STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A Public Document

1. Office, Agency, or Court
   Agency Name (Do not use acronyms)
   State Bar of California
   Division, Board, Department, District, if applicable
   Board of Trustees
   Your Position
   Board Member
   ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
   Agency: **SEE ATTACHED FOR ADDITIONAL POSITIONS**
   Position:

2. Jurisdiction of Office (Check at least one box)
   ☑ State
   ☐ Multi-County
   ☐ County of San Francisco
   ☐ City of
   ☐ Other

3. Type of Statement (Check at least one box)
   ☑ Annual: The period covered is January 1, 2022 through December 31, 2022.
   ☐ The period covered is ______/____/____, through December 31, 2022.
   ☐ Assuming Office: Date assumed ______/____/____
   ☐ Candidate: Date of Election ______/____/____ and office sought, if different than Part 1:
   ☐ Leaving Office: Date Left ______/____/____
   (Check one circle)
   ☐ The period covered is January 1, 2022 through the date of leaving office.
   ☐ The period covered is ______/____/____, through the date of leaving office.

4. Schedule Summary (required)
   ▶ Total number of pages including this cover page: 5
   Schedules attached
   ☐ Schedule A-1 - Investments – schedule attached
   ☐ Schedule A-2 - Investments – schedule attached
   ☐ Schedule B - Real Property – schedule attached
   ☑ Schedule C - Income, Loans, & Business Positions – schedule attached
   ☐ Schedule D - Income – Gifts – schedule attached
   ☑ Schedule E - Income – Gifts – Travel Payments – schedule attached
   -or-
   ☐ None - No reportable interests on any schedule

5. Verification
   MAILING ADDRESS
   1 Dr. Carlton B. Goodlett Place Room 140
   San Francisco CA 94102
   STREET
   (Business or Agency Address Recommended - Public Document)
   CITY
   STATE
   ZIP CODE
   (415) 554-4479
   E-MAIL ADDRESS
   jose.cisneros@calbar.ca.gov
   DAYTIME TELEPHONE NUMBER
   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 03/01/2023
   Signature Jose Miguel Cisneros
   (Please sign and date this page with your original signature)
**STATEMENT OF ECONOMIC INTERESTS**

**COVER PAGE**

Expanded Statement Attachment

*This table lists all positions including the primary position listed in the Office, Agency, or Court section of the Cover Page.*

<table>
<thead>
<tr>
<th>Agency</th>
<th>Div/Board/Dept/District</th>
<th>Position</th>
<th>Type of Statement</th>
<th>SAN #</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Bar of California</td>
<td>Board of Trustees</td>
<td>Board Member</td>
<td>Annual 1/1/2022 - 12/31/2022</td>
<td>112100405-NFH-0405</td>
</tr>
<tr>
<td>City and County of San Francisco</td>
<td>Office of the Treasurer and Tax Collector</td>
<td>Treasurer</td>
<td>Annual 1/1/2022 - 12/31/2022</td>
<td></td>
</tr>
</tbody>
</table>
**SCHEDULE A-2**
Investments, Income, and Assets of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

1. **BUSINESS ENTITY OR TRUST**

Mark Kelleher

Name

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2  ☑ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**

Organizational Development Consultant

FAIR MARKET VALUE  IF APPLICABLE, LIST DATE:

☐ $0 - $1,999  ☑ $10,001 - $100,000

☐ $2,000 - $10,000  ☑ $100,001 - $1,000,000

☐ $10,001 - $100,000

☐ Over $1,000,000

NATURE OF INVESTMENT

☐ Partnership  ☑ Sole Proprietorship  ☐ Other

YOUR BUSINESS POSITION Spouse

Broderick Haight Consulting

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

☐ $1,001 - $10,000

3. **LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE**

☐ None  ☑ Names listed below

Phoenix Philanthropy Group

4. **INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

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

FAIR MARKET VALUE  IF APPLICABLE, LIST DATE:

☐ $2,000 - $10,000  ☑ $10,001 - $100,000

☐ $10,001 - $100,000  ☑ $100,001 - $1,000,000

☐ Over $1,000,000

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust  ☐ Stock  ☐ Partnership

☐ Leasehold  ☐ Other  ☐ Yrs. remaining

☐ Check box if additional schedules reporting investments or real property are attached

**COMMENTS:**

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Cisneros, Jose Miguel

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

☐ $1,001 - $10,000

3. **LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE**

☐ None  ☑ 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

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

FAIR MARKET VALUE  IF APPLICABLE, LIST DATE:

☐ $2,000 - $10,000  ☑ $10,001 - $100,000

☐ $10,001 - $100,000  ☑ $100,001 - $1,000,000

☐ Over $1,000,000

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust  ☐ Stock  ☐ Partnership

☐ Leasehold  ☐ Other  ☐ Yrs. remaining

☐ Check box if additional schedules reporting investments or real property are attached

**COMMENTS:**
**SCHEDULE B**  
**Interests in Real Property**  
*(Including Rental Income)*

### ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

**BLOCK 3753 LOT 335**  
San Francisco  
CITY

<table>
<thead>
<tr>
<th>FAIR MARKET VALUE</th>
<th>IF APPLICABLE, LIST DATE:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,000 - $10,000</td>
<td>/ / 22</td>
<td>ACQUIRED</td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
<td>/ / 22</td>
<td>DISPOSED</td>
</tr>
<tr>
<td>$100,001 - $1,000,000</td>
<td>/ / 22</td>
<td><strong>ACQUIRED</strong></td>
</tr>
<tr>
<td>Over $1,000,000</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**NATURE OF INTEREST**  
- Ownership/Deed of Trust  
- Easement  
- Leasehold  
- Yrs. remaining  
- Other

**IF RENTAL PROPERTY, GROSS INCOME RECEIVED**  
- $0 - $499  
- $500 - $1,000  
- $1,001 - $10,000  
- 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.

- None

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* You are not required to report loans from a commercial lending institution 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*  

**ADDRESS (Business Address Acceptable)**  

**BUSINESS ACTIVITY, IF ANY, OF LENDER**  

**INTEREST RATE**  

**TERM (Months/Years)**  

**HIGHEST BALANCE DURING REPORTING PERIOD**  

- $500 - $1,000  
- $1,001 - $10,000  
- $10,001 - $100,000  
- OVER $100,000  
- Guarantor, if applicable

### NAME OF LENDER*  

**ADDRESS (Business Address Acceptable)**  

**BUSINESS ACTIVITY, IF ANY, OF LENDER**  

**INTEREST RATE**  

**TERM (Months/Years)**  

**HIGHEST BALANCE DURING REPORTING PERIOD**  

- $500 - $1,000  
- $1,001 - $10,000  
- $10,001 - $100,000  
- OVER $100,000  
- Guarantor, if applicable

* Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:**
### SCHEDULE D
Income – Gifts

<table>
<thead>
<tr>
<th>NAME OF SOURCE (Not an Acronym)</th>
<th>ADDRESS (Business Address Acceptable)</th>
<th>BUSINESS ACTIVITY, IF ANY, OF SOURCE</th>
<th>DATE (mm/dd/yy)</th>
<th>VALUE</th>
<th>DESCRIPTION OF GIFT(S)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PolicyLink</td>
<td>1438 Webster St #303, Oakland, CA 94612</td>
<td>Cities &amp; Counties for Fine and Fee Justice Bootcamp</td>
<td>03/04/22</td>
<td>$260.64</td>
<td>Food/beverage</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME OF SOURCE (Not an Acronym)</th>
<th>ADDRESS (Business Address Acceptable)</th>
<th>BUSINESS ACTIVITY, IF ANY, OF SOURCE</th>
<th>DATE (mm/dd/yy)</th>
<th>VALUE</th>
<th>DESCRIPTION OF GIFT(S)</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Francisco Travel</td>
<td>One Front St, San Francisco, CA 94111</td>
<td>2022 Consular Corp 4th of July Party</td>
<td>07/04/22</td>
<td>$79.76</td>
<td>Dinner</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME OF SOURCE (Not an Acronym)</th>
<th>ADDRESS (Business Address Acceptable)</th>
<th>BUSINESS ACTIVITY, IF ANY, OF SOURCE</th>
<th>DATE (mm/dd/yy)</th>
<th>VALUE</th>
<th>DESCRIPTION OF GIFT(S)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cisneros, Jose Miguel</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Comments:

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**FPPC Form 700 Schedule D (2022/2023)

advice@fppc.ca.gov • 866-275-3772 • www.fppc.ca.gov**