CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Please type or print in ink:

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Hinkley Sara M

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Albany Unified School District
Division, Board, Department, District, if applicable
Board of Education
Your Position
Member candidate

► 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 Albany

☐ Judge or Court Commissioner (Statewide Jurisdiction)
☐ County of ____________________________
☐ Other ____________________________

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

- or -
The period covered is __________ / __________ / __________, through December 31, 2017.

☐ Leaving Office: Date Left __________ / __________ / __________

☐ Assuring Office: Date assumed __________ / __________ / __________

☒ Candidate: Date of Election __________ / __________ / 2018 and office sought, if different than Part 1: __________

4. Schedule Summary (must complete)  ► Total number of pages including this cover page: 4

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

☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
STREET
640 San Gabriel Ave
Albany
CA 94706

CITY
STATE ZIP CODE

DAYTIME TELEPHONE NUMBER
(______) ______-______

E-MAIL 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 August 8, 2018

Signature ________________________________

FFPC Form 700 (2017/2018)
FPPC Advice Email: advice@fppc.ca.gov
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov
## SCHEDULE A-1
**Investments**
**Stocks, Bonds, and Other Interests**  
(Ownership Interest is Less Than 10%)  
*Do not attach brokerage or financial statements.*

<table>
<thead>
<tr>
<th>NAME OF BUSINESS ENTITY</th>
<th>GENERAL DESCRIPTION OF THIS BUSINESS</th>
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<tbody>
<tr>
<td>Inventtrust Properties Corp</td>
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**REAL ESTATE INVESTMENT TRUST**

<table>
<thead>
<tr>
<th>FAIR MARKET VALUE</th>
<th>Stock</th>
<th>Other</th>
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</thead>
<tbody>
<tr>
<td>$2,000 - $10,000</td>
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<tr>
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**IF APPLICABLE, LIST DATE:**  
/ / 17  / / 17  
**ACQUIRED**  
**DISPOSED**

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**COMMENTS:**
**SCHEDULE B**

**Interests in Real Property**

*Including Rental Income*

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**ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS**

640 San Gabriel Avenue

**CITY**

Albany, CA 94706

**FAIR MARKET VALUE**

- $2,000 - $10,000
- $10,001 - $100,000
- $100,001 - $1,000,000
- Over $1,000,000

**IF APPLICABLE, LIST DATE:**

- / / 17
- / / 17

**ACQUIRED**

**DISPOSED**

**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 $10,000

**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 commercial lending institutions 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:**
### SCHEDULE C
Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

#### NAME OF SOURCE OF INCOME
UC Berkeley

#### ADDRESS (Business Address Acceptable)

#### BUSINESS ACTIVITY, IF ANY, OF SOURCE
Higher education

#### YOUR BUSINESS POSITION
Associate Director

**GROSS INCOME RECEIVED**
- [ ] No Income - Business Position Only
- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [X] $10,001 - $100,000
- [X] OVER $100,000

**CONSIDERATION FOR WHICH INCOME WAS RECEIVED**
- [X] 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.)
- [ ] Sale of (Real property, car, boat, etc.)
- [ ] Loan repayment
- [ ] Commission or [ ] Rental Income, list each source of $10,000 or more
- [ ] Other (Describe)

#### 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, 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**

**HIGHEST BALANCE DURING REPORTING PERIOD**
- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [ ] $10,001 - $100,000
- [ ] OVER $100,000

Comments:

### NAME OF SOURCE OF INCOME
UC Berkeley

#### ADDRESS (Business Address Acceptable)

#### BUSINESS ACTIVITY, IF ANY, OF SOURCE
Higher education

#### YOUR BUSINESS POSITION
Director of Administration

**GROSS INCOME RECEIVED**
- [ ] No Income - Business Position Only
- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [X] $10,001 - $100,000
- [X] OVER $100,000

**CONSIDERATION FOR WHICH INCOME WAS RECEIVED**
- [X] 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.)
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- [ ] Other (Describe)

FPCC Form 700 (2017/2018) Sch. C
FPCC Advice Email: advice@fppc.ca.gov
FPCC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov