2 - Investments – schedule attached **Schedule D - Income – Gifts** – schedule attached
 Schedule B - Real Property – schedule attached **Schedule E - Income – Gifts – Travel Payments** – schedule attached

-or-

None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
265 Irvine Hall, 1001 Health Sciences Road Irvine CA 92697-0001
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(949) 824-5926 federoff@uci.edu

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

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

Date Signed 02/20/2017 02:18 PM
(month, day, year)

Signature Electronic Submission
(File the originally signed statement with your filing official.)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Howard Federoff

NAME OF BUSINESS ENTITY: MedGenesis Therapeutix, Inc. GENERAL DESCRIPTION OF THIS BUSINESS: Biopharmaceutical company. FAIR MARKET VALUE: \$2,000 - \$10,000. NATURE OF INVESTMENT: Stock. IF APPLICABLE, LIST DATE: ACQUIRED: / / 16, DISPOSED: / / 16.

NAME OF BUSINESS ENTITY: GENERAL DESCRIPTION OF THIS BUSINESS: FAIR MARKET VALUE: NATURE OF INVESTMENT: IF APPLICABLE, LIST DATE: ACQUIRED: / / 16, DISPOSED: / / 16.

NAME OF BUSINESS ENTITY: Ovid Therapeutics. GENERAL DESCRIPTION OF THIS BUSINESS: Biopharmaceutical company. FAIR MARKET VALUE: \$2,000 - \$10,000. NATURE OF INVESTMENT: Other options. IF APPLICABLE, LIST DATE: ACQUIRED: / / 16, DISPOSED: / / 16.

NAME OF BUSINESS ENTITY: GENERAL DESCRIPTION OF THIS BUSINESS: FAIR MARKET VALUE: NATURE OF INVESTMENT: IF APPLICABLE, LIST DATE: ACQUIRED: / / 16, DISPOSED: / / 16.

NAME OF BUSINESS ENTITY: KinaseDS, LLC. GENERAL DESCRIPTION OF THIS BUSINESS: Biopharmaceutical company. FAIR MARKET VALUE: \$2,000 - \$10,000. NATURE OF INVESTMENT: Other Co-founder ownership. IF APPLICABLE, LIST DATE: ACQUIRED: / / 16, DISPOSED: / / 16.

NAME OF BUSINESS ENTITY: GENERAL DESCRIPTION OF THIS BUSINESS: FAIR MARKET VALUE: NATURE OF INVESTMENT: IF APPLICABLE, LIST DATE: ACQUIRED: / / 16, DISPOSED: / / 16.

Comments:

Subject: Notification - Your Submitted Form 700

Date: Monday, February 20, 2017 at 2:18:31 PM Pacific Standard Time

From: Form700@fppc.ca.gov

To: Howard J Federoff

CC: Maria Bonneville, Amy Cheung

Dear Howard Federoff,

Congratulations! Your Statement of Economic Interest, Form 700 has been successfully filed with our office on 02/20/2017 02:18 PM.

Electronic Confirmation #: 4272

Agency: California Institute of Regenerative Medicine

Position: ICOC Board Member

Filing Type: Annual

Filing Year: 2016

Number of pages: 3

If you need to view, print or amend your filed form, a copy of your filing has been saved in your profile under 'Previous Filings' in the eDisclosure System.

Hope you enjoyed your online filing experience.

System Logon Link: <https://form700.fppc.ca.gov/>