CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A M E N D M E N T

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Initial Filing Received
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Please type or print in ink.

NAME OF FIL	LER	(LAST)		(FIRST)		(MIDDLE)
	Huser		Mary			Therese
1. Office	e, Agency, or Court					
Agency	Name (Do not use acrony	ms)				_
State	e Bar of California Boa	ard of Trustees				
Division	n, Board, Department, Distric	t, if applicable		Your Position		
				Trustee		
► If fili	ing for multiple positions, list	below or on an attachment.	(Do not use ac	ronyms)		
Agency	y:			Position:		
2. Juris	diction of Office (Ch	eck at least one box)				
Star	•	300 at 1000 510 500)		Judge, Retire (Statewide Ju		dge, or Court Commissioner
Mul	lti-County			County of _		
City	, of			Other		
	of Statement (Check					
	nnual: The period covered in December 31, 2022.	•		Leaving Of	ffice: Date Left	
	-or-	, ,		☐ The per	(Check on	e <i>circle.)</i> 1, 2022, through the date of
	December 31, 2022.	s/		leaving		i, 2022, tillough the date of
As	suming Office: Date assur	med 09 , 21 , 2023		☐ The per	iod covered is/.	, through
☐ Ca	andidate: Date of Election	and office	ce sought, if diffe		•	_
	edule Summary (requ	uired) ► Tota	al number of	pages includi	ng this cover pag	e:
Sche	edules attached					
	Schedule A-1 - Investment	s – schedule attached	S	chedule C - Incor	me, Loans, & Business	Positions - schedule attached
	Schedule A-2 - Investment				me - Gifts - schedule	
	Schedule B - Real Propert	y – schedule attached	<u></u>	chedule E - Incor	ne – Gifts – Travel Paj	ments - schedule attached
-or-	one - No reportable in	terests on any schedule)			
5. Verific	•	,,				
MAILING	ADDRESS STREET		CITY		STATE	ZIP CODE
	s or Agency Address Recommended	- Public Document)	Con Fron	oiooo	CA	94105
	Howard Street E TELEPHONE NUMBER		San Fran	IAIL ADDRESS	CA	94103
(415) 538-2000		m	ary.huser@ca	albar.ca.gov	
		in preparing this statement. es is true and complete. I a				wledge the information contained
I certify	y under penalty of perjury	under the laws of the Stat	e of California t			
	11/6/2023			DocuSigned by:		
Date Si	igned	lav voorl	Signa	17430A0333014	90	mont with your filing official)
	(month, c	ay, yedi)		(FIIe	the originally signed paper state	nem with your ming onicial.)

SCHEDULE A-1 Investments

CALIFORNIA FORM

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

Investments must be itemized.

FAIR P	OL	ITIC	AL	PR/	ΑСТ	ICE	s c	ОМ	MIS	S
	Λ	М	F	N	ח	М	F	N	Ŧ	

Do not attach brokerage o	r_tinancial statements.
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Airbnb, Inc.	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Internet Platorm	
——————————————————————————————————————	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$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 ☐ 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)
Indefine Reserved of 4000 of Wilde (Report of Schedule O)	Internet reserved of good of whole (report on deficulte o)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
II AIT LIOADLE, LIOT DATE.	II ALLEGABLE, EIGT BATE.
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUCINESS ENTITY	► NAME OF BUSINESS ENTITY
NAME OF BUSINESS ENTITY	VIVALVIE OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
	\$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 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)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	Filer's Verification
	Many Hugar
GENERAL DESCRIPTION OF THIS BUSINESS	Print Name Mary Huser
	Office Agency
	or Court State Bar of California Board of Trustees
FAIR MARKET VALUE	or sourc—
\$2,000 - \$10,000 \$10,001 - \$100,000	Statement Type 2022/2023 Annual Assuming Leaving
\$100,001 - \$1,000,000 Over \$1,000,000	
ψ100,001 - ψ1,000,000 Ovel ψ1,000,000	Annual Candidate
NATURE OF INVESTMENT	I have used all reasonable diligence in preparing this statement. I have
Stock Other	reviewed this statement and to the best of my knowledge the information
(Describe)	contained herein and in any attached schedules is true and complete.
Partnership Income Received of \$0 - \$499	
☐ Income Received of \$500 or More (Report on Schedule C)	I certify under penalty of perjury under the laws of the State of
	California that the foregoing is true and correct.
IF APPLICABLE, LIST DATE:	11/6/2023
, , 22 , , , 22	Date Signed(month, day, year)
ACQUIRED DISPOSED	DocuSigned by:
AOQUINED DIOPOSED	Filania Simpatura Mary Huser
	Filer's Signature

SCHEDULE C Income, Loans, & Business Positions

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A M E N D M E N T

(Other than Gifts and Travel Payments)

► 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Airbnb, Inc.	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
888 Brannan St., San Francisco, CA 94103	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Internet Platform	Boomesone Title, in Parti, or Goories
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
VP, Deputy General Counsel	
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$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
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	Commission or Rental Income, list each source of \$10,000 or more
(Describe)	(Describe)
Other	Other
(Describe)	(Describe)
Comments	
* You are not required to report loans from a commercial lending institut card transaction, made in the lender's regular course of business on te status. Personal loans and loans received not in a lender's regular co	ion, or any indebtedness created as part of a retail installment or credit erms available to members of the public without regard to your official
* You are not required to report loans from a commercial lending institut card transaction, made in the lender's regular course of business on to status. Personal loans and loans received not in a lender's regular co	ion, or any indebtedness created as part of a retail installment or credit erms available to members of the public without regard to your official urse of business must be disclosed as follows:
 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P You are not required to report loans from a commercial lending institut card transaction, made in the lender's regular course of business on to status. Personal loans and loans received not in a lender's regular course. 	ion, or any indebtedness created as part of a retail installment or credit erms available to members of the public without regard to your official urse of business must be disclosed as follows: INTEREST RATE TERM (Months/Years)
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