



STATEMENT OF ECONOMIC INTERESTS COVER PAGE A PUBLIC DOCUMENT

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NAME OF FILER (LAST) (FIRST) (MIDDLE) Cisneros, Jose Miguel

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 Chair 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)

[X] State [ ] Multi-County [X] City of San Francisco [ ] Judge (Supreme, Appellate, Superior Court), Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) [X] County of San Francisco [ ] Other

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

[X] Annual: The period covered is January 1, 2025, through December 31, 2025. -or- The period covered is through December 31, 2025. [ ] Assuming Office: Date assumed [ ] Candidate: Date of Election and office sought, if different than Part 1: [ ] Leaving Office: Date Left (Check one circle below.) [ ] The period covered is January 1, 2025, through the date of leaving office. -or- [ ] The period covered is through the date of leaving office.

4. Schedule Summary (required)

Total number of pages including this cover page: 4

Schedules attached

- [ ] Schedule A-1 - Investments - schedule attached [X] Schedule A-2 - Investments - schedule attached [X] Schedule B - Real Property - schedule attached [ ] Attachment 700-P - Prospective Employment (87200 Filers Only) - 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 STREET CITY STATE ZIP CODE 180 Howard St San Francisco CA 94105 DAYTIME TELEPHONE NUMBER EMAIL ADDRESS ( 415 ) 554-4479 jose.cisneros@calbar.ca.gov

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 03/16/2026 Signature Jose Miguel Cisneros (month, day, year) (File the originally signed paper statement with your filing official.)

**STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
Expanded Statement Attachment**

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Jose Miguel Cisneros

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

Agency	Div/Board/Dept/District	Position	Type of Statement	SAN #
State Bar of California	Board of Trustees	Chair	Annual 1/1/2025 - 12/31/2025	112100405-NFH-0405
City and County of San Francisco	Office of the Treasurer and Tax Collector	Treasurer	Annual 1/1/2025 - 12/31/2025	



