

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

A PUBLIC DOCUMENT

Date Initial Filing Received
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NAME OF FILER (LAST) (FIRST)	
NAME OF FILER (LAST) (FIRST) ART	(MIDDLE)
1. Office, Agency, or Court	
	and the state of t
Agency Name (Do not use acronyms) CACIFORNIA INSTITUTE FOR REGENERATE	INE MEDICIAL
Division, Board, Department, District, if applicable	Your Position
	VICE CHAIR OF GOVERNING BOARD
If filing for multiple positions, list below or on an attachment. (Do not use at UNIVERSIT OF CALIFORNIA	CONYMS) RECENT
Agency: COUENED CACIFORNIA	_ Position: BUARD MEMBER
2. Jurisdiction of Office (Check at least one box)	
State	Judge, Retired Judge, Pro Tem 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, 2021, through December 31, 2021.	Leaving Office: Date Left
The period covered is, through December 31, 2021.	The period covered is January 1, 2021, through the date of leaving office.
Assuming Office: Date assumed	The period covered is, through the date of leaving office.
Candidate: Date of Election and office sought, if d	ifferent than Part 1:
I. Schedule Summary (must complete) ► Total number of	pages including this cover page:
Schedules attached	in digital control of the second of the seco
Schedule A-1 - Investments – schedule attached	chedule C - Income, Loans, & Business Positions - schedule attached
	hedule D - Income - Gifts - schedule attached
	chedule E - Income - Gifts - Travel Payments - schedule attached
Or- None - No reportable interests on any schedule	
5. Verification	310 0005
MAILING ADDRESS STREET CITY (Business or Agency Address Recommended - Public Document)	STATE ZIP CODE
//// /	cas CA 94112
(5/0) 3409108	Horres@ clum. ca.gov
I have used all reasonable diligence in preparing this statement. I have reviewed 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 to	hat the foregoing is true and correct.
Date Signed Mark 11, 2022 Signal	ture

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



The state of the s

(Ownership Interest is 10	0% or Greater)
► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
ART TORNES	The second secon
3081 FOOTHILL BLAD. CALISTIGA, CA	Name
Address (Business Address Acceptable) 9 45 15	Address (Business Address Acceptable)
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
ENDERSON CONTRACTOR CONSUMENT	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 Over \$1,000,000 IF APPLICABLE, LIST DATE: ACQUIRED DISPOSED	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 Other
YOUR BUSINESS POSITION CONSULTANT	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
\$0 - \$499	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$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	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
KCP CAL KLEIN VENTMET LLC	
4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR CONTROL LEASED BY THE BUSINESS ENTITY OR TRUST AND	4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
INVESTMENT REAL PROPERTY	INVESTMENT 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, 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 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 \$10,001 - \$100,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
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:

Comments: _

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFOR	NIA FORM / U	
FAIR POLITIC	AL PRACTICES COMMISSION	200
Name	the state of the	

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
Parcel #0360196	
- CITY	CITY
San Francisco	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000 12/ 02/09 03/ 23/21	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$100,001 - \$1,000,000 ACQUIRED DISPOSED
X Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
X Ownership/Deed of Trust	Ownership/Deed of Trust Easement
Leasehold	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
1 1 1 1 1 1 1 1 1 1	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$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.
None	None
None	None
You are not required to report loans from a commercial business on terms available to members of the public	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and
You are not required to report loans from a commercia	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and
You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of business.	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows:
You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of businame of Lender*	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows:
You are not required to report loans from a commercious business on terms available to members of the public loans received not in a lender's regular course of businame of Lender* ADDRESS (Business Address Acceptable)	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER*
You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of business of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of businame of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER
You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of business of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER NTEREST RATE TERM (Months/Years)	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)
You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of business of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) When I None	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) % None
You are not required to report loans from a commercial business on terms available to members of the public loans received not in a lender's regular course of business of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) Whose Indepting Period	al lending institution made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) ——%

SCHEDULE C Income, Loans, & Business **Positions**

(Other than Gifts and Travel Payments)

CALIFORNIA FORM	7.00
FAIR POLITICAL PRACTICES CO	MMISSION
Name	
Art Torres	

► 1. INCOME RECEIVED	► > 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
One Legacy Foundation	Westridge KFC Staff Ownership Group LLC
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
221 South Figueroa, Suite 500, Los Angeles, CA	550 S.California Ave, Suite 330 Palo Alto, CA 94306
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Organ Translpant Foundation	Real Estate
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Vice Chair of Board	Partner
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000	\$500 - \$1,000 \$1,001 - \$10,000
▼ \$10,001 - \$100,000	▼ \$10,001 - \$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.) Loan repayment	(Real property, car, boat, etc.)
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) Stipend as Vice Chair of Board	(Describe)
(Describe)	Other(Describe)
▶ 12. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P	ERIOD #13-11-11-11-11-11-11-11-11-11-11-11-11-1
a retail installment or credit card transaction, made in th	lending institution, or any indebtedness created as part of the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's status.
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address A	% None
ADDRESS (Business Address Acceptable)	OFOURITY FOR LOW
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN None Personal residence
BOOMESS ACTIVITY, IF ANY, OF LENDER	resolial residence
	Real PropertyStreet address
HIGHEST BALANCE DURING REPORTING PERIOD	Street accress
\$500 - \$1,000 	City
\$1,001 - \$10,000	Guarantor
\$10,001 - \$100,000	
OVER \$100,000	Other
	(Describe)
Comments:	

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

CALIF	ORNIA FORM 700
FAIR POLI	TICAL PRACTICES COMMISSION
Name	
Torres	Art

NO ME DECENTED	
▶ 1. INCOME RECEIVED ************************************	NAME OF SOURCE OF INCOME
Californians for Stem Cell Research, Treatments and	
Cures FPPC#1422494 ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
2350 Kerner Blvd. Suie 250	3260 Band Blud Bersham CA 98080
San Rafael, CA 94901 BUSINESS ACTIVITY, IF ANY, OF SOURCE	3260 BAYSHALE BIVE BETS LANGE 198080 BUSINESS ACTIVITY, IF ANY, OF SOURCE CHEAN TRANSPURST PATIENTS ERVICE
	MAN TRANSPILLE BATTENT SPRINGS
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Consultant	BEARD MEMber
GROSS INCOME RECEIVED No Income - Business Position Only \$500 - \$1,000 \$1,001 - \$10,000	GROSS INCOME RECEIVED No Income - Business Position Only \$500 - \$1,000 \$\int \frac{1}{3},001 - \frac{1}{3},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
X 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, boat, etc.)
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)	Other STI PEND AS BUARD MEMBER
Other(Describe)	Other STIFEND HS CONSTRUCTION OF STIFEND HS CONS
▶\$2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERI	OD And Annual Control of the Control
You are not required to report loans from a commercial a retail installment or credit card transaction, made in th members of the public without regard to your official star regular course of business must be disclosed as follows	lending institution, or any indebtedness created as part of e lender's regular course of business on terms available to tus. Personal loans and loans received not in a lender's s:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	% None
ADDRESS (Business Address Acceptable)	
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	☐ None ☐ Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street eddress
\$500 - \$1,000	City
\$1,001 - \$10,000	
\$10,001 - \$100,000	Guarantor
D- ST 1 Service over Services automotive	Other
OVER \$100,000	(Describe)
Comments:	
Colliniants.	

FPPC Form 700 Schedule C (2020/2021) advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov

Fiscal 2019-20 Regents Annual Financial Conflict of Interest and Training Certification

Due: July 1, 2021

I, ART TORKES, a Regent of the University of California, certify the following:

- I affirm that I have submitted the annual Form 700 as required by the California Political Reform Act (or an assuming office form if no annual form has been due within the last year) and have exercised reasonable due diligence to provide complete and accurate information on my Form 700.
- 2. I affirm that I have completed all trainings required by Regents Policies that I was scheduled to take within the last 12 months.
- 3. I affirm that within the next 12 months, I will complete all trainings required by Regents Policies that I am scheduled to take during that time period.
- 4. During the past 12 months, I affirm that I have not influenced or participated in making any University decision that, to my knowledge, had a material financial effect on me or my immediate family or on any individual or entity in which I have a financial interest, as defined by the California Political Reform Act.
- 5. I affirm that I will, on an ongoing basis, undertake all reasonable efforts to determine whether my financial interests create a financial conflict of interest, or the appearance of a financial conflict of interest, that may affect my ability to participate in or influence any University decision. I affirm that I will promptly inform the Chair of the Board and the General Counsel of any matter expected to be considered by the Board of Regents that I reasonably foresee may materially affect any of my financial interests and will provide the Office of General Counsel with all the information necessary to analyze and advise me as to my legal responsibilities.

I certify that the foregoing is true and correct to document is a public document.	the best of my knowledge. I acknowledge this
I certify that the foregoing is true and correct to document is a public document. Signed Signed	Date August 7, 2020

Fiscal 2019-20 Regents Annual Financial Conflict of Interest and Training Certification

Due: July 1, 2021

I, ART TORKES , a Regent of the University of California, certify the following:

- I affirm that I have submitted the annual Form 700 as required by the California Political Reform Act (or an assuming office form if no annual form has been due within the last year) and have exercised reasonable due diligence to provide complete and accurate information on my Form 700.
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- 4. During the past 12 months, I affirm that I have not influenced or participated in making any University decision that, to my knowledge, had a material financial effect on me or my immediate family or on any individual or entity in which I have a financial interest, as defined by the California Political Reform Act.
- 5. I affirm that I will, on an ongoing basis, undertake all reasonable efforts to determine whether my financial interests create a financial conflict of interest, or the appearance of a financial conflict of interest, that may affect my ability to participate in or influence any University decision. I affirm that I will promptly inform the Chair of the Board and the General Counsel of any matter expected to be considered by the Board of Regents that I reasonably foresee may materially affect any of my financial interests and will provide the Office of General Counsel with all the information necessary to analyze and advise me as to my legal responsibilities.

I certify that the foregoing is true and correct to the be	st of my knowledge.	I acknowledge this
document is a public document.	1	
and the same	Day / Jugar	+ 7220



Fair Political Practices Commission

Welcome Art Torres

Filing Details The Position(s) you are filing The Position(s) you are filing Position Agency Due Date Disclosure Category Period Covered Member Regenerative Medicine 4/1/2022 State - California Institute of Regenerative Medicine Courrent Filings Previous Filings View Profile Contact Us Report an Issue Agency Contact List FPPC Hotline Help Efilier Quick Reference Card Filer's User Guide Filier's User Guide Filing Detail View FPPC Instructions FPPC Reference Pamphlet Questions and Answers PPC Reference Pamphlet Questions and Answers Quick Start Guide Video Tutorial Filing Video Tutorial Filer Video Tutorial	Login ①					Filing De	etails			
Change Eassword Change Login ID Change Email Sign Out Filer Current Filings Previous Filings View Profile Contact Us Report an Issue Agency Contact List FPPC Hotline Help Filer Quick Reference Card Filer Quick Reference Card Filier Quick Reference Card Filier Suser Guide Filing Detail View FPPC Instructions FPPC Reference Pamphlet Questions and Answers Quick Start Guide Video Tutorials Filer Video Tutorial Filer Video Tutori	Home	Filing	Dotaile							
Change Email Sign Out Filer Current Filings Previous Filings View Profile Contact Us Report an Issue Agency Contact List FPPC Hotline Help eFiler Quick Reference Card Filier's User Guide Filing Detail View FPPC Instructions FPPC Reference Pamphlet Questions and Answers Quick Start Guide Video Tutorial Filer Video Tuto	Change Password									
Position Agency Due date Distance	Change Login ID	The Po	sition(s) yo	ou are filing						
Filer Previous Filings Previous Filings View Profile Contact Us Report an Issue Agency Contact List FPPC Hotline Help eFiler Quick Reference Card Filing Detail View FPPC Instructions FPPC Reference Pamphlet Questions and Answers Quick Start Guide Video Tutorial Filer Video Tutorial Filer Video Tutorial Filer Video Tutorial Filer Video Tutorial Filer Video Tutorial Filer Video Tutorial Filer Curver Page Address/Phone number Edit Information Edit	Change Email	Position	on	Agency	,	Due Date	200 200 200		Per	iod Covered
Current Filings Previous Filings View Profile Contact Us Report an Issue Agency Contact List FPPC Hotline Help eFiler Quick Reference Card Filer's User Guide Filing Detail View FPPC Instructions FPPC Reference Pamphlet Questions and Answers Quick Start Guide Video Tutorial Edit Information	•	1 1				4/1/2022	State - Califo Regenerative	rnia Institute of Medicine	01,	01/21-12/31/21
Previous Filings View Profile Contact Us Report an Issue Agency Contact List FPPC Hotline Help ● Filer Quick Reference Card Filer's User Guide Filing Detail View FPPC Instructions FPPC Reference Pamphlet Questions and Answers Quick Start Guide Video Tutorial Filer Video Tutorial Schedule Summary Instructions To view your disclosure category link above. Review your disclosure category are required to report. Schedule Summary Instructions To view your disclosure category link above. Review your disclosure required to report. Schedule Summary Instructions To view yo	Filer	Cover	Page Add	lross/Dhone num	her					
Schedule Summary Instructions To view your disclosure requirements simply click on the disclosure category link above. Report an Issue Report an Issue Agency Contact List Review your disclosure category above to determine what financial interests you are required to report. Schedules which correspond to the financial interests described in your disclosure category are checked under the "Recommended" column. Please select which schedules you will use under the "Reportable Interests" column by selecting either the Yes or No radio button. Filer's User Guide Filing Detail View FPPC Instructions FPPC Reference Pamphlet Questions and Answers Schedule A-1 Investments - Stocks, Bonds and Other Interests (Ownership Interest is less than 10%) Quick Start Guide Schedule A-2 Investments, Income and Assets of Business, Entities (Ownership Interest is (Current Filings	Cover	rage Aut	ress/Filone num					E	dit Information
Report an Issue Agency Contact List FPPC Hotline Help ● EFiler Quick Reference Card Filer's User Guide Filing Detail View FPPC Instructions FPPC Reference Pamphlet Questions and Answers Quick Start Guide Video Tutorial Filer Video Tutorial Filer Video Tutorial Filer Video Tutorial Filer Video Tutorial Filer Video Tutorial Filer Video Tutorial Filer Video Tutorial Filer Video Tutorial Filer Reportable List erequirements simply click on the disclosure category link above. Review your disclosure category above to determine what financial interests you are required to report. Schedules which correspond to the financial interests described in your disclosure category are checked under the "Recommended" column. Please select which schedules you will use under the "Reportable Interests" column by selecting either the Yes or No radio button. Help Name Description Investments - Stocks, Bonds and Other Interests (Ownership Interest is less than 10% or Greater) Filer Video Tutorial To view your disclosure category link above. Review your disclosure category above to determine what financial interests you are required to report. Schedules which correspond to the financial interests described in your disclosure category are checked under the "Recommended" column. Please select which schedules you will use under the "Reportable Interests" column by selecting either the Yes or No radio button. Help Name Description Recommended Reportable Interests (Ownership Interest is less than 10% or Greater) Filer Video Tutorial	Previous Filings			4						
Report an Issue Agency Contact List FPPC Hotline Help Filer Quick Reference Card Filer's User Guide Filing Detail View FPPC Instructions FPPC Reference Pamphlet Questions and Answers Quick Start Guide Video Tutorial Filer Video Tutorial Fi	View Profile	Sched	ule Sumr	mary Instructions	3					
Agency Contact List FPPC Hottine Help Filer Quick Reference Card Filer's User Guide Filing Detail View FPPC Instructions FPPC Reference Pamphlet Questions and Answers Quick Start Guide Video Tutorial Filer Video Tutorial Filer Video Tutorial Filer Video Tutorial FILER Questions and Reimbursements Schedules which correspond to the financial interests described in your disclosure category are checked under the "Recommended" column. Schedules which correspond to the financial interests described in your disclosure category are checked under the "Recommended" column. Please select which schedules you will use under the "Reportable Interests" column by selecting either the Yes or No radio button. Flease select which schedules you will use under the "Reportable Interests" column by selecting either the Yes or No radio and Other Interests (Ownership interest is less than 10%) Flease select which schedules you will use under the "Reportable Interests" column by selecting either the Yes or No radio and Other Interests (Ownership interests is less than 10%) Flease select which schedules you will use under the "Reportable Interests" column by selecting either the Yes or No radio and Other Interests (Ownership interests is less than 10%) Flease select which schedules you will use under the "Reportable Interests" column by selecting either the Yes or No radio and Other Interests (Ownership interest is less than 10%) Flease select which schedules you will use under the "Reportable Interests" column by selecting either the Yes or No radio and Please Schedule Interests in Recommended Reportable Interests Interests in Recommended Reportable Interests in Schedule Interests in Recommended Reportable Interests in Schedule Interests in Recommended Interests in Schedule Interests in Recommended Interests in Schedule Interests in	Contact Us ①	To view	v your disc	dosure requirement	s simply click on	the disclosur	e category link	above.		
Agency Contact List FPPC Hotline Help Filer Quick Reference Card Filer's User Guide Filing Detail View FPPC Instructions FPPC Reference Pamphlet Questions and Answers Quick Start Guide Video Tutorial Filer Video Tutorial Filer Video Tutorial Filer Video Tutorial Schedules which correspond to the financial interests described in your disclosure category are checked under the "Recommended" column. Please select which schedules you will use under the "Reportable Interests" column by selecting either the Yes or No radio Becommended Recommended Reportable Interests Investments - Stocks, Bonds and Other Interests (Ownership interest is less than 10%) Investments, Income and Assets of Business, Entities (Ownership interest is 10% or Greater) Filer Video Tutorial Schedule D Income - Gifts Income - Gifts Income - Gifts Income - Gifts Advances and Reimbursements)	Report an Issue	Review	vour disc	losure category abo	ove to determine	what financia	ıl interests you	are required to re	port.	
FPPC Hotline Help Flease select which schedules you will use under the "Reportable Interests" column by selecting either the Yes or No radio button. Fler's User Guide Filing Detail View FPPC Instructions FPPC Reference Pamphlet Questions and Answers Quick Start Guide Video Tutorial Filer Video Tutorial	· ·	School	iles which	correspond to the	financial interests	described in	your disclosur	e category are che	cked unde	r the
button. Befiler Quick Reference Card Help Name Description Recommended Reportable Interests		"Pecor	nmended"	column.						
button. Filer Quick Reference Card Help Name Description Recommended Reportable Interests		Please	select whi	ich schedules you w	vill use under the	"Reportable	Interests" colu	nn by selecting er	mer the te	5 01 140 18010
Help Name Description New Filler's User Guide Filing Detail View FPPC Instructions FPPC Reference Pamphlet Questions and Answers Quick Start Guide Video Tutorial Filer Video T	Heib	button	•2			,				
Filer's User Guide Filing Detail View FPPC Instructions FPPC Reference Pamphlet Questions and Answers Quick Start Guide Video Tutorial E-Filing Video Tutorial Schedule A-1 Investments - Stocks, Bonds and Other Interests is less than 10%) Investments, Income and Assets of Business, Entities (Ownership interest is 10% or Greater) Investments, Income and Assets of Business, Entities (Ownership interest is 10% or Greater) View Tutorials Schedule A-2 Interests in Real Property Schedule B Income, Loans & Business Positions View No Yes No No Yes No No No Yes No No No No No No No No No N		Help	Name		100 CO 10 10 10 10 10 10 10 10 10 10 10 10 10			Recommended	Reportab	e Interests
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FPPC Reference Pamphlet Questions and Answers Quick Start Guide Video Tutorials E-Filing Video Tutorial Filer Video Tutorial	50.		Schedule	e A-2	Investments, Business, Enti	ties (Owners	Assets of hip interest is	•	Yes	○ No
Quick Start Guide Video Tutorials E-Filing Video Tutorial Filer Video Tutorial Schedule B Schedule B Income, Loans & Business Positions Income - Gifts Income - Gifts (Travel Payments, Advances and Reimbursements) Yes No Yes No Yes No		11 -	_							○ No
Video Tutorials	FPPC Reference Pamphlet							~	Yes	0
Video Tutorials ③ Schedule D Income - Gifts E-Filing Video Tutorial Income - Gifts (Travel Payments, Advances and Reimbursements) ✓ Yes No		9	Schedule	e B	Interests in Re	eal Property	Decitions			
E-Filing Video Tutorial Schedule E Income - Gifts (Travel Payments, Advances and Reimbursements) Filer Video Tutorial	Questions and Answers				Interests in Re	eal Property & Business	Positions	•	⊕ Yes	○ No
Filer Video Tutorial	Questions and Answers Quick Start Guide	3	Schedule	C	Interests in Re Income, Loan: Income - Gifts	eal Property & Business		*	Yes Yes	○ No ⑤ No
	Questions and Answers Quick Start Guide Video Tutorials	3	Schedule	e C	Interests in Re Income, Loan: Income - Gifts	eal Property S & Business (Travel Payr	nents,	*	Yes Yes	○ No ⑤ No
Continue	Questions and Answers Quick Start Guide Video Tutorials E-Filing Video Tutorial	3	Schedule	e C	Interests in Re Income, Loan: Income - Gifts	eal Property S & Business (Travel Payr	nents,	*	Yes Yes	○ No • No • No

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SCHEDULE A-1 Investments

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

Investments must be itemized.

CAL	IF	ORN	IAFO	RM	70	[0]
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NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
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GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS MONT CONSTRUCT	THEST IN PRIMERY ORIGINATED US FIRST LIENSE
Scommond Real Robbe - Basidortial, industrial, Lotal	SECURTO LOWIS WIFICKIN IN & TAKE DOMITTEDE OF PR
FAIR MARKET VALUE	FAIR MARKET VALUE CREST
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\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Pother BDC (Business to Co.)	NATURE OF INVESTMENT BOC (Bus Dev. C.)
Partnership Income Received of \$0 - \$499 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:
9 1 21 J21 ACQUIRED DISPOSED	9 1 21 1 21 DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
CAREDY INC. CCDHA)	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
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PATIENT + CAME OUTER	SAID MADVET VALUE
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000
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\$100,001 - \$1,000,000	the state of the s
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other(Describe)
(Describe) Partnership Income Received of \$0 - \$499	Partnership Income Received of \$0 - \$499
Income Received of \$500 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule C)
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1 3 21	ACQUIRED DISPOSED
ACQUIRED DISPOSED	AOGUNES BIOLOGES
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	r. September 1992 in the second second
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AID MARKET VALUE	FAIR MARKET VALUE
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and the second control of the second control	NATURE OF INVESTMENT
ATURE OF INVESTMENT Stock Other (Describe)	Stock Other (Describe)
Partnership Income Received of \$0 - \$499	Partnership Income Received of \$0 - \$499
Income Received of \$500 or More (Report on Schedule C)	Income Received of \$500 or More (Report on Schedule C)
- APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
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Comments: .