



CITY AND COUNTY OF SAN FRANCISCO DEPARTMENT OF ELECTIONS

John Arntz, Director

Official Filing Forms – Local Office

Please read the following carefully:

- You must file your declaration of candidacy on the same day as you file your declaration to accept or solicit campaign contributions. SF MEC § 201
- If you are a member of a City board, commission, or other body established by the San Francisco Charter, filing your declaration of candidacy may, with certain exceptions, result in forfeiture of your seat. S.F. Charter § 4.101.1

2024 JUL 18 AM 9:10
DEPARTMENT OF ELECTIONS

Issued by: He Date: 7/18/24

Declaration of Intention to Solicit or Accept Contributions For Local Office

(CGCC § 1.122(a); SF MEC § 201)

I, Ann Hsu, hereby declare my intention to become a candidate for the office of Board of Education of San Francisco at the forthcoming election to be held on Nov 5, 2024.

Print name of candidate
Print name [REDACTED] Month, day, year

[REDACTED] July 18, 2024

Candidate's signature Date

Declaration of Candidacy

(CGCC § 1.122(a); CAEC §§ 13, 200, 8020, 8028(a), 8040, 8064; SF MEC § 201, 210)

I hereby declare myself a candidate for election to the office of Board of Education to be voted for at the Consolidate General Election to be held on November 5th, 2024, and I declare the following to be true: my legal name, as given at birth or as established by marriage, common usage, or habit in all my affairs, or by decree of any court of competent jurisdiction is:

Ann Hsu

Print first name M. I. Print last name

Addresses
Home: 531 14th Ave. San Francisco, CA 94118

Number and street City, State ZIP Code

Mailing: same as above

Number and street City, State ZIP Code

Telephone Number: 415-933-7468; Fax: _____; Email: annhsu25@gmail.com

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

Executed on July 18, 2024, in San Francisco, CA

Date City, State

[Signature]
Candidate signature



Sworn Statement

- I meet the statutory and/or constitutional requirements for this office including, but not limited to, citizenship and residency.
- I understand that I may withdraw no later than 67 days before the election.
- I am at present the incumbent of the following public office (if any): N/A

[Signature]
Candidate signature

July 18, 2024.
Date

Oath of Office

I, Ann Hsu, do solemnly swear (or affirm) that I will support and defend the Constitution of the United States and the Constitution of the State of California against all enemies, foreign and domestic; that I will bear true faith and allegiance to the Constitution of the United States and the Constitution of the State of California; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties upon which I am about to enter.

[Signature]
Candidate signature

State of California
County of San Francisco SS.

Subscribed and sworn to before me on this 18th day of July, 2024.

[Signature]
Notary Public (or other official)

Examined and certified by [Signature] Deputy this 17th day of July, 2024

For Department of Elections Use:
Date of original registration: 10/28/1998 Date of re-registration: 03/07/2023



CITY AND COUNTY OF SAN FRANCISCO DEPARTMENT OF ELECTIONS

John Arntz, Director

November 5, 2024, Consolidated General Election

Acknowledgements Related to:

- City Attorney, District Attorney, Sheriff, Treasurer, Board of Education, and Community College Board contests only
- Financial Disclosures
- Signatures in Lieu of Filing Fee Petition
- Nomination Petition
- Petition Signatures and Form

2024 JUL 18 AM 9:13
DEPARTMENT OF ELECTIONS

By: HC County Elections Official
Date Issued: 7/18/24

Candidate Name and Office	1	Candidate Name: <u>Ann Hsu</u> Office Sought: <u>Board of Education</u> Signature: _____ Date: _____
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Please initial to acknowledge the following:

Campaign Finance	2	<ul style="list-style-type: none"> • Local, state, and federal regulations require candidates and campaigns to disclose certain financial information, including campaign contributions and spending, and conflicts of interest. • All campaign finance-related inquiries, including requirements and schedules, are to be directed to the San Francisco Ethics Commission or the California Fair Political Practices Commission. 	Candidate Initials _____
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Signatures in Lieu (SIL) of Filing Fee Period	3	<ul style="list-style-type: none"> • May 16, 2024 – July 10, 2024 • The SIL Petition form is issued and must be returned during the SIL period above. • Within 10 days of receipt of a petition, the Department will notify the candidate of any deficiency and issue a petition form for Supplemental Signatures in Lieu of Filing Fee. The candidate shall submit the supplemental petition or pay the prorated portion of the filing fee prior to the nomination deadline. • The legal deadline falls on a Saturday, Sunday or holiday; the deadline will move forward to the next working day. (CA Gov. Code §6707) 	Candidate Initials _____
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Nomination Petition	4	<ul style="list-style-type: none"> • July 15, 2024 – August 9, 2024 • The Nomination Petition form is issued and must be returned during the nomination period above. • Candidate filing fee or prorated fee is due when nomination documents are filed. • The filing fee is non-refundable. 	Candidate Initials _____
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Petition Signatures and Form	5	<ul style="list-style-type: none"> • Petitions are issued and must be returned as two-sided forms. A front page stapled to a back page will not be accepted. • All petitions must be submitted in person by the candidate or the candidate's authorized representative. Faxed, emailed, or mailed petitions will not be accepted. • All information, including the circulator's affidavit, must be completed by hand. Preprinted or typed information will invalidate signatures. • Incomplete or inaccurate signer information should be crossed out, as it could affect a random sampling. • By law the review of nomination signatures is limited to viewing the documents only. Copies via any media device or distribution of copies containing voter signatures is not permitted. (CAEC §17100) 	Candidate Initials _____
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California Secretary of State
BALLOT DESIGNATION WORKSHEET

November 5, 2024, General Election (Elections Code §§ 13107, 13107.3, 13107.5; California Code of Regulations § 20711)

This entire form must be completed, or it will not be accepted, and you will not be entitled to a ballot designation. DO NOT LEAVE ANY RESPONSE SPACES BLANK. If information requested is not applicable, please write "N/A" in the space provided, otherwise the information MUST be provided. UPON FILING, THIS WORKSHEET WILL BE A PUBLIC DOCUMENT.

SAF FRANCISCO
2024 JUL 30 AM 10:48
DEPARTMENT OF ELECTIONS

Candidate Information

1 Candidate Name: Ann Hsu
 Office: Board of Education Email: [REDACTED]
 Home Address: [REDACTED] San Francisco CA 94118
 Mailing Address: [REDACTED] SP CA 94123
 Business Address: _____
 Phone Number(s) _____
 Business: _____ Home/Mobile: [REDACTED] Fax: _____

Attorney or Other Authorized Person Information

2 Attorney Name (or other person authorized to act on your behalf): Quincy Yu
 Address: 3300 Laguna St #3 San Francisco CA 94123
 Phone Number(s) _____
 Business: _____ Mobile: 415-297-6168 Fax: _____

You may select as your ballot designation one of the following designations:

- (a) Your current principal profession(s), vocation(s), or occupation(s) [maximum total of three words, separated by a slash ("/")].
- (b) The full title of the public office you currently occupy and to which you were elected.
- (c) "Appointed [full title of public office]" if you currently serve by appointment in an elective public office and are seeking election to the same office or to some other office.
- (d) "Incumbent" if you were elected (or, if you are a Superior Court Judge, you are a candidate for the same office that you hold) to your current public office and seek election to the same office.
- (e) "Appointed Incumbent" if you were appointed to your current elective public office and seek election to the same office. [REDACTED] Commissioner

Proposed Ballot Designation(s)

3 Proposed Ballot Designation(s): School Principal / Former Board of Education
 Alternate Ballot Designation(s) 1: Principal / Former Board of Education Commissioner
 Alternate Ballot Designation(s) 2: Principal / Former Commissioner

If your proposed ballot designation is pursuant to Elections Code § 13107(a)(3):

The professions, vocations or occupations related to my proposed ballot designation(s) constitute my primary, main or leading professions, vocations or occupations. Initial: [REDACTED]

Translation of Proposed Designation: Gender specific translations will default to the masculine form for uniformity in translation unless you specify otherwise: () Masculine () Feminine

In the spaces provided on the next page(s):

- (a) Describe why you believe you are entitled to use the proposed ballot designation.
- (b) If your proposed ballot designation contains one or more slashes ("/") separating words in your ballot designation for separate principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.
- (c) Attach any documents or exhibits that you believe support your proposed ballot designation. (Note: It is not necessary to provide copies of Certificates of Election if you are currently a seated member for a voter-nominated office).
- (d) If using the title of an elective office, attach a copy of your certificate of election or appointment.
- (e) Any supporting documents will not be returned to you. **Do not submit originals.**

It is your responsibility to justify your proposed ballot designation and to provide all requested details.



California Secretary of State
BALLOT DESIGNATION WORKSHEET

November 5, 2024, General Election (Elections Code §§ 13107, 13107.3, 13107.5; California Code of Regulations § 20711)

Page 2

If your proposed ballot designation includes the word "volunteer," indicate the title of your volunteer position and the name of the entity for which you volunteer along with a brief description of the type of volunteer work you do and the approximate amount of time involved. You may only use the ballot designation "community volunteer" if you volunteer for a 501(c)(3) charitable, educational, or religious organization, a governmental agency or an educational institution. You may not use "community volunteer" together with another designation.

If your proposed ballot designation contains one or more slashes ("/") separating multiple principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.

Justification for use of Proposed Ballot Designation(s)
If you are proposing alternate ballot designations, please provide justification for use of those on Page 3.

4	Justification for use of 1st PVO: <i>I am the founder and current principal of Bertrand D Hsu American & Chinese Bicultural Academy, a nonprofit K-8 day school in San Francisco.</i>
	Current or most recent job title: <i>Principal & Founder</i> Start Date: <i>9/4/2023</i> End Date: <i>Current</i>
	Employer Name or Business: <i>Bertrand D Hsu American + Chinese Bicultural Academy</i>
	Person who can verify this information: Name: <i>Quincy Yu</i> Phone Number(s): <i>415-297-6168</i> Email: <i>quincye@berthsuacademy.org</i>
4	Justification for use of 2nd PVO:
	Current or most recent job title: <i>Board of Education Commissioner</i> Start Date: End Date: <i>1/31/2023</i>
	Employer Name or Business: <i>San Francisco Unified School District</i>
	Person who can verify this information: Name: <i>Matt Wayne</i> Phone Number(s): <i>415-241-6000</i> Email: <i>waynem@sfusd.edu</i>
4	Justification for use of 3rd PVO:
	Current or most recent job title: Start Date: End Date:
	Employer Name or Business:
	Person who can verify this information: Name: Phone Number(s): Email:

Before signing below, answer/initial the following questions. Does your proposed ballot designation:

- | | | |
|--|--|---------|
| 1) Use only a portion of the title of your current elected office? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial |
| 2) Non-judicial candidates: Use only the word "Incumbent" for an elective office to which you were appointed? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial |
| 3) Use more than three total words for your principal professions, vocations, or occupations? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial |
| 4) Suggest an evaluation of you, such as outstanding, leading, expert, virtuous, or eminent? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial |
| 5) Refer to a status (Veteran, Activist, Founder, Scholar), rather than a profession, vocation, or occupations? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial |
| 6) Abbreviate the word "retired"? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial |
| 7) Place the word "retired" after the words it modifies? Example: Accountant, retired | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial |
| 8) Use a word or prefix (except "retired") such as "former" or "ex-" to refer to a former profession, vocation, or occupation? | <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial |
| 9) Use the word "retired" along with a current profession, vocation, or occupation? Example: Retired Firefighter/Teacher | <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial |
| 10) Use the name of a political party or political body? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial |
| 11) Refer to a racial, religious, or ethnic group? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial |
| 12) Refer to any activity prohibited by law? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial |

If the answer to any of these questions is "yes," your proposed ballot designation is likely to be rejected.

X [Redacted Signature] 07/30/2024
 Candidate's Signature Date Signed: Month/Day/Year

For your reference, attached are Elections Code sections 13107, 13107.3, and 13107.5, and California Code of Regulations (CCR), title 2, section 20711. You also may wish to consult CCR, title 2, sections, 20712-20719 (found at www.sos.ca.gov).



CITY AND COUNTY OF SAN FRANCISCO DEPARTMENT OF ELECTIONS

John Arntz, Director

For the Ballot
(CAEC §§ 13104, 13106- 13107, 13211.7; SF MEC §§ 205, 225, 401)

Official Filing Form
2024 JUL 30 AM 10:48 DEPARTMENT OF ELECTIONS
County Elections Official
By: _____ Date Issued: _____

IMPORTANT NOTE: A ballot designation is optional. If one is requested, a completed **BALLOT DESIGNATION WORKSHEET** must be submitted. If no ballot designation is requested, write "NONE" and initial in the box. (Elections Code §§ 13107, 13107.3)

Ballot Information
Name and ballot designation to appear on the ballot

I request my name and ballot designation to appear on the ballot as follows:

1

Ann Hsu

Print Your Name for Use on the Ballot

Candidate initials box if NO ballot designation is preferred.

School Principal / Former Board of Education

Print Ballot Designation Requested

Commissioner

Name in Chinese Characters

2

The names of candidates appear on the official ballot in traditional Chinese characters as well as in English. The Department of Elections can provide this transliteration or translation for candidates for local office, or the candidate may provide documentation of established use of a name in Chinese.

If a candidate has a character-based name by birth, that can be verified by birth certificate or other valid identification, the candidate may use that name on the ballot instead of a phonetic transliteration. A candidate who does not have a character-based name by birth, but who identifies by a particular character-based name and can demonstrate that they have been known and identified within the public sphere by that name over the past two years, may use that name instead of a phonetic transliteration.

Check one option (provide supporting documentation): *Ann Hsu's Chinese name appeared on the 2022 Ballot*

- I request that the Department of Elections, working with a qualified Chinese-language translator, provide a Chinese transliteration or translation of my name for all materials where it is legally required.
- I am providing documentation of established use of a particular Chinese transliteration or translation of my name for the Department to review. I understand that the Department's decision whether to accept a proposed transliteration or translation is final.
- I have a character-based name by birth and am providing supporting documentation of this name.

English (415) 554-4375
Fax (415) 554-7344
TTY (415) 554-4386

sfelections.org
1 Dr. Carlton B. Goodlett Place
City Hall, Room 48, San Francisco, CA 94102

中文 (415) 554-4367
Español (415) 554-4366
Filipino (415) 554-4310



**CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF ELECTIONS**

John Arntz, Director

Supplemental Form
Chinese-Characters-Based Name
(SF MEC § 401)

Declaration of Family Member Affirming Candidate's Use of a Chinese-Character-Based Name Since Birth

Declaration of Family Member

Use this form if you are a candidate who requires a family member to declare that you received a Chinese-character-based name at birth, and you cannot provide other documentation supporting your use of this name.

The character-based name must be provided using traditional Chinese characters.

Official Filing Form
County Elections Official
By: _____
Date Issued: _____

Declaration	<p>My name is _____ and my relation to _____ <small>Print Name</small> <small>Print Candidate Name</small></p> <p>is _____ <small>State Family Relationship</small></p> <p>1. Based on personal knowledge I, solemnly swear (or affirm) that the candidate has been known, since birth, by the following Chinese-character-based name: _____ <small>Print Chinese-Character-Based Name</small></p> <p>2. I have no documentation to support this statement.</p> <p>I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.</p> <p>Dated this _____ day of _____, 2023</p> <div style="border: 2px solid red; padding: 5px; display: inline-block; margin-top: 10px;"> <p style="font-size: 2em; margin: 0;">X</p> </div> <p style="margin-top: 5px;">Signature of Declarant Family Member</p>
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<p>上訴法院法官·第一區·第三分區 是否應該依法定任期選任大法官維克多·A·羅德里格斯為該官職?</p> <p>YES / 贊成 <input type="radio"/></p> <p>NO / 反對 <input type="radio"/></p>	<p>MEMBER, BOARD OF EDUCATION 教育委員會成員 Vote for no more than Three / 選不超過三人</p> <p>LAINE MOTAMBE 麥美兒 Appointed Member, Board of Education 委任的教育委員會成員</p> <p>ANN HSU 徐安 Appointed Member, Board of Education 委任的教育委員會成員</p> <p>ALIDA FISHER 阿莉莎 費赫莎 Special Education Advocate 特殊教育倡導者</p> <p>KAREN FLESHMAN 凱倫 費曼曼 Diversity Inclusion Educator 多元化包容教育工作者</p> <p>LISA WEISSMAN-WARD 李麗文 Appointed Member, Board of Education 委任的教育委員會成員</p> <p>GABRIELA LÓPEZ 盧佩思 Teacher Educator 教師教育工作者</p>
<p>FOR ASSOCIATE JUSTICE, COURT OF APPEAL, FIRST DISTRICT, DIVISION THREE Shall Associate Justice IOANA PETROU be elected to the office for the term provided by law? 上訴法院法官·第一區·第三分區 是否應該依法定任期選任大法官伊萬娜·佩特羅為該官職?</p> <p>YES / 贊成 <input type="radio"/></p> <p>NO / 反對 <input type="radio"/></p>	<p>DISTRICT / 地區 BART DIRECTOR, DISTRICT 8 灣區捷運董事·第8選區 Vote for One / 選一人 JANICE LI 李正元 BART Board Director 灣區捷運董事</p>
<p>FOR ASSOCIATE JUSTICE, COURT OF APPEAL, FIRST DISTRICT, DIVISION THREE Shall Associate Justice CARIN T. FUJISAKI be elected to the office for the term provided by law? 上訴法院法官·第一區·第三分區 是否應該依法定任期選任大法官卡琳·T·藤崎為該官職?</p> <p>YES / 贊成 <input type="radio"/></p> <p>NO / 反對 <input type="radio"/></p>	<p>FOR ASSOCIATE JUSTICE, COURT OF APPEAL, FIRST DISTRICT, DIVISION FOUR Shall Associate Justice TRACIE L. BROWN be elected to the office for the term provided by law? 上訴法院法官·第一區·第四分區 是否應該依法定任期選任大法官特雷西·L·布朗為該官職?</p> <p>YES / 贊成 <input type="radio"/></p> <p>NO / 反對 <input type="radio"/></p>
<p>FOR ASSOCIATE JUSTICE, COURT OF APPEAL, FIRST DISTRICT, DIVISION FOUR Shall Associate Justice JEREMY M. GOLDMAN be elected to the office for the term provided by law? 上訴法院法官·第一區·第四分區 是否應該依法定任期選任大法官傑瑞米·M·戈德曼為該官職?</p> <p>YES / 贊成 <input type="radio"/></p> <p>NO / 反對 <input type="radio"/></p>	<p>FOR ASSOCIATE JUSTICE, COURT OF APPEAL, FIRST DISTRICT, DIVISION THREE Shall Associate Justice JEREMY M. GOLDMAN be elected to the office for the term provided by law? 上訴法院法官·第一區·第三分區 是否應該依法定任期選任大法官傑瑞米·M·戈德曼為該官職?</p> <p>YES / 贊成 <input type="radio"/></p> <p>NO / 反對 <input type="radio"/></p>

Vote both sides of ballot / 請在選票兩面投票

2/5 CH

92919



17 pg



STATEMENT OF ECONOMIC INTERESTS COVER PAGE A PUBLIC DOCUMENT

Date Initial Filing Received Filing Official Use Only

SAN FRANCISCO FILED

2024 JUL 30 AM 10:48

DEPARTMENT OF ELECTIONS

Please type or print in ink.

NAME OF FILER (LAST) Htsu (FIRST) Ann (MIDDLE) Commissioner

1. Office, Agency, or Court

Agency Name (Do not use acronyms) San Francisco Board of Education Commissioner

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, Multi-County, City of San Francisco, Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction), County of, Other

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

- Annual: The period covered is January 1, 2023, through December 31, 2023. Leaving Office: Date Left. The period covered is January 1, 2023, through the date of leaving office. Assuming Office: Date assumed. The period covered is through the date of leaving office. Candidate: Date of Election 11/5/2024 and office sought, if different than Part 1:

4. Schedule Summary (required)

Total number of pages including this cover page:

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 STREET CITY STATE ZIP CODE SAN FRANCISCO CA 94118 DAYTIME TELEPHONE NUMBER EMAIL ADDRESS

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 07/18/2024 Signature

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

Name
Ann Hsu

▶ NAME OF BUSINESS ENTITY
ABB LTD ADR

GENERAL DESCRIPTION OF THIS BUSINESS
Industrials

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
ADOBE INC

GENERAL DESCRIPTION OF THIS BUSINESS
Information Technology

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
ADVANCED MICRO DEVICES INC

GENERAL DESCRIPTION OF THIS BUSINESS
Information Technology

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
ALIGN TECHNOLOGY INC

GENERAL DESCRIPTION OF THIS BUSINESS
Health Care

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
ALPHABET INC CLASS A

GENERAL DESCRIPTION OF THIS BUSINESS
Communication Services

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
AMAZON COM INC COM

GENERAL DESCRIPTION OF THIS BUSINESS
Consumer Discretionary

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

Comments: _____

SCHEDULE A-1

Investments

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

Investments must be itemized.

Do not attach brokerage or financial statements.

Name

Ann Hsu

NAME OF BUSINESS ENTITY: AMERICAN EXPRESS CO
GENERAL DESCRIPTION OF THIS BUSINESS: Financials
FAIR MARKET VALUE: \$10,001 - \$100,000
NATURE OF INVESTMENT: Stock
IF APPLICABLE, LIST DATE: / / 23

NAME OF BUSINESS ENTITY: AMERICAN TOWER CORP NEW
GENERAL DESCRIPTION OF THIS BUSINESS: Real Estate
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock
IF APPLICABLE, LIST DATE: / / 23

NAME OF BUSINESS ENTITY: APPLE INC
GENERAL DESCRIPTION OF THIS BUSINESS: Information Technology
FAIR MARKET VALUE: \$10,001 - \$100,000
NATURE OF INVESTMENT: Stock
IF APPLICABLE, LIST DATE: / / 23

NAME OF BUSINESS ENTITY: ASML HOLDING NV NYS
GENERAL DESCRIPTION OF THIS BUSINESS: Information Technology
FAIR MARKET VALUE: \$10,001 - \$100,000
NATURE OF INVESTMENT: Stock
IF APPLICABLE, LIST DATE: / / 23

NAME OF BUSINESS ENTITY: ASTRAZENECA PLC ADR
GENERAL DESCRIPTION OF THIS BUSINESS: Health Care
FAIR MARKET VALUE: \$10,001 - \$100,000
NATURE OF INVESTMENT: Stock
IF APPLICABLE, LIST DATE: / / 23

NAME OF BUSINESS ENTITY: BLACKROCK INC
GENERAL DESCRIPTION OF THIS BUSINESS: Financials
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock
IF APPLICABLE, LIST DATE: / / 23

Comments:

**SCHEDULE A-1
Investments**

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

Investments must be itemized.

Do not attach brokerage or financial statements.

<p>CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION</p> <p>Name <i>Ann Hsu</i></p>
--

▶ NAME OF BUSINESS ENTITY
BOOKING HLDGS INC COM

GENERAL DESCRIPTION OF THIS BUSINESS
Consumer Discretionary

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
BP PLC SPONSORED ADR

GENERAL DESCRIPTION OF THIS BUSINESS
Energy

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
CATERPILLAR INC

GENERAL DESCRIPTION OF THIS BUSINESS
Industrials

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
COCA COLA

GENERAL DESCRIPTION OF THIS BUSINESS
Consumer Staples

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
COSTCO WHSL CORP

GENERAL DESCRIPTION OF THIS BUSINESS
Consumer Staples

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
CSX CORP

GENERAL DESCRIPTION OF THIS BUSINESS
Industrials

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

Comments: _____

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

Name
Ann Hsu

▶ NAME OF BUSINESS ENTITY
CUMMINS INC

GENERAL DESCRIPTION OF THIS BUSINESS
Industrials

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
DANONE ADR

GENERAL DESCRIPTION OF THIS BUSINESS
Consumer Staples

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
DEUTSCHE POST AG ADR

GENERAL DESCRIPTION OF THIS BUSINESS
Industrials

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
DISNEY WALT CO

GENERAL DESCRIPTION OF THIS BUSINESS
Communication Services

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
ELI LILLY & CO

GENERAL DESCRIPTION OF THIS BUSINESS
Health Care

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
EQUINOR ASA SPONSORED ADR

GENERAL DESCRIPTION OF THIS BUSINESS
Energy

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

Comments: _____

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

Name: Ann Hsu

ESSILORLUXOTTICA UNSPONSOR ADR
Health Care
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock

FANUC CORPORATION ADR
Industrials
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock

FIRST TR DOW JONES INTERNET
Diversified
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock

FORTESCUE METAL GROUP
Materials
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock

GOLDMAN SACHS GROUP INC
Financials
FAIR MARKET VALUE: \$10,001 - \$100,000
NATURE OF INVESTMENT: Stock

HEICO CORP NEW
Industrials
FAIR MARKET VALUE: \$10,001 - \$100,000
NATURE OF INVESTMENT: Stock

Comments:

SCHEDULE A-1

Investments

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

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 Name Ann Hsu

▶ NAME OF BUSINESS ENTITY
HERMES INTERNATIONAL SA ADR
 GENERAL DESCRIPTION OF THIS BUSINESS
Consumer Discretionary
 FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000
 NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)
 IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
HONDA MOTOR LTD ADR
 GENERAL DESCRIPTION OF THIS BUSINESS
Consumer Discretionary
 FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000
 NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)
 IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
IBERDROLA SA ADR
 GENERAL DESCRIPTION OF THIS BUSINESS
Utilities
 FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000
 NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)
 IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
INTESA SANPAOLO SPA ADR
 GENERAL DESCRIPTION OF THIS BUSINESS
Financials
 FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000
 NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)
 IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
INTUITIVE SURGICAL INC
 GENERAL DESCRIPTION OF THIS BUSINESS
Health Care
 FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000
 NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)
 IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
ISHARES GLOBAL HEALTH CARE ETF
 GENERAL DESCRIPTION OF THIS BUSINESS
Diversified
 FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000
 NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or more (Report on Schedule C)
 IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

Comments: _____

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

Name

Ann Hsu

NAME OF BUSINESS ENTITY: ISHARES MSCI EUROPE FN ETF
GENERAL DESCRIPTION OF THIS BUSINESS: Diversified
FAIR MARKET VALUE: [X] \$2,000 - \$10,000
NATURE OF INVESTMENT: [X] Stock

NAME OF BUSINESS ENTITY: ISHARES TR EXPANDED TECH
GENERAL DESCRIPTION OF THIS BUSINESS: Diversified
FAIR MARKET VALUE: [X] \$10,001 - \$100,000
NATURE OF INVESTMENT: [X] Stock

NAME OF BUSINESS ENTITY: ISHARES TR US MED DRG ETF
GENERAL DESCRIPTION OF THIS BUSINESS: Diversified
FAIR MARKET VALUE: [X] \$2,000 - \$10,000
NATURE OF INVESTMENT: [X] Stock

NAME OF BUSINESS ENTITY: JPMORGAN CHASE & CO
GENERAL DESCRIPTION OF THIS BUSINESS: Financials
FAIR MARKET VALUE: [X] \$10,001 - \$100,000
NATURE OF INVESTMENT: [X] Stock

NAME OF BUSINESS ENTITY: EXPEDIA GROUP INC
GENERAL DESCRIPTION OF THIS BUSINESS: Consumer Discretionary
FAIR MARKET VALUE: [X] \$2,000 - \$10,000
NATURE OF INVESTMENT: [X] Stock

NAME OF BUSINESS ENTITY: HOME DEPOT INC
GENERAL DESCRIPTION OF THIS BUSINESS: Consumer Discretionary
FAIR MARKET VALUE: [X] \$2,000 - \$10,000
NATURE OF INVESTMENT: [X] Stock

Comments:

**SCHEDULE A-1
Investments**

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

Investments must be itemized.

Do not attach brokerage or financial statements.

Name Ann Hsu

▶ NAME OF BUSINESS ENTITY
LOREAL CO ADR

GENERAL DESCRIPTION OF THIS BUSINESS
Consumer Staples

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
LAM RESEARCH CORP

GENERAL DESCRIPTION OF THIS BUSINESS
Information Technology

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
LOWES COS INC

GENERAL DESCRIPTION OF THIS BUSINESS
Consumer Discretionary

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
MASTERCARD INCORPORATED

GENERAL DESCRIPTION OF THIS BUSINESS
Financials

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
MEDTRONIC PLC

GENERAL DESCRIPTION OF THIS BUSINESS
Health Care

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
MERCEDES-BENZ GROUP AG ADR

GENERAL DESCRIPTION OF THIS BUSINESS
Consumer Discretionary

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

Comments: _____

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

Name
Ann Hsu

NAME OF BUSINESS ENTITY
MERCK & CO INC

GENERAL DESCRIPTION OF THIS BUSINESS
Health Care

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
MICROSOFT CORP

GENERAL DESCRIPTION OF THIS BUSINESS
Information Technology

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
MORGAN STANLEY

GENERAL DESCRIPTION OF THIS BUSINESS
Financials

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
MURATA MANUFACTURING CO LT ADR

GENERAL DESCRIPTION OF THIS BUSINESS
Information Technology

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
NETFLIX INC COM

GENERAL DESCRIPTION OF THIS BUSINESS
Communication Services

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
NIKE INC

GENERAL DESCRIPTION OF THIS BUSINESS
Consumer Discretionary

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

Comments: _____

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

Name Ann Hsu

NAME OF BUSINESS ENTITY: NOVOD-NORDISK AS ADR
GENERAL DESCRIPTION OF THIS BUSINESS: Health Care
FAIR MARKET VALUE: \$10,001 - \$100,000
NATURE OF INVESTMENT: Stock
IF APPLICABLE, LIST DATE: / / 23 ACQUIRED / / 23 DISPOSED

NAME OF BUSINESS ENTITY: ORACLE CORP
GENERAL DESCRIPTION OF THIS BUSINESS: Information Technology
FAIR MARKET VALUE: \$10,001 - \$100,000
NATURE OF INVESTMENT: Stock
IF APPLICABLE, LIST DATE: / / 23 ACQUIRED / / 23 DISPOSED

NAME OF BUSINESS ENTITY: PROCTER AND GAMBLE CO
GENERAL DESCRIPTION OF THIS BUSINESS: Consumer Staples
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock
IF APPLICABLE, LIST DATE: / / 23 ACQUIRED / / 23 DISPOSED

NAME OF BUSINESS ENTITY: QUALCOMM INC
GENERAL DESCRIPTION OF THIS BUSINESS: Information Technology
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock
IF APPLICABLE, LIST DATE: / / 23 ACQUIRED / / 23 DISPOSED

NAME OF BUSINESS ENTITY: REPSOL SA ADR
GENERAL DESCRIPTION OF THIS BUSINESS: Energy
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock
IF APPLICABLE, LIST DATE: / / 23 ACQUIRED / / 23 DISPOSED

NAME OF BUSINESS ENTITY: SANDVIK AB ADR
GENERAL DESCRIPTION OF THIS BUSINESS: Industrials
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock
IF APPLICABLE, LIST DATE: / / 23 ACQUIRED / / 23 DISPOSED

Comments:

SCHEDULE A-1

Investments

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

Investments must be itemized.

Do not attach brokerage or financial statements.

Name
Ann Hsu

▶ NAME OF BUSINESS ENTITY
SANOFI ADR

GENERAL DESCRIPTION OF THIS BUSINESS
Health Care

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
SCHLUMBERGER LTD

GENERAL DESCRIPTION OF THIS BUSINESS
Energy

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
SCHWAB CHARLES CORP COM

GENERAL DESCRIPTION OF THIS BUSINESS
Financials

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
SHELL PLC ADR

GENERAL DESCRIPTION OF THIS BUSINESS
Energy

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
SIEMENS AG ADR

GENERAL DESCRIPTION OF THIS BUSINESS
Industrials

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
SOCIETE GENERALE FRANCE SP ADR

GENERAL DESCRIPTION OF THIS BUSINESS
Financials

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

Comments: _____

**SCHEDULE A-1
Investments**

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

Investments must be itemized.

Do not attach brokerage or financial statements.

Name Ann Hsu

▶ NAME OF BUSINESS ENTITY
US BANCORP DEL

GENERAL DESCRIPTION OF THIS BUSINESS
Financials

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
VANECK SEMICONDUCTOR ETF

GENERAL DESCRIPTION OF THIS BUSINESS
Diversified

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
VERTEX PHARMACEUTICALS INC

GENERAL DESCRIPTION OF THIS BUSINESS
Health Care

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
VESTAS WIND SYS AS ADR

GENERAL DESCRIPTION OF THIS BUSINESS
Industrials

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
VISA INC

GENERAL DESCRIPTION OF THIS BUSINESS
Financials

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
WALMART INC

GENERAL DESCRIPTION OF THIS BUSINESS
Consumer Staples

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/23 _____/_____/23
 ACQUIRED DISPOSED

Comments: _____

**SCHEDULE A-1
Investments**

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

Investments must be itemized.

Do not attach brokerage or financial statements.

Name

Ann Hsu

▶ NAME OF BUSINESS ENTITY
XYLEM INC

GENERAL DESCRIPTION OF THIS BUSINESS
Industrials

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 23 / / 23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
SSGA FDS S+P 500 INDEX

GENERAL DESCRIPTION OF THIS BUSINESS
Diversified

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 23 / / 23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
VANGUARD INDEX FDS 500 INDEX AD

GENERAL DESCRIPTION OF THIS BUSINESS
Diversified

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 23 / / 23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
VANGUARD INDEX FDS GRW INDEX A

GENERAL DESCRIPTION OF THIS BUSINESS
Diversified

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 23 / / 23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
SALESFORCE INC

GENERAL DESCRIPTION OF THIS BUSINESS
Information Technology

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 23 / / 23
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
SERVICENOW INC

GENERAL DESCRIPTION OF THIS BUSINESS
Information Technology

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____ (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 23 / / 23
 ACQUIRED DISPOSED

Comments: _____

SCHEDULE A-1

Investments

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

Investments must be itemized.

Do not attach brokerage or financial statements.

Name: Ann Hsu

Form for SONY GROUP CORP ADR. Includes fields for Name of Business Entity, General Description (Consumer Discretionary), Fair Market Value, and Nature of Investment (Stock).

Form for TAIWAN SEMICONDUCTOR MFG ADR. Includes fields for Name of Business Entity, General Description (Information Technology), Fair Market Value, and Nature of Investment (Stock).

Form for THERMO FISHER SCIENTIFIC INC. Includes fields for Name of Business Entity, General Description (Health Care), Fair Market Value, and Nature of Investment (Stock).

Form for TRANE TECHNOLOGIES PLC. Includes fields for Name of Business Entity, General Description (Industrials), Fair Market Value, and Nature of Investment (Stock).

Form for UNITED HEALTH GROUP INC. Includes fields for Name of Business Entity, General Description (Health Care), Fair Market Value, and Nature of Investment (Stock).

Form for US BANCORP DEL. Includes fields for Name of Business Entity, General Description (Financials), Fair Market Value, and Nature of Investment (Stock).

Comments:

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name <i>Ann Hsu</i>

▶ 1. BUSINESS ENTITY OR TRUST

Thomas M Chia and Ann Hsu Family Trust 2019
Name

531 14th Ave., San Francisco, CA 94118
Address (Business Address Acceptable)

Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$0 - \$1,999			
<input type="checkbox"/> \$2,000 - \$10,000		<i>1/23</i>	<i>1/23</i>
<input type="checkbox"/> \$10,001 - \$100,000		ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000			
<input type="checkbox"/> Over \$1,000,000			

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION _____

▶ 1. BUSINESS ENTITY OR TRUST

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

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$0 - \$1,999			
<input type="checkbox"/> \$2,000 - \$10,000		<i>1/23</i>	<i>1/23</i>
<input type="checkbox"/> \$10,001 - \$100,000		ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000			
<input type="checkbox"/> Over \$1,000,000			

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION _____

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

<input type="checkbox"/> \$0 - \$499	<input checked="" type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$1,001 - \$10,000	

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

<input type="checkbox"/> \$0 - \$499	<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$1,001 - \$10,000	

▶ 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

Rental Income 50%

▶ 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

▶ 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:

<input type="checkbox"/> \$2,000 - \$10,000			
<input type="checkbox"/> \$10,001 - \$100,000		<i>1/23</i>	<i>1/23</i>
<input type="checkbox"/> \$100,001 - \$1,000,000		ACQUIRED	DISPOSED
<input type="checkbox"/> 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

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

<input type="checkbox"/> \$2,000 - \$10,000			
<input type="checkbox"/> \$10,001 - \$100,000		<i>1/23</i>	<i>1/23</i>
<input type="checkbox"/> \$100,001 - \$1,000,000		ACQUIRED	DISPOSED
<input type="checkbox"/> 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)

Name
Ann Hsu

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
531 14th Ave
 CITY
San Francisco

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:
 ACQUIRED 1/23 DISPOSED 1/23

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
 \$10,001 - \$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.
 None
Rental 50%

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

 CITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:
 ACQUIRED 1/23 DISPOSED 1/23

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
 \$10,001 - \$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.
 None

* 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)
 _____% None _____
 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)
 _____% None _____
 HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

Comments: _____



CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF ELECTIONS

SAF 800 100
 John Arntz, Director

Candidate Statement of Qualifications
 (CAEC §§ 13307-13308)
 November 5, 2024, General Election

Official Filing Form
By: <u>JK</u> County Elections Official
Date Issued: <u>7/18/24</u>

Candidate Name: Ann Hsu
 Office Sought: Board of Education

Please complete the following sections:

1 I will NOT file a Candidate Statement of Qualifications
 I will file a Candidate Statement of Qualifications
 I will send an electronic copy of my statement in Word format to the Department at publications@sfgov.org no later than 5:00 p.m. of the next working day after the close of the nomination period.

Signature of Candidate: _____ Date 07/30/2024

2 This statement will be reproduced exactly as written. You may not make changes or corrections after the statement has been submitted. Please type or print neatly. If handwritten information or a revision is unclear, Department staff will interpret the provided information to the best of their abilities. This interpretation is final.

3 Name as it will appear with statement: Ann Hsu
 My occupation is: School Principal
 My qualifications are:

← Keep Text Within the Vertical Lines. Word count starts here: →

Students and parents deserve an experienced commissioner to fight for them. I will focus on education and not politics; I've pledged to tell the truth, be transparent, and not use this position as a steppingstone to higher office. I commit to serving all students, involving parents and practicing the values I hold which include integrity, respect and service. I will collaborate with people from all walks of life and across the political spectrum.

My priorities: address SFUSD's fiscal crisis to rebuild stability, retain and attract families to stop the financial hemorrhage, and retain and attract teachers to serve students' needs.

I am the principal and founder of a San Francisco non-profit K-8 school and an SFUSD parent. I am a former Board of Education Commissioner, CBOC Chair, Galileo PTSA President and Recall School Board leader. My financial and operations experience comes from founding and managing 3 companies over 18 years.

My endorsers include Matt Gonzalez, former Board of Supervisors President; Honorable Quentin Kopp, former Superior Court Judge and State Senator; John Rothmann, Voice of San Francisco and former KGO host; Lope Yap Jr, film producer and George Washington HS Alumni Board Member and Rex Ridgeway, San Francisco Democratic County Central Committee 2024 Public Education Hero.

www.annforsfboe.com

Ann Hsu

AUTHORIZATION OF ENDORSEMENT BY INDIVIDUAL

Date: July 29, 2024

SAN FRANCISCO
FILED

NOV 11 2024

DEPARTMENT OF EDUCATION

I, Matt Gonzalez wish to endorse (or support)

(Printed name of endorser)

Ann Hsu

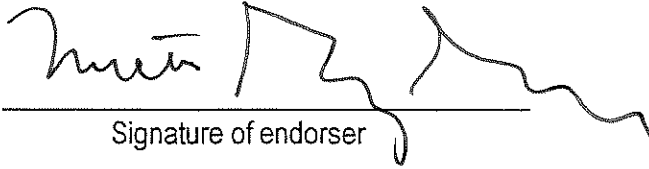
(Name of candidate)

on their "Candidate Statement of Qualifications", for

the office of Board of Education in the upcoming November 5, 2024 Consolidated

(Elective office)

General Election.



Signature of endorser

AUTHORIZATION OF ENDORSEMENT BY ORGANIZATION

USE ORGANIZATION'S LETTERHEAD

Date: _____

The _____ endorses (or supports)

(Printed name of endorser)

_____ on their candidate statement, for the office of

(Name of candidate)

_____ in the upcoming November 5, 2024 Consolidated

(Elective office)

General Election.

By: _____

(Printed Name of authorized representative)

Signature: _____

(Signature of authorized representative)

Title: _____

(Authorized officer of the organization)

AUTHORIZATION OF ENDORSEMENT BY INDIVIDUAL

SAVED TO PDF
FILED
2024 JUL 23 10:48
DEPT OF STATE

Date: 22 July 2024

I, Quentin L. Kopp wish to endorse (or ~~support~~)
(Printed name of endorser)

Ann Hus on their "Candidate Statement of Qualifications", for
(Name of candidate)

the office of Board of Education in the upcoming November 5, 2024 Consolidated
(Elective office)
General Election.

Signature of endorser

Quentin L. Kopp

AUTHORIZATION OF ENDORSEMENT BY ORGANIZATION

USE ORGANIZATION'S LETTERHEAD

Date: _____

The _____ endorses (or supports)
(Printed name of endorser)

_____ on their candidate statement, for the office of
(Name of candidate)

_____ in the upcoming November 5, 2024 Consolidated
(Elective office)

General Election.

By: _____
(Printed Name of authorized representative)

Signature: _____
(Signature of authorized representative)

Title: _____
(Authorized officer of the organization)

AUTHORIZATION OF ENDORSEMENT BY INDIVIDUAL

Date: July 24, 2024

I, John Rothmann wish to endorse (or support)

(Printed name of endorser)

Ann Hsu

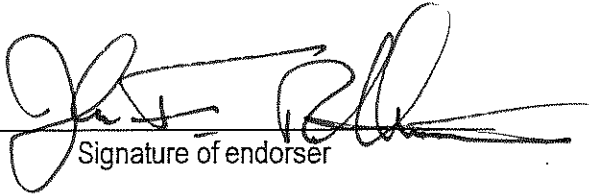
(Name of candidate)

on their "Candidate Statement of Qualifications", for

the office of Board of Education in the upcoming November 5, 2024 Consolidated

(Elective office)

General Election.


Signature of endorser

AUTHORIZATION OF ENDORSEMENT BY ORGANIZATION

USE ORGANIZATION'S LETTERHEAD

Date: _____

The _____ endorses (or supports)

(Printed name of endorser)

_____ on their candidate statement, for the office of

(Name of candidate)

_____ in the upcoming November 5, 2024 Consolidated

(Elective office)

General Election.

By: _____

(Printed Name of authorized representative)

Signature: _____

(Signature of authorized representative)

Title: _____

(Authorized officer of the organization)

AUTHORIZATION OF ENDORSEMENT BY INDIVIDUAL

Date: 07/24/24

I, LOPE YAP JA wish to endorse (or support)

(Printed name of endorser)

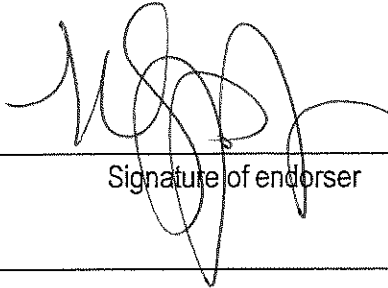
ANN HSU on their "Candidate Statement of Qualifications", for

(Name of candidate)

the office of COMMISSIONER in the upcoming November 5, 2024 Consolidated

(Elective office)

General Election.



Signature of endorser

AUTHORIZATION OF ENDORSEMENT BY ORGANIZATION

USE ORGANIZATION'S LETTERHEAD

Date: _____

The _____ endorses (or supports)

(Printed name of endorser)

_____ on their candidate statement, for the office of

(Name of candidate)

_____ in the upcoming November 5, 2024 Consolidated

(Elective office)

General Election.

By: _____

(Printed Name of authorized representative)

Signature: _____

(Signature of authorized representative)

Title: _____

(Authorized officer of the organization)

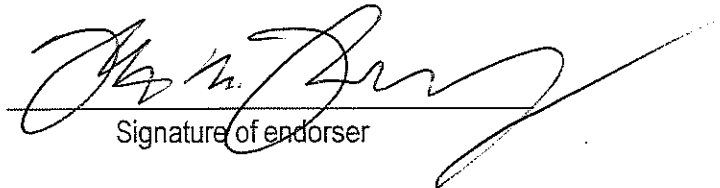
AUTHORIZATION OF ENDORSEMENT BY INDIVIDUAL

Date: 7/24/2024

I, REX RIDGEWAY wish to endorse (or support)

ANN HSV
(Printed name of endorser)

on their "Candidate Statement of Qualifications", for
the office of SCHOOL BOARD COMMISSIONER
(Name of candidate)
in the upcoming November 5, 2024 Consolidated
(Elective office)
General Election.


Signature of endorser

AUTHORIZATION OF ENDORSEMENT BY ORGANIZATION

USE ORGANIZATION'S LETTERHEAD

Date: _____

The _____ endorses (or supports)
(Printed name of endorser)

_____ on their candidate statement, for the office of
(Name of candidate)

_____ in the upcoming November 5, 2024 Consolidated
(Elective office)

General Election.

By: _____
(Printed Name of authorized representative)

Signature: _____
(Signature of authorized representative)

Title: _____
(Authorized officer of the organization)



**CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF ELECTIONS**

SAN FRANCISCO
John Arntz, Director

**Official Filing Form
Permission to Post Personal Information on the Internet
(CAGC § 7928.205)**

Official Filing Form
2024 JUL 30 AM 10:48
DEPARTMENT OF ELECTIONS

County Elections Official
By: _____
Date Issued: _____

- No state or local agency shall post the home address or telephone number of any elected or appointed official on the Internet without first obtaining the written permission of that individual.
- For purposes of this section, "elected or appointed official" includes, but is not limited to, all of the following: state constitutional officers; members of the legislature; judges and court commissioners; district attorneys; public defenders; members of a city council; members of a board of supervisors; appointees of the governor; appointees of the legislature; mayors; city attorneys; police chiefs and sheriffs; a public safety official, as defined in section 7920.500; state administrative law judges; federal judges and federal defenders; members of the United States Congress and appointees of the President.

In accordance with California Government Code section 7928.205, I hereby: *(please check one)*

grant permission to post information on the internet
 deny permission to post information on the internet

to the San Francisco Department of Elections on *sfelections.org* for the November 4, 2024 election.
Month, day, year

Permissions 1

If you deny permission, only your name will appear on the qualified candidate list posted on *sfelections.org*.

Candidate's signature

07/30/2024
Date

**Complete these fields only if you grant permission to post.
Information to be posted (please print):**

Candidate name: Ann Hsu

Office Sought: Board of Education

Address (physical or mailing): _____

Phone Number: _____

Email address: _____

Website: www.annforsfboe.com

Fax: _____

Candidate Information 2