Please type or print in link.       Image: Plance to develop 2000 Plance 2	CALIFORNIA FORM 7		OF ECONOMIC INTE COVER PAGE UBLIC DOCUMENT	Filed Date: 03/19/2023 10:01 PM
NAME OF FILER       (LAST)       (PRST)       (MUDUE)         Weinberg       Jonathan       D         1. Office, Agency, or Court       Agency Name (Do not use acromyms)         City of Los Altos       Division. Beard, Department, District, if applicable       Your Position                 Agency Name (Do not use acromyms)               City Council Member                 If filing for multiple positions, list below or on an attachment. (Do not use acromyms)               City Council Member                 Agency Name (Do not Use acromyms)               City Council Member                 Agency Name               Position:                 Agency Impact Astrong Astro	Please type or print in ink		JDLIC DOCOMENT	
Weinberg       Jonathan       D         1. Office, Agency, or Court       Agency, Name (Do not use accorptication)       Agency, Name (Do not use accorptication)         Division, Board, Department, Diatrict, if applicable       Your Position         Division, Board, Department, Diatrict, if applicable       Your Position         Agency.       Position         2. Jurisdiction of Office (Check at least one box)       Division, Bist below or on an attachment. (Do not use accorptication)         State       Division, State (Division)         State       Division of Office (Check at least one box)         Chry of Los Altos       Other         3. Type of Statement (Check at least one box)       Churly of		(FIRST)		
1. Office, Agency, or Court         Agency Name (Do not use acronyms)         City of Los Altos         Division, Board, Department, District, if applicable         Your Position         City Council Member         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         Office, Altos         1. Multi-County         Rolly of Los Altos         2. Type of Statement (Check at least one box)         State         City of Los Altos         3. Type of Statement (Check at least one box)         City of Los Altos         County of         City of Los Altos         County of         City of Statement (Check at least one box)         State         City of Statement (Check at least one box)         City of The period covered is Junuay 1, 2022, through December 31, 2022         Office: Date assumed	. ,			
Agency Name (20 not use acronyms)         City of Los Altos         Division, Board, Department, District, if applicable         Your Position         • If filing for multiple positions, list below of on an attachment. (Do not use acconyms)         Agency         Agency         Position:         2. Jurisdiction of Office (Check at least one box)         State         State         (Statewide Jurisdiction)         Multi-County         City of Los Altos         3. Type of Statement (Check at least one box)         Multi-County         Color of Covered is January 1, 2022, through         December 31, 2022.         • Office:         Det office:         Date assuming Office:         Date of Election         and office sought, if different than Part 1;         4. Schedule Summary (required)       > Total number of pages including this cover page:         Schedule A1 - Investments - schedule attached       Schedule A2 - Investments - schedule attached         Schedule A2 - Investments - schedule attached       Schedule B - Income - Gifts - Travel Payments - schedule attached         Schedule A2 - Investments - schedule attached       Schedule B - Income - Gifts - Travel Payments - schedule attached         Schedule B3 - Real Property - schedule attached				
City of Los Altos         Division, Board, Department, District, if applicable       Your Postion         City Council Member         If fling for multiple positions, list below or on an attachment. (Do not use acronyms)         Agency:       Position:         2. Jurisdiction of Office (Check at least one box)				
Division, Board, Department, District, if applicable       Your Position         If filing for multiple positions, list below or on an attachment. (Do not use acronyms)       City Council Member         Agency:       Position:         2. Jurisdiction of Office (Check at least one box)       State         State       Dudge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)         Multi-County       County of         Konne Check at least one box)       County of         Xigt of Los Altos       County of         Or The period covered is January 1, 2022, through       Leaving Office: Date Left         December 31, 2022       Or The period covered is January 1, 2022, through       The period covered is January 1, 2022, through         Other       Cheating office: Date Left				
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)       Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)         Multi-County       County of         City of Los Altos       Other         3. Type of Statement (Check at least one box)       Other         Becenber 31, 2022.       Other         -or       The period covered is January 1, 2022, through December 31, 2022.         -or       The period covered is, through December 31, 2022.         -or       The period covered is, through December 31, 2022.         -or       The period covered is, through December 31, 2022.         -or       The period covered is, through December 31, 2022.         -or       The period covered is, through December 31, 2022.         -or       The period covered is, through December 31, 2022.         -or       The period covered is, through December 31, 2022.         Schedule Summary (required)       > Total number of pages including this cover page:1         Schedule Summary (required)       > Total number of pages including this cover page:1		District, if applicable	Your Position	
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)       Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)         Multi-County       County of         City of Los Altos       Other         3. Type of Statement (Check at least one box)       Other         Becenber 31, 2022.       Other         -or       The period covered is January 1, 2022, through December 31, 2022.         -or       The period covered is, through December 31, 2022.         -or       The period covered is, through December 31, 2022.         -or       The period covered is, through December 31, 2022.         -or       The period covered is, through December 31, 2022.         -or       The period covered is, through December 31, 2022.         -or       The period covered is, through December 31, 2022.         -or       The period covered is, through December 31, 2022.         Schedule Summary (required)       > Total number of pages including this cover page:1         Schedule Summary (required)       > Total number of pages including this cover page:1			City Council Me	ember
2. Jurisdiction of Office (check at least one box)         State	► If filing for multiple position	s, list below or on an attachment. (Do not		
2. Jurisdiction of Office (check at least one box)         State				
☐ State       ☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)         ☐ Multi-County       ☐ County of         ☑ City of Los Altos       ☐ Other         3. Type of Statement (Check at least one box)       ☑ Annual: The period covered is January 1, 2022, through December 31, 2022.       ☐ Check one circle.)         •Or       The period covered is, through December 31, 2022.       ☐ The period covered is January 1, 2022, through the date of leaving office:         □ Assuming Office: Date assumed      , through December 31, 2022.      , through December 31, 2022.      , through December 31, 2022.         • The period covered is, through December 31, 2022.      , through December 31, 2022.      , through December 31, 2022.         • The period covered is, through December 31, 2022.      , through December 31, 2022.      , through December 31, 2022.         • Or       Assuming Office: Date assumed      , through December 31, 2022.      , through December 31, 2022.         • Candidate: Date of Election and office sought, if different than Part 1:	Agency:		Position:	
☐ State       ☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)         ☐ Multi-County       ☐ County of         ☑ City of Los Altos       ☐ Other         3. Type of Statement (Check at least one box)       ☑ Annual: The period covered is January 1, 2022, through December 31, 2022.       ☐ Check one circle.)         •Or       The period covered is, through December 31, 2022.       ☐ The period covered is January 1, 2022, through the date of leaving office:         □ Assuming Office: Date assumed      , through December 31, 2022.      , through December 31, 2022.      , through December 31, 2022.         • The period covered is, through December 31, 2022.      , through December 31, 2022.      , through December 31, 2022.         • The period covered is, through December 31, 2022.      , through December 31, 2022.      , through December 31, 2022.         • Or       Assuming Office: Date assumed      , through December 31, 2022.      , through December 31, 2022.         • Candidate: Date of Election and office sought, if different than Part 1:	2. Jurisdiction of Office	(Check at least one box)		
X City of Los Altos       Other         3. Type of Statement (Check at least one box)	State			
X City of Los Altos       Other         3. Type of Statement (Check at least one box)	Multi-County		County of	
3. Type of Statement (Check at least one box)         Image: Statement (Check at least o				
Image: Annual: The period covered is January 1, 2022, through December 31, 2022.       □       <	2 Tune of Statement (2			
December 31, 2022.       (Check one circle.)         •or       The period covered is, through December 31, 2022.       (December 31, 2022.         Assuming Office:       Date assumed       The period covered is January 1, 2022, through the date of leaving office.         •Or       The period covered is, through December 31, 2022.       Through December 31, 2022.         •Or       The period covered is, through December 31, 2022.       Through December 31, 2022.         •Or       Candidate: Date of Election and office sought, if different than Part 1:       The period covered is, through the date of leaving office.         4. Schedule Summary (required)       ▶ Total number of pages including this cover page:				
Image: second secon	December 31, 2			(Check one circle.)
Image: Selection in an addition of the state of leaving office.         Image: Selection in any selection in any selection in any schedule         A. Schedule Summary (required)       ► Total number of pages including this cover page:			leaving office.	ered is January 1, <b>2022</b> , through the date of
4. Schedule Summary (required) Schedules attached       ► Total number of pages including this cover page:         Schedules attached       Schedule A.1 - Investments - schedule attached       Schedule C - Income, Loans, & Business Positions - schedule attached         Schedule A.2 - Investments - schedule attached       Schedule D - Income - Gifts - schedule attached       Schedule D - Income - Gifts - schedule attached         Schedule B - Real Property - schedule attached       Schedule E - Income - Gifts - Travel Payments - schedule attached         -Or-       None - No reportable interests on any schedule         5. Verification         MILING ADDRESS (Business or Agency Address Recommended - Public Document)       CITY         1 North San Antonio Road       Los Altos       CA         1 North San Antonio Road       Los Altos       CA         650       947-2700       EMAIL ADDRESS         ( 650       947-2700       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       03/19/2023 10:01 PM       Signature       Jonathan D Weinberg	Assuming Office: Date	assumed//		
Schedules attached       Schedule A-1 - Investments - schedule attached         Schedule A-2 - Investments - schedule attached       Schedule C - Income, Loans, & Business Positions - schedule attached         Schedule B - Real Property - schedule attached       Schedule D - Income - Gifts - schedule attached         Schedule B - Real Property - schedule attached       Schedule E - Income - Gifts - schedule attached         Or-       None - No reportable interests on any schedule         Sterification       CITY         MAILING ADDRESS       STREET         (Business or Agency Address Recommended - Public Document)       CITY         1 North San Antonio Road       Los Altos         CA       94022         DAYTIME TELEPHONE NUMBER       EMAIL ADDRESS         (650) 947-2700       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       03/19/2023 10:01 PM       Signature       Jonathan D Weinberg	Candidate: Date of Elec	tion and office sou	ght, if different than Part 1:	
-Or-       None - No reportable interests on any schedule         5. Verification         MAILING ADDRESS       STREET         (Business or Agency Address Recommended - Public Document)       CITY       STATE         1 North San Antonio Road       Los Altos       CA         DAYTIME TELEPHONE NUMBER       EMAIL ADDRESS       EMAIL ADDRESS         (650) 947-2700       EMAIL ADDRESS       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       03/19/2023 10:01 PM       Signature       Jonathan D Weinberg	Schedules attached	tments – schedule attached tments – schedule attached	Schedule C - Income, Loan	ns, & Business Positions – schedule attached
MAILING ADDRESS       STREET       CITY       STATE       ZIP CODE         (Business or Agency Address Recommended - Public Document)       1 North San Antonio Road       Los Altos       CA       94022         DAYTIME TELEPHONE NUMBER       EMAIL ADDRESS       EMAIL ADDRESS       (650) 947-2700       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       03/19/2023 10:01 PM       Signature       Jonathan D Weinberg				
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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       03/19/2023 10:01 PM         Signature       Jonathan D Weinberg	· · · ·			
Date Signed     03/19/2023 10:01 PM     Signature     Jonathan D Weinberg				best of my knowledge the information contained
······································	I certify under penalty of pe	rjury under the laws of the State of Cali	fornia that the foregoing is tru	e and correct.
			- J	

	SCHED Invest	-		CALIFORNIA FORM 700
	Stocks, Bonds, a (Ownership Interest	Name		
	Investments m Do not attach brokerage			Jonathan Weinberg
►	NAME OF BUSINESS ENTITY	Г	► NAME OF BUSINESS ENTI	TY
	3M COMPANY		ACCENTURE PLC I	RELAND CL A
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION C	
	Manufacturing		Financial Services	
	FAIR MARKET VALUE		FAIR MARKET VALUE	
	\$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		\$2,000 - \$10,000 \$100,001 - \$1,000,000	<ul><li>★ \$10,001 - \$100,000</li><li>☐ Over \$1,000,000</li></ul>
	NATURE OF INVESTMENT       X     Stock     Other   (Describe)		NATURE OF INVESTMENT	(Describe)
	Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income R O Income R	
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE	::
	<u> </u>			<u> </u>
_	ACQUIRED DISPOSED		ACQUIRED	DISPOSED
	NAME OF BUSINESS ENTITY		► NAME OF BUSINESS ENTI	ТҮ
			ADOBE INC GENERAL DESCRIPTION C	
	GENERAL DESCRIPTION OF THIS BUSINESS Science		Technology	
			тесппоюду	
	FAIR MARKET VALUE         \$2,000 - \$10,000         \$100,001 - \$1,000,000         Over \$1,000,000		FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000	\$10,001 - \$100,000 Over \$1,000,000
	NATURE OF INVESTMENT           X         Stock         Other		NATURE OF INVESTMENT	
	(Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income R	(Describe) eceived of \$0 - \$499 eceived of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE	E:
	2222		22	22
	ACQUIRED DISPOSED		ACQUIRED	DISPOSED
•	NAME OF BUSINESS ENTITY	F	► NAME OF BUSINESS ENTI	ТҮ
	ABBVIE INC COM		AKAMAI TECHNOLO	DGIES INC
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION C	OF THIS BUSINESS
	Biopharmaceutical		Technology	
			FAIR MARKET VALUE	
	\$2,000 - \$10,000         \$10,001 - \$100,000           \$100,001 - \$1,000,000         Over \$1,000,000		× \$2,000 - \$10,000 \$100,001 - \$1,000,000	\$10,001 - \$100,000 Over \$1,000,000
	NATURE OF INVESTMENT		NATURE OF INVESTMENT	_
	Describe)     (Describe)       Partnership     Income Received of \$0 - \$499       Income Received of \$500 or More (Report on Schedule C)		☐ Partnership ⊖ Income R	(Describe) eceived of \$0 - \$499 eceived of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE	E
	/ <u>22</u> / <u>22</u> ACQUIRED/ <u>22</u> DISPOSED		/ 22 ACQUIRED	<u>/22</u> DISPOSED
	•	•		

SCHEDULE A-1 CALIFORNIA FORM 7						
	INVESTMENTS FAIR POLITICAL PRACTICES COMMIS					
	Stocks, Bonds, a			Name		
(Ownership Interest is Less Than 10%) Investments must be itemized.				Jonathan Weinberg		
	Do not attach brokerage					
►	NAME OF BUSINESS ENTITY	►	NAME OF BUSINESS ENTI	TY		
	Alphabet (formerly GOOGLE) CLASS C		AMAZON COM INC			
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION C	OF THIS BUSINESS		
	Technology		Technology			
	FAIR MARKET VALUE		FAIR MARKET VALUE			
	X       \$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		\$2,000 - \$10,000 \$100,001 - \$1,000,000	<ul><li>✗ \$10,001 - \$100,000</li><li>☐ Over \$1,000,000</li></ul>		
	NATURE OF INVESTMENT           X         Stock         Other		NATURE OF INVESTMENT			
	(Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)		Partnership O Income R	(Describe) eceived of \$0 - \$499 eceived of \$500 or More (Report on Schedule C)		
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE	E:		
	/ <u>22</u> / <u>22</u> ACQUIRED DISPOSED		/ <u>22</u>	// <u>22</u> DISPOSED		
•	NAME OF BUSINESS ENTITY		NAME OF BUSINESS ENTI			
	ALPHABET INC CL A		AMERICAN 529 COL	L 2024 A		
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION C			
	Technology		529 fund			
	FAIR MARKET VALUE         × \$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000	\$10,001 - \$100,000 Over \$1,000,000		
	NATURE OF INVESTMENT           X         Stock         Other		NATURE OF INVESTMENT	Mutual Fund		
	(Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More ( <i>Report on Schedule C</i> )		□ Partnership ◯ Income R	(Describe) eceived of \$0 - \$499 eceived of \$500 or More (Report on Schedule C)		
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE	E:		
	<u>/ 22</u> <u>/ 22</u> ACQUIRED DISPOSED		//_22 ACQUIRED			
►	NAME OF BUSINESS ENTITY	•	NAME OF BUSINESS ENTI	ТҮ		
	ALPHABET INC CL C		AMERICAN 529 COL	L 2024 A		
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION C	OF THIS BUSINESS		
	Technology		529 fund			
	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           X Stock         Other		NATURE OF INVESTMENT           Stock         X           Other	Mutual Fund		
	(Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership () Income R () Income R	(Describe) eceived of \$0 - \$499 eceived of \$500 or More ( <i>Report on Schedule C</i> )		
	IF APPLICABLE, LIST DATE:	1	IF APPLICABLE, LIST DATE	E:		
	<u>/ 22</u> <u>/ 22</u>			<u> </u>		
	ACQUIRED DISPOSED		ACQUIRED	DISPOSED		

	EDULE A-1 CALIFORNIA FORM 700
	estments , and Other Interests
	erest is Less Than 10%)
	ts must be itemized. Jonathan Weinberg
NAME OF BUSINESS ENTITY	erage or financial statements.
AMERICAN GW FD OF AMERICA F2 GENERAL DESCRIPTION OF THIS BUSINESS	- AMG YACKTMAN FOCUSED I GENERAL DESCRIPTION OF THIS BUSINESS
Mutual Fund FAIR MARKET VALUE	- Mutual Fund FAIR MARKET VALUE
\$2,000 - \$10,000 <b>X</b> \$10,001 - \$100,000	\$2,000 - \$10,000 <b>X</b> \$10,001 - \$100,000
S100,001 - \$1,000,000	S100,001 - \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Cher Mutual Fund	Stock Other Mutual Fund
Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule	C) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More ( <i>Report on Schedule C</i> )
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 22 / / 22	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
AMERICAN INV CO OF AMER F2	APPLE INC
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Mutual Fund	Technology
	FAIR MARKET VALUE
★ \$2,000 - \$10,000       \$100,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000	\$2,000 - \$10,000       \$10,001 - \$100,000         ▼ \$100,001 - \$1,000,000       Over \$1,000,000
NATURE OF INVESTMENT Mutual Fund	NATURE OF INVESTMENT           Stock         Other
(Describe)	(Describe) ☐ Partnership ◯ Income Received of \$0 - \$499
○ Income Received of \$500 or More (Report on Schedule	C) O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u>// 22// 22 _</u>	2222
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
AMERICAN WA MUTUAL F2	BANK AMERICA CORP INCM CORP OBG NT 6.45% CPN: 6.450% DUE : 12/15/2066 CALLABLE AT
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Mutual Fund	Financial Services
FAIR MARKET VALUE	FAIR MARKET VALUE
□ \$2,000 - \$10,000	★ \$2,000 - \$10,000       ↓ \$10,001 - \$100,000         ↓ \$10,001 - \$100,000       ↓ \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT       Stock     Other
(Describe) ☐ Partnership ◯ Income Received of \$0 - \$499 ◯ Income Received of \$500 or More <i>(Report on Schedule</i> )	(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u>22</u> <u>22</u>	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
	11

	SCHEDULE A-1 Investments CALIFORNIA FORM 70					
	Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%) Jonathan Weinberg					
	Investments m Do not attach brokerage		pe itemized.			
►	NAME OF BUSINESS ENTITY	_	NAME OF BUSINESS ENTITY			
	BARON SMALL CAP INSTL		BLACKROCK INC			
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS			
	Mutual Fund		Financial Services			
	FAIR MARKET VALUE         \$2,000 - \$10,000         \$100,001 - \$1,000,000         Over \$1,000,000		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 Corporate Fixed Income (Describe)		NATURE OF INVESTMENT       Stock     Other   (Describe)			
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)			
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:			
	/ <u>22</u> / <u>22</u> ACQUIRED DISPOSED		/ <u>/ 22</u> / <u>/ 22</u> ACQUIRED DISPOSED			
•	NAME OF BUSINESS ENTITY		NAME OF BUSINESS ENTITY			
			BRISTOL MYERS SQUIBB CO GENERAL DESCRIPTION OF THIS BUSINESS			
	GENERAL DESCRIPTION OF THIS BUSINESS Conglomerate holding company		Pharmaceuticals			
	FAIR MARKET VALUE		FAIR MARKET VALUE			
	X \$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		\$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000			
	NATURE OF INVESTMENT       X     Stock		NATURE OF INVESTMENT           Stock         Other			
	(Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More ( <i>Report on Schedule C</i> )		(Describe) Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More ( <i>Report on Schedule C</i> )			
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:			
	<u>/ 22</u> <u>/ 22</u>		<u>/ 22/ 22 </u>			
	ACQUIRED DISPOSED		ACQUIRED DISPOSED			
►	NAME OF BUSINESS ENTITY		NAME OF BUSINESS ENTITY			
	BIOGEN INC COM		CALIFORNIA ST GEL OBLIG REF CPN: 5.000% DUE : 10/1/2023 CALLABLE AT \$100.000 ON 1/31/			
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS			
	Biotechnology		Municipal bonds			
	X \$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		×       \$2,000 - \$10,000       \$100,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000			
	NATURE OF INVESTMENT       Stock     Other   (Describe)		NATURE OF INVESTMENT Stock Other Municipal Bond (Describe)			
	Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)			
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:			
	/ <u>22</u> / <u>22</u> ACQUIRED DISPOSED		//			
		I				

	SCHED Invest			CALIFORNIA FORM 700
	Stocks, Bonds, al Ownership Interest	t is L	ess Than 10%)	Name Jonathan Weinberg
	Investments m Do not attach brokerage			g
►	NAME OF BUSINESS ENTITY		NAME OF BUSINESS ENT	ITY
	CHARLES SCHWAB NEW		CLEARBRIDGE LA	RGE CAP VAL A
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION	OF THIS BUSINESS
	Stock		Mutual Fund	
	FAIR MARKET VALUE		FAIR MARKET VALUE	
	X       \$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		\$2,000 - \$10,000 \$100,001 - \$1,000,000	St10,001 - \$100,000 Over \$1,000,000
	NATURE OF INVESTMENT       Stock     Other   (Describe)		NATURE OF INVESTMENT	Mutual Fund
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income F	
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DAT	E:
	/ / 22 / / 22		/ / 22	/ / 22
	ACQUIRED DISPOSED		ACQUIRED	DISPOSED
►	NAME OF BUSINESS ENTITY		NAME OF BUSINESS ENT	ITY
	CHEVRON CORP		COCA COLA CO	
	GENERAL DESCRIPTION OF THIS BUSINESS			OF THIS BUSINESS
	Energy		Food Services	
	FAIR MARKET VALUE         \$2,000 - \$10,000         \$100,001 - \$1,000,000         Over \$1,000,000		FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000	<ul><li>★ \$10,001 - \$100,000</li><li>Over \$1,000,000</li></ul>
	NATURE OF INVESTMENT  Stock Other		NATURE OF INVESTMENT	
	(Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income F	(Describe) Received of \$0 - \$499 Received of \$500 or More ( <i>Report on Schedule C</i> ,
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DAT	E:
	1 1 22 1 1 22		ı ı 22	/ / 22
	ACQUIRED DISPOSED		ACQUIRED	DISPOSED
►	NAME OF BUSINESS ENTITY		NAME OF BUSINESS ENT	ITY
	CHIPOTLE MEXICAN GRILL INC COM		COMCAST CORP (I	NEW) CLASS A
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION	OF THIS BUSINESS
	Restaurant		Telecommunications	, mass media, and entertainment
	FAIR MARKET VALUE		FAIR MARKET VALUE	
	X \$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		<b>×</b> \$2,000 - \$10,000 <b>\$100,001 - \$1,000,000</b>	☐ \$10,001 - \$100,000 ☐ Over \$1,000,000
	NATURE OF INVESTMENT       X     Stock     Other		NATURE OF INVESTMENT	
	Content (Describe) ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (Report on Schedule C)		Partnership O Income F	(Describe) Received of \$0 - \$499 Received of \$500 or More ( <i>Report on Schedule C</i> ,
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DAT	
	2222		22	22
	ACQUIRED DISPOSED		ACQUIRED	DISPOSED

	SCHED Invest			CALIFORNIA FORM 700
Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)				
	Investments mu		,	Jonathan Weinberg
_	Do not attach brokerage			
►	NAME OF BUSINESS ENTITY		NAME OF BUSINESS ENT	ITY
	COSTCO WHOLESALE CORP NEW		ECOLAB INC	
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION	OF THIS BUSINESS
	Retail		Science	
	FAIR MARKET VALUE		FAIR MARKET VALUE	
	X       \$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		<b>×</b> \$2,000 - \$10,000 \$100,001 - \$1,000,000	S10,001 - \$100,000
	NATURE OF INVESTMENT       Image: Stock     Other   (Describe)		NATURE OF INVESTMENT	(Describe)
	(Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income I	( )
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DAT	E:
			/	22
_	ACQUIRED DISPOSED		ACQUIRED	DISPOSED
			NAME OF BUSINESS ENT	
	CVS Health Corp GENERAL DESCRIPTION OF THIS BUSINESS		ENTERGY CORP N GENERAL DESCRIPTION	
	Retail		Energy	
	FAIR MARKET VALUE         X \$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000	<ul><li>✗ \$10,001 - \$100,000</li><li>☐ Over \$1,000,000</li></ul>
	NATURE OF INVESTMENT       X     Stock     Other		NATURE OF INVESTMENT         X       Stock         Other	
	(Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income I	(Describe) Received of \$0 - \$499 Received of \$500 or More ( <i>Report on Schedule C</i> )
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DAT	E:
	1 22 1 22		1 1 22	, , 22
	ACQUIRED DISPOSED		ACQUIRED	DISPOSED
►	NAME OF BUSINESS ENTITY	►	NAME OF BUSINESS ENT	ITY
	EBAY INC		EXXON MOBIL COP	RP
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION	OF THIS BUSINESS
	Technology		Energy	
	FAIR MARKET VALUE		FAIR MARKET VALUE	
	× \$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		\$2,000 - \$10,000 \$100,001 - \$1,000,000	<ul><li>╳ \$10,001 - \$100,000</li><li>◯ Over \$1,000,000</li></ul>
			NATURE OF INVESTMENT	
	Stock Other (Describe)		Stock Other	(Describe)
	Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income F	Received of \$0 - \$499 Received of \$500 or More ( <i>Report on Schedule C</i> )
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DAT	E:
	<u>/ 22</u> <u>/ 22</u>			
	ACQUIRED DISPOSED		ACQUIRED	DISPOSED

	SCHEDULE A-1 CALIFORNIA FORM			
	Invest	tments FAIR POLITICAL PRACTICES COMMISSION		
	Stocks, Bonds, a	nd Other Interests Name		
		Jonathan Weinberg		
		e or financial statements.		
►	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY		
	FEDERATED HERMES CA MUNI CS WS	HOME DEPOT INC		
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS		
	Mutual Fund	Retail		
	FAIR MARKET VALUE	FAIR MARKET VALUE		
	\$2,000 - \$10,000       \$10,001 - \$100,000         \$\$100,001 - \$1,000,000       Over \$1,000,000	★ \$2,000 - \$10,000       \$10,001 - \$100,000         ↓ \$100,001 - \$1,000,000       Over \$1,000,000		
	NATURE OF INVESTMENT	NATURE OF INVESTMENT           X           Stock           Other		
	(Describe) Partnership () Income Received of \$0 - \$499	(Describe) ☐ Partnership ◯ Income Received of \$0 - \$499		
	Partnership () income Received of \$0 - \$499     O Income Received of \$500 or More ( <i>Report on Schedule C</i> )	<ul> <li>Partnership () income Received of \$0 - \$499</li> <li>Income Received of \$500 or More (Report on Schedule C)</li> </ul>		
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:		
	<u>//22</u> <u>//22</u>	<u>/22</u> <u>/22</u> ACQUIREDDISPOSED		
_	ACQUIRED DISPOSED NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY		
	FEDEX COMMON	HONEYWELL INTERNATIONAL INC		
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS		
	Package Delivery	Aerospace, building technology, etc.		
	FAIR MARKET VALUE	FAIR MARKET VALUE		
	□ \$2,000 - \$10,000	★ \$2,000 - \$10,000       \$10,001 - \$100,000         ■ \$10,001 - \$100,000       ■ \$10,001 - \$100,000		
	S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000		
	NATURE OF INVESTMENT           X Stock         Other	NATURE OF INVESTMENT           X         Stock         Other		
	☐ Income Received of \$500 or More ( <i>Report on Schedule C</i> )	O 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	► NAME OF BUSINESS ENTITY		
	GOLDMAN SACHS GRP INC	HYATT HOTELS CLASS A		
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS		
	Financial Services	Hospitality		
	FAIR MARKET VALUE	FAIR MARKET VALUE		
	□ \$2,000 - \$10,000 × \$10,001 - \$100,000	★ \$2,000 - \$10,000       \$10,001 - \$100,000         ■ \$10,001 - \$100,000       ■ \$10,001 - \$100,000		
	Store \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000		
	NATURE OF INVESTMENT           X Stock         Other	NATURE OF INVESTMENT           X         Stock         Other		
	□			
	Income Received of \$500 or More (Report on Schedule C)	○ Income Received of \$500 or More ( <i>Report on Schedule C</i> )		
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:		
	ACQUIRED DISPOSED	ACQUIRED DISPOSED		

_	CALIFORNIA FORM <b>700</b>
	TIMENTS FAIR POLITICAL PRACTICES COMMISSION
Ownership Interes	Ind Other Interests St is Less Than 10%)
Investments m	nust be itemized.
	e or financial statements.
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
INVESCO INTL GROWTH Y GENERAL DESCRIPTION OF THIS BUSINESS	KLA CORPORATION COMMON GENERAL DESCRIPTION OF THIS BUSINESS
Mutual Fund FAIR MARKET VALUE	Semiconductors FAIR MARKET VALUE
\$2,000 - \$10,000 <b>X</b> \$10,001 - \$100,000	\$2,000 - \$10,000 <b>X</b> \$10,001 - \$100,000
S100,001 - \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other Mutual Fund	X Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More ( <i>Report on Schedule C</i> )	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
ISHARES S&P MIDCAP 400 INDEX	LOCKHEED MARTIN CORP
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Exchange traded fund	Defense
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000       \$100,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000	\$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000
NATURE OF INVESTMENT ETFs / CEFs	NATURE OF INVESTMENT           X         Stock         Other
(Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More ( <i>Report on Schedule C</i> )	(Describe) ☐ Partnership ◯ Income Received of \$0 - \$499 ◯ Income Received of \$500 or More ( <i>Report on Schedule C</i> )
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 22 / / 22	/ / 22 / / 22
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
JOHNSON & JOHNSON	MASTERCARD INC CL A
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Pharamceuticals and medical devices	Financial Services
FAIR MARKET VALUE \$2,000 + \$10,000 \$\$10,000 \$\$10,001 - \$100,000	FAIR MARKET VALUE
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT     X   Stock   Other	NATURE OF INVESTMENT  Stock Other
(Describe) ☐ Partnership ◯ Income Received of \$0 - \$499 ◯ Income Received of \$500 or More ( <i>Report on Schedule C</i> )	(Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More ( <i>Report on Schedule C</i> )
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
22 22	
ACQUIRED DISPOSED	ACQUIRED DISPOSED

	SCHEDULE A-1 Investments					
	Stocks, Bonds, and Other Interests Name					
	Investments m	ıst i	be itemized. Jonathan Weinberg			
_	Do not attach brokerage	_	NAME OF BUSINESS ENTITY			
		'				
	MC CORMICK AND CO NON VOTING		MGM COMMON			
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS			
	Packaged and processed foods		Hospitality			
	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000		FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000			
	S100,001 - \$1,000,000 Over \$1,000,000		S100,001 - \$1,000,000 Over \$1,000,000			
	NATURE OF INVESTMENT		NATURE OF INVESTMENT			
	Stock Other (Describe)		X Stock Other (Describe)			
	Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)			
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:			
	<u>/ 22                                </u>		<u>/ 22</u> <u>/ 22</u>			
_	ACQUIRED DISPOSED	L	ACQUIRED DISPOSED			
	NAME OF BUSINESS ENTITY MC DONALDS CORP	'	<ul> <li>NAME OF BUSINESS ENTITY</li> <li>MICROSOFT CORP</li> </ul>			
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS			
	Restaurant		Technology			
	FAIR MARKET VALUE		FAIR MARKET VALUE			
	\$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		\$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000			
	NATURE OF INVESTMENT       X Stock     Other		NATURE OF INVESTMENT       X     Stock     Other			
	(Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More ( <i>Report on Schedule C</i> )		(Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More ( <i>Report on Schedule C</i> )			
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:			
	2222		2222			
	ACQUIRED DISPOSED		ACQUIRED DISPOSED			
►	NAME OF BUSINESS ENTITY		► NAME OF BUSINESS ENTITY			
	Meta Platforms (formerly FACEBOOK INC) CL-A		NEUBERGER BERMAN GENESIS INST			
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS			
	Technology		Mutual Fund			
	\$2,000 - \$10,000         \$10,001 - \$100,000           \$100,001 - \$1,000,000         Over \$1,000,000		\$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000			
	X Stock Other (Describe)		(Describe)			
	Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)			
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:			
	<u>//22</u> <u>/_22</u>					
	ACQUIRED DISPOSED		ACQUIRED DISPOSED			

	SCHEDULE A-1			CALIFORNIA FORM $700$	
	Investments			FAIR POLITICAL PRACTICES COMMISSION	
	Stocks, Bonds, a		Name		
			is Less Than 10%)	Jonathan Weinberg	
	Investments m Do not attach brokerag				
-	NAME OF BUSINESS ENTITY	ΙΓ	<ul> <li>NAME OF BUSINESS ENT</li> </ul>		
			PAYPAL HLDGS IN		
	NEUBERGER BERMAN GENESIS TR GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION		
			Technology FAIR MARKET VALUE		
	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000		× \$2,000 - \$10,000	\$10,001 - \$100,000	
	S100,001 - \$1,000,000 Over \$1,000,000		\$100,001 - \$1,000,000	Over \$1,000,000	
			NATURE OF INVESTMENT	r	
	Stock Other Mutual Fund		X Stock Other	(Describe)	
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income	. ,	
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DAT	'E:	
	2222			22	
_	ACQUIRED DISPOSED		ACQUIRED	DISPOSED	
►	NAME OF BUSINESS ENTITY		NAME OF BUSINESS ENT	ΊΤΥ	
	NEXTERA ENERGY INC		PFIZER INC GENERAL DESCRIPTION		
	GENERAL DESCRIPTION OF THIS BUSINESS			OF THIS BUSINESS	
	Energy		Pharmaceuticals		
	\$2,000 - \$10,000         \$10,001 - \$100,000           \$100,001 - \$1,000,000         Over \$1,000,000		\$2,000 - \$10,000 \$100,001 - \$1,000,000	<ul><li>✗ \$10,001 - \$100,000</li><li>☐ Over \$1,000,000</li></ul>	
	NATURE OF INVESTMENT			r i i i i i i i i i i i i i i i i i i i	
	X Stock Other		Stock Other		
	(Describe) ☐ Partnership ◯ Income Received of \$0 - \$499		Partnership () Income	(Describe) 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 DAT	E:	
			<u>//22</u>	<u>//22</u>	
	ACQUIRED DISPOSED		ACQUIRED	DISPOSED	
►	NAME OF BUSINESS ENTITY		► NAME OF BUSINESS ENT	TTY	
	PALO ALTO NETWORKS INC		PHILLIPS 66 COM	ION	
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION	OF THIS BUSINESS	
	Technology		Energy		
	FAIR MARKET VALUE		FAIR MARKET VALUE		
	× \$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		× \$2,000 - \$10,000 \$100,001 - \$1,000,000	└── \$10,001 - \$100,000 └── Over \$1,000,000	
	X Stock Other		Stock Other		
	(Describe)		Partnership O Income		
	○ Income Received of \$500 or More (Report on Schedule C)			Received of \$500 or More (Report on Schedule C)	
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DAT	E:	
			<u>22</u>	<u>/22</u>	
	ACQUIRED DISPOSED		ACQUIRED	DISPOSED	

	SCHEDULE A-1		CALIFORNIA FORM $700$		
	Investments			FAIR POLITICAL PRACTICES COMMISSION	
			nd Other Interests		
			is Less Than 10%)	Jonathan Weinberg	
	Investments m Do not attach brokerag		or financial statements.		
►	NAME OF BUSINESS ENTITY	Ιſ	► NAME OF BUSINESS ENT	ΓΙΤΥ	
	PPL CORPORATION		ROYCE PENNSYL	VANIA MUTUAL INV	
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION	OF THIS BUSINESS	
	Energy		Mutual Fund		
	FAIR MARKET VALUE		FAIR MARKET VALUE		
	\$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		\$2,000 - \$10,000 \$100,001 - \$1,000,000	<ul><li>✗ \$10,001 - \$100,000</li><li>☑ Over \$1,000,000</li></ul>	
	NATURE OF INVESTMENT           X           Stock           Other		NATURE OF INVESTMEN	Mutual Fund	
			☐ Partnership ⊖ Income	(Describe) Received of \$0 - \$499	
	Income Received of \$500 or More (Report on Schedule C)			Received of \$500 or More (Report on Schedule C)	
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DAT		
	<u>/ 22 04 / 21 / 22</u> ACQUIRED DISPOSED		/ <u>/_22</u>	// <u>22_</u> DISPOSED	
<b>•</b>	NAME OF BUSINESS ENTITY		► NAME OF BUSINESS ENT		
	PROCTER & GAMBLE		SEAGATE TECHNOL	OGY PLC - ORDINARY (IRELAND)	
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION	OF THIS BUSINESS	
	Consumer Goods		Technology		
	\$2,000 - \$10,000       \$100,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		× \$2,000 - \$10,000 \$100,001 - \$1,000,000	☐ \$10,001 - \$100,000 ☐ Over \$1,000,000	
	NATURE OF INVESTMENT       Stock     Other   (Describe)		NATURE OF INVESTMEN	T (Describe)	
	Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income Income		
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DAT	TE:	
	22 22		/ / 22	/ / 22	
	ACQUIRED DISPOSED		ACQUIRED	DISPOSED	
►	NAME OF BUSINESS ENTITY		► NAME OF BUSINESS ENT	ΓΙΤΥ	
	REGENERON PHARMACEUTICALS INC GENERAL DESCRIPTION OF THIS BUSINESS		SEMPRA ENERGY GENERAL DESCRIPTION		
	Pharmaceuticals		Energy		
	FAIR MARKET VALUE		FAIR MARKET VALUE		
	X       \$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		\$2,000 - \$10,000 \$100,001 - \$1,000,000	× \$10,001 - \$100,000 Over \$1,000,000	
	NATURE OF INVESTMENT       X     Stock     Other		NATURE OF INVESTMEN		
	(Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income	(Describe) Received of \$0 - \$499 Received of \$500 or More ( <i>Report on Schedule C</i> )	
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DAT	ſE:	
	<u>/ 22</u> <u>/ 22</u>		<u>22</u>	<u> </u>	
	ACQUIRED DISPOSED		ACQUIRED	DISPOSED	

	SCHED	SCHEDULE A-1		CALIFORNIA FORM $700$	
	Inves	tr	ments	FAIR POLITICAL PRACTICES COMMISSION	
			nd Other Interests	Name	
			is Less Than 10%)	Jonathan Weinberg	
			ist be itemized. or financial statements.		
►	NAME OF BUSINESS ENTITY		► NAME OF BUSINESS ENT	TITY	
	SOUTHERN CO		THERMO FISHER S	SCIENTIFIC	
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION		
	Energy and telecommunications		Scientific equipment	t	
	FAIR MARKET VALUE		FAIR MARKET VALUE		
	<b>\$</b> 2,000 - \$10,000 <b>\$</b> 10,000 <b>\$</b>		<b>×</b> \$2,000 - \$10,000	\$10,001 - \$100,000	
	S100,001 - \$1,000,000 Over \$1,000,000		\$100,001 - \$1,000,000	Over \$1,000,000	
	NATURE OF INVESTMENT		NATURE OF INVESTMEN	r	
	Stock Other (Describe)		X Stock Other	(Describe)	
	Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)		Partnership O Income	Received of \$0 - \$499 Received of \$500 or More ( <i>Report on Schedule C</i> )	
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DAT	'E:	
				// <u>22_</u> DISPOSED	
_	ACQUIRED DISPOSED NAME OF BUSINESS ENTITY		ACQUIRED		
•	SPLUNK INC		THORNBURG INV		
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION		
	Technology		Mutual Fund		
	FAIR MARKET VALUE		FAIR MARKET VALUE		
	X       \$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		\$2,000 - \$10,000 \$100,001 - \$1,000,000	<ul><li>✗ \$10,001 - \$100,000</li><li>☐ Over \$1,000,000</li></ul>	
	NATURE OF INVESTMENT       X     Stock     Other		NATURE OF INVESTMEN		
	(Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income Income	(Describe) Received of \$0 - \$499 Received of \$500 or More ( <i>Report on Schedule C</i> )	
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DAT	E:	
	<u>/ 22 22 </u>			<u> </u>	
	ACQUIRED DISPOSED		ACQUIRED	DISPOSED	
►	NAME OF BUSINESS ENTITY		► NAME OF BUSINESS ENT	TITY	
	TEXAS INSTRUMENTS		UNITED PARCEL S	ER INC CL-B	
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION	OF THIS BUSINESS	
	Technology		Package Delivery		
	\$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		<b>×</b> \$2,000 - \$10,000 \$100,001 - \$1,000,000	\$10,001 - \$100,000 Over \$1,000,000	
	NATURE OF INVESTMENT       Stock     Other   (Describe)		NATURE OF INVESTMEN	(Describe)	
	Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income	· · · · · ·	
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DAT	E:	
			<u>22</u>	<u> </u>	
	ACQUIRED DISPOSED		ACQUIRED	DISPOSED	

	SCHED Invest	-		california form $700$
	Stocks, Bonds, a			FAIR POLITICAL PRACTICES COMMISSION
	(Ownership Interes	t is L	ess Than 10%)	Name
	Investments m			Jonathan Weinberg
	Do not attach brokerag			
•	NAME OF BUSINESS ENTITY		NAME OF BUSINESS ENTI	TY
	UNITEDHEALTH GP INC		VISA INC CL A	
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION (	OF THIS BUSINESS
	Insurance		Financial Services	
	X       \$2,000 - \$10,000       \$10,001 - \$100,000         S100,001 - \$1,000,000       Over \$1,000,000		× \$2,000 - \$10,000 \$100,001 - \$1,000,000	\$10,001 - \$100,000 Over \$1,000,000
	NATURE OF INVESTMENT		NATURE OF INVESTMENT	
	X Stock Other		X Stock Other	(Describe)
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income R O Income R	. ,
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE	Ξ:
_	ACQUIRED DISPOSED		ACQUIRED	DISPOSED
			NAME OF BUSINESS ENTI	
	VALUE LINE SEL GROWTH FUND INC GENERAL DESCRIPTION OF THIS BUSINESS		VMWARE INC CLAS	
	Mutual Fund		Technology	
	FAIR MARKET VALUE		FAIR MARKET VALUE	
	\$2,000 - \$10,000       X       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		× \$2,000 - \$10,000 \$100,001 - \$1,000,000	S10,001 - \$100,000
	NATURE OF INVESTMENT Mutual Fund		NATURE OF INVESTMENT	
	□(Describe) □ Partnership ◯ Income Received of \$0 - \$499		☐ Partnership ◯ Income R	(Describe) Received of \$0 - \$499
	Income Received of \$500 or More (Report on Schedule C)		O Income R	Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE	Ξ:
	/ <u>22</u> / <u>22</u> ACQUIRED DISPOSED		/_ <u>/_22</u> ACQUIRED	//_22 DISPOSED
•	NAME OF BUSINESS ENTITY		NAME OF BUSINESS ENTI	TY
	VANGUARD MEGA CAP.		W W GRAINGER IN	C
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION (	OF THIS BUSINESS
	Index Fund		Industrial supply	
	FAIR MARKET VALUE		FAIR MARKET VALUE	
	▼ \$2,000 - \$10,000       □ \$10,001 - \$100,000         □ \$100,001 - \$100,000       □ \$100,000		<b>×</b> \$2,000 - \$10,000	\$10,001 - \$100,000
	\$100,001 - \$1,000,000         Over \$1,000,000			Over \$1,000,000
	NATURE OF INVESTMENT Stock Other Mutual Fund		NATURE OF INVESTMENT         X         Stock         Other	
	(Describe) □ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income R	(Describe) Received of \$0 - \$499 Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE	Ξ:
	2222		22	<u>//22_</u>
	ACQUIRED DISPOSED		ACQUIRED	DISPOSED

	SCHED Invest		
	Stocks, Bonds, a (Ownership Interes Investments m	s Less Than 10%)	
	Do not attach brokerag		
►	NAME OF BUSINESS ENTITY	Г	► NAME OF BUSINESS ENTITY
	WALT DISNEY CO HLDG CO		WELLS FARGO & COMPANY 5.25%-P RATE: 1.313%
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS
	Entertainment, travel, and hospitality		Financial Services
	FAIR MARKET VALUE		FAIR MARKET VALUE
	□ \$2,000 - \$10,000       × \$10,001 - \$100,000         □ \$100,001 - \$1,000,000       □ Over \$1,000,000		\$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000
	NATURE OF INVESTMENT       Stock     Other   (Describe)		NATURE OF INVESTMENT       X     Stock     Other
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More ( <i>Report on Schedule C</i> )		Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More ( <i>Report on Schedule C</i> )
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	/ / 22 / / 22		<u>01 / 01 / 22</u> <u>01 / 01 / 22</u>
	ACQUIRED DISPOSED		ACQUIRED DISPOSED
►	NAME OF BUSINESS ENTITY	Γ	► NAME OF BUSINESS ENTITY
	YUM CHINA HLDNGS		ASTRAZENECA PLC ADR
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS
	Restaurant		Pharmaceuticals
	FAIR MARKET VALUE         × \$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		FAIR MARKET VALUE         X \$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000
	NATURE OF INVESTMENT       X Stock     Other		NATURE OF INVESTMENT       X     Stock     Other
	(Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More ( <i>Report on Schedule C</i> )		(Describe) Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More ( <i>Report on Schedule C</i> )
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	1 1 22 1 1 22		01 / 01 / 22 / / 22
	ACQUIRED DISPOSED		ACQUIRED DISPOSED
•	NAME OF BUSINESS ENTITY	┢	► NAME OF BUSINESS ENTITY
	ZOETIS INC CLASS-A		
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS
	Pharmaceuticals		
	FAIR MARKET VALUE		FAIR MARKET VALUE
	\$2,000 - \$10,000       \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000		\$2,000 - \$10,000         \$10,001 - \$100,000           \$100,001 - \$1,000,000         Over \$1,000,000
	NATURE OF INVESTMENT       X     Stock         Other		NATURE OF INVESTMENT           Stock         Other
	(Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More ( <i>Report on Schedule C</i> )		(Describe) Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More ( <i>Report on Schedule C</i> )
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	/ / 22 / / 22		/ / 22 / / 22
	ACQUIRED DISPOSED		ACQUIRED DISPOSED

# SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

CALIFORNIA FORM 700

Name

(Ownership Interest is 10% or Greater)

Jonathan Weinberg

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
The Irene L. Weinberg Trust, as amended	CNF Partners
Name Post Office Box 3944, Los Altos, CA 94024	Name 2975 Scott Boulevard, Suite 200, Santa Clara, CA 95054
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS Multi-family housing
FAIR MARKET VALUE       IF APPLICABLE, LIST DATE:         \$0 - \$1,999       /_/22         \$2,000 - \$10,000       /_/22         \$10,001 - \$100,000       ACQUIRED         \$100,001 - \$1,000,000       Over \$1,000,000	FAIR MARKET VALUE       IF APPLICABLE, LIST DATE:         \$0 - \$1,999       \$2,000 - \$10,000         \$10,001 - \$100,000       01 / 01 / 22         \$100,001 - \$1,000,000       Over \$1,000,000
NATURE OF INVESTMENT Partnership Sole Proprietorship Other	NATURE OF INVESTMENT     X   Partnership   Sole Proprietorship   Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION Limited Partner
<ul> <li>2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)</li> </ul>	2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
\$0 - \$499       ≥ \$10,001 - \$100,000         \$500 - \$1,000       OVER \$100,000         \$1,001 - \$10,000	\$0 - \$499       \$10,001 - \$100,000         \$500 - \$1,000       OVER \$100,000         \$1,001 - \$10,000
<ul> <li>3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)</li> <li>None or X Names listed below</li> <li>All income was derived from net long term gains from the sale of securities owned by the trust and ordinary dividends, no single source of which was &gt; \$10,000.</li> </ul>	<ul> <li>3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)</li> <li>None or Names listed below</li> </ul>
<ul> <li>► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST</li> <li>Check one box:</li> <li>X INVESTMENT</li></ul>	<ul> <li>► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST</li> <li>Check one box:         <ul> <li>INVESTMENT</li> <li>X REAL PROPERTY</li> </ul> </li> <li>Carriage House Apartments</li> <li>Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property</li> <li>1655 Pomeroy Avenue, Santa Clara, CA 95051</li> </ul>
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE     IF APPLICABLE, LIST DATE:       \$2,000 - \$10,000     //22       \$10,001 - \$1,000,000     ACQUIRED       Over \$1,000,000     DISPOSED	FAIR MARKET VALUE       IF APPLICABLE, LIST DATE:         \$2,000 - \$10,000       \$100,000         \$100,001 - \$1,000,000       01 / 01 / 22         X Over \$1,000,000       JISPOSED
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST
Leasehold <u>Yrs. remaining</u> Other <u>Beneficiary (50%)</u>	Leasehold Other      Yrs. remaining     Other      Check hox if additional schedules reporting investments or real property
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

## **SCHEDULE A-2** Investments, Income, and Assets of Business Entities/Trusts

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Name

(Ownership Interest is 10% or Greater)

Jonathan Weinberg

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Castlewood Associates	
Name	Name
2975 Scott Boulevard, Suite 200, Santa Clara, CA 95054 Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check one
Trust, go to 2 Eusiness Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Multi-family housing	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
01/01/22 ///22	\$0 - \$1,999 \$2 000 - \$10 000 \$2 000 - \$1000 - \$1000 \$2 000 - \$100
\$2,000 - \$10,000         01/01/22        222           \$10,001 - \$100,000         ACQUIRED         DISPOSED	\$2,000 - \$10,000        ZZ        ZZ           \$10,001 - \$100,000         ACQUIRED         DISPOSED
S100,001 - \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
Ver \$1,000,000	
NATURE OF INVESTMENT           X         Partnership         Sole Proprietorship	NATURE OF INVESTMENT
Other	Cher Other
YOUR BUSINESS POSITION Limited Partner	YOUR BUSINESS POSITION
► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA	► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA
SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
\$0 - \$499       \$10,001 - \$100,000         ▼ \$500 - \$1,000       OVER \$100,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000
\$1,001 - \$10,000	\$1,001 - \$10,000
► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF	► 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	INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) None or Names listed below
▲ INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
□ INVESTMENT	
Castlewood Apartments	Name of Ducinese Entity if Investment or
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
1160 Lincoln Ave Walnut Creek, CA 94596	
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000
\$10,001 - \$1,000,000         ACQUIRED         DISPOSED	\$10,001 - \$1,000,000     ACQUIRED     DISPOSED
X Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

# SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700

Name

Jonathan Weinberg

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
318-05-031 (Santa Clara County)	
CITY	CITY
Los Altos	
FAIR MARKET VALUE       IF APPLICABLE, LIST DATE:         \$2,000 - \$10,000      22         \$10,001 - \$1,000,000       ACQUIRED         DISPOSED         Over \$1,000,000	FAIR MARKET VALUE       IF APPLICABLE, LIST DATE:         \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
X Ownership/Deed of Trust	Ownership/Deed of Trust
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
□ \$10,001 - \$100,000 □ OVER \$100,000	St0,001 - \$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.	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.
	I lending institution made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows:
NAME OF LENDER*	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
%None	None%
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000     \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000

Guarantor, if applicable

Comments: \_

Guarantor, if applicable

## SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

FAIR POLITICAL PRACTICES COMMISSION

Name

Jonathan Weinberg

► 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Batteries Direct, Inc.	Finkelstein & Fujii, LLP
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
171 Main Street, # 294, Los Altos, CA 94022	1528 S. El Camino Real, Ste. 306, San Mateo, CA 94402
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
E-commerce	Law firm
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
None.	Attorney
GROSS INCOME RECEIVED X 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
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary 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
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(Describe)	Other (Describe)

► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

\* You are not required to report loans from a commercial lending institution, 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*	INTEREST RATE	TERM (Months/Years)
ADDRESS (Business Address Acceptable)	%	None
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LO	OAN
HIGHEST BALANCE DURING REPORTING PERIOD	Real Property _	Street address
□ \$500 - \$1,000 □ \$1,001 - \$10,000		City
\$10,001 - \$100,000	Guarantor	
OVER \$100,000	Other	(Describe)
Comments:		

## SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

FAIR POLITICAL PRACTICES COMMISSION

Name

Jonathan Weinberg

► 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
idb Ventures, LLC	Symphony Consulting
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
171 Main Street, # 294, Los Altos, CA 94022	440 N Wolfe Rd, Sunnyvale, CA 94085
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
E-Commerce	Consulting
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
None.	None.
GROSS INCOME RECEIVED No Income - Business Position Only S500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000 CONSIDERATION FOR WHICH INCOME WAS RECEIVED 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.)	GROSS INCOME RECEIVED No Income - Business Position Only \$500 - \$1,000 \$1,001 - \$10,000 \$\$10,001 - \$100,000 OVER \$100,000 CONSIDERATION FOR WHICH INCOME WAS RECEIVED 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	Loan repayment
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, <i>list each source of \$10,000 or more</i>
(Describe)	(Describe)
Other (Describe)	Other

► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

\* You are not required to report loans from a commercial lending institution, 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*	INTEREST RATE	TERM (Months/Years)
ADDRESS (Business Address Acceptable)	%	None
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LO	AN
HIGHEST BALANCE DURING REPORTING PERIOD	Real Property	Street address
<b>\$500 - \$1,000</b>	_	City
\$1,001 - \$10,000         \$10,001 - \$100,000	Guarantor	
OVER \$100,000	Other	(Describe)
Comments:		

# SCHEDULE D Income – Gifts

CALIFORNIA FORM 700

Name

Jonathan Weinberg

NAME OF SOURCE	CE (Not an Acronyi	n)	► NAME OF SOURCE (Not a	n Acronym)		
League of Ca	lifornia Cities			ADDRESS (Business Address Acceptable)		
ADDRESS (Busine	ss Address Accept	able)	ADDRESS (Business Addres			
1400 K St Ste	e 400, Sacram	ento, CA 95814				
BUSINESS ACTIV	ITY, IF ANY, OF S	OURCE	BUSINESS ACTIVITY, IF A	NY, OF SOURCE		
Lobbying						
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)		
<u>09 / 16 / 22</u>	\$ <u>55.00</u>	Division Breakfast	/\$			
//	\$		/\$			
//	\$		/\$			
NAME OF SOURC	CE (Not an Acronyi	n)	► NAME OF SOURCE (Not a	n Acronym)		
ADDRESS (Busine	ss Address Accept	able)	ADDRESS (Business Addres	ss Acceptable)		
BUSINESS ACTIV	ITY, IF ANY, OF S	OURCE	BUSINESS ACTIVITY, IF AI	NY, OF SOURCE		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)		
//	\$		/\$			
//	\$		/\$			
//	\$		/\$			
NAME OF SOURC	CE (Not an Acronyi	n)	► NAME OF SOURCE (Not a	n Acronym)		
ADDRESS (Busine	ss Address Accept	able)	ADDRESS (Business Addres	ss Acceptable)		
BUSINESS ACTIV	ITY, IF ANY, OF S	OURCE	BUSINESS ACTIVITY, IF AI	NY, OF SOURCE		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)		
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Comments:						