STATEMENT OF ECONOMIC INTERESTS

NAME OF FILER (LAST) Greene Ross
(FIRST) Karen
(MIDDLE) Beth

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
California State Controller's Office
Division, Board, Department, District, if applicable
See Attached list
Your Position
Chief of Staff
If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
Agency: See Attached
Position: Delegate for multiple boards

2. Jurisdiction of Office (Check at least one box)

☒ State
☐ Multi-County
☐ City of
☐ Other

☒ 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, 2016, through December 31, 2016.
☐ Leaving Office: Date Left __/__/_____
☐ The period covered is __/__/_____, through December 31, 2016.
☐ The period covered is __/__/_____, through the date of leaving office.
☐ Assuming Office: Date assumed __/__/_____
☐ The period covered is __/__/_____, through the date of leaving office.
☐ Candidate: Election year ___________ and office sought, if different than Part 1:

4. Schedule Summary (must complete) ▶ 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

☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS 300 Capitol Mall, Ste. 1800
STREET Sacramento
CITY CA
STATE 95814
ZIP CODE

DAYTIME TELEPHONE NUMBER (916) 327-1361
E-MAIL ADDRESS kgreenross@sco.ca.gov

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the

Date Signed 03/01/2017
(month, day, year)

Signature

(File the originally signed statement with your filing official.)
SCHEDULE A-1
Investments
Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)
Do not attach brokerage or financial statements.

NAME OF BUSINESS ENTITY
Skyline R&D Investors, LLC

Real Estate Limited Partnership

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
☐ Partnership  ☐ Income Received of $0 - $499
☐ Income Received of $500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
6/13/13 1/16
ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Total Skyl ine Net Lease Real Estate Fund

Real Estate Limited Partnership

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
☐ Partnership  ☐ Income Received of $0 - $499
☐ Income Received of $500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
12/1/16 1/16
ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Skyline OHPA R&D Fund LLC

Real Estate Limited Partnership

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
☐ Partnership  ☐ Income Received of $0 - $499
☐ Income Received of $500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
3/28/14 1/16
ACQUIRED DISPOSED

Comments:
SCHEDULE C
Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

NAME OF SOURCE OF INCOME

K P Public Affairs, LLC

ADDRESS (Business Address Acceptable)

1201 K St. #800 Sacramento, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Public Affairs & Lobbying

YOUR BUSINESS POSITION
Spouse's Salary/Income

GROSS INCOME RECEIVED
☐ $0 - $1,000
☐ $1,001 - $10,000
☐ OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
☐ Salary
☐ Spouse's or registered domestic partner's income
☐ 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)

NAME OF SOURCE OF INCOME

Skyline Off PA Real Fund LLC

ADDRESS (Business Address Acceptable)

Skyline Pacific Properties, 221 Pine St., 44th Floor

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Real Estate Limited Partnership

YOUR BUSINESS POSITION
United Partner

GROSS INCOME RECEIVED
☐ $0 - $1,000
☐ $1,001 - $10,000
☐ OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
☐ Salary
☐ Spouse's or registered domestic partner's income
☐ 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)

* 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

INTEREST RATE

TERM (Months/Years)

☐ % None

SECURITY FOR LOAN
☐ None
☐ Personal residence

☐ Real Property _________________ Street address

☐ Guarantee ______________________ City

☐ Other _________________________ (Describe)

Comments: __________________________
## SCHEDULE C
### Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

### 1. INCOME RECEIVED

<table>
<thead>
<tr>
<th>NAME OF SOURCE OF INCOME</th>
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<tbody>
<tr>
<td>Skyline RADInvestors, LLC</td>
<td></td>
</tr>
<tr>
<td>ADDRESS (Business Address Acceptable)</td>
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<tr>
<td>Skyline Pacific Properties, 221 Pacific, San Francisco CA 94109</td>
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<tr>
<td>BUSINESS ACTIVITY, IF ANY, OF SOURCE</td>
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<tr>
<td>Real Estate Limited Partnership</td>
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<tr>
<td>YOUR BUSINESS POSITION</td>
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<tr>
<td>Limited Partner</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>GROSS INCOME RECEIVED</th>
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<tbody>
<tr>
<td>$500 - $1,000</td>
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<tr>
<td>$10,000 - $100,000</td>
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<tr>
<td>OVER $100,000</td>
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<thead>
<tr>
<th>CONSIDERATION FOR WHICH INCOME WAS RECEIVED</th>
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<tbody>
<tr>
<td>Salary</td>
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<tr>
<td>Spouse's or registered domestic partner's income</td>
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<tr>
<td>Partnership (Less than 10% ownership, for 10% or greater use Schedule A-2.)</td>
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<tr>
<th>Sale of</th>
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<tbody>
<tr>
<td>Real estate, car, boat, etc.</td>
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<tr>
<th>Loan repayment</th>
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<tr>
<th>Commission or</th>
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<tr>
<td>Rental income, list each source of $10,000 or more</td>
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<tr>
<th>Other</th>
<th></th>
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<tbody>
<tr>
<td>(Describe)</td>
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</table>

### 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:

<table>
<thead>
<tr>
<th>NAME OF LENDER*</th>
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<tbody>
<tr>
<td>ADDRESS (Business Address Acceptable)</td>
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<table>
<thead>
<tr>
<th>BUSINESS ACTIVITY, IF ANY, OF LENDER</th>
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<table>
<thead>
<tr>
<th>HIGHEST BALANCE DURING REPORTING PERIOD</th>
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</thead>
<tbody>
<tr>
<td>$500 - $1,000</td>
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<tr>
<td>$1,000 - $10,000</td>
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<tr>
<td>$10,000 - $100,000</td>
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<tr>
<td>OVER $100,000</td>
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<tr>
<th>INTEREST RATE</th>
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<tr>
<td>%</td>
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<tr>
<td>None</td>
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<table>
<thead>
<tr>
<th>SECURITY FOR LOAN</th>
<th></th>
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<tbody>
<tr>
<td>None</td>
<td></td>
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<tr>
<td>Personal residence</td>
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<table>
<thead>
<tr>
<th>Real Property</th>
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<tbody>
<tr>
<td>Street address</td>
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<tr>
<th>City</th>
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<tr>
<th>Guarantor</th>
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<tr>
<th>Other</th>
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<td>(Describe)</td>
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Comments:

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FFPC Form 700 (2016/2017) Sch. C
FFPC Advice Email: advice@ffpc.ca.gov
FFPC Toll-Free Helpline: 866/275-3772 www.ffpc.ca.gov
State Controller Board Designee representative on the following Boards and Commissions:

California Alternative Energy and Advanced Transportation Financing Authority
California Debt and Investment Advisory Commission
California Debt Limit Allocation Committee
California Educational Facilities Authority
California Health Facilities Financing Authority
California Industrial Development Financing Advisory Commission
California Pollution Control Financing Authority
California Tax Credit Allocation Committee
California Transportation Financing Authority
Pooled Money Investment Board
California Public Employees’ Retirement System Board
California State Teachers’ Retirement System Board
Victim Compensation and Government Claims Board
California Commission on State Mandates
State Lands Commission
California Secure Choice Retirement Board