

STATEMENT OF ECONOMIC INTERESTS



Date Received  
Official Use Only

FAIR POLITICAL PRACTICES COMMISSION  
COVER PAGE

2013 FEB 20 AM 11:45

CITY CLERK'S OFFICE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
CARPENTER VAL 2013 FEB 15 A 9:20

1. Office, Agency, or Court

Agency Name  
LOS ALTOS CITY COUNCIL COUNCILWOMAN  
Division, Board, Department, District, if applicable Your Position  
CITY OF LOS ALTOS

▶ If filing for multiple positions, list below or on an attachment.

Agency: SANTA CLARA COUNTY LIBRARY DISTRICT Position: JPA BOARD OF DIRECTORS MEMBER

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

- State  Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County  County of \_\_\_\_\_
- City of LOS ALTOS  Other LIBRARY DISTRICT

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

- Annual: The period covered is January 1, 2012, through December 31, 2012. FOR LOS ALTOS CITY COUNCIL
- Leaving Office: Date Left 1/8/13 (Check one)
- Assuming Office: Date assumed \_\_\_\_\_
- Candidate: Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

▶ Total number of pages including this cover page: 8

- 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

I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State

Date Signed January 29, 2013  
(month, day, year)

**SCHEDULE A-1  
Investments**

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

Do not attach brokerage or financial statements.

<p><b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION</p> <p>Name <u>VAL CARPENTER</u></p>
--

▶ NAME OF BUSINESS ENTITY  
AUTODESK

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
SOFTWARE

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:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
GENERAL MILLS

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
CONSUMER PACKAGED GOODS

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:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
BOEING

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
AEROSPACE MANUFACTURER

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:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
INTUIT

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
FINANCIAL SOFTWARE

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:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
EZOPEN

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
SUPPLY CHAIN MANAGEMENT SYSTEM

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:  
7/26/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
LKO CORP

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
AUTOMOTIVE PARTS

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:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED      DISPOSED

Comments: ALL ARE SPOUSE'S SEPARATE PROPERTY

**SCHEDULE A-1  
Investments**

**Stocks, Bonds, and Other Interests**  
(Ownership Interest is Less Than 10%)  
*Do not attach brokerage or financial statements.*

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
VAL CARPENTER

▶ NAME OF BUSINESS ENTITY  
MICROSOFT

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
SOFTWARE

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:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
EXXON MOBIL

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
GASOLINE PRODUCER

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:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
PG&E CORP

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
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:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY  
TALISMAN ENERGY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
OIL & GAS EXPLORATION

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:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED                      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:  
 \_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12  
 ACQUIRED                      DISPOSED

Comments: ALL ARE SPOUSE'S SEPARATE PROPERTY

**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  
VAL CARPENTER

**1. BUSINESS ENTITY OR TRUST**

Name MARKET SAVVY CONSULTING  
 Address (Business Address Acceptable)  
P.O. BOX 205, LOS ALTOS, CA 94023-0205

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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
MARKETING CONSULTING

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$0 - \$1,999  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

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

NATURE OF INVESTMENT  
 Partnership  Sole Proprietorship  Other

YOUR BUSINESS POSITION PRINCIPAL

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

\$0 - \$499  \$10,001 - \$100,000  
 \$500 - \$1,000  OVER \$100,000  
 \$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  
ENPRO, INC.

**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:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

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

NATURE OF INTEREST  
 Property Ownership/Deed of Trust  Stock  Partnership  
 Leasehold      Yrs. remaining  Other     

Check box if additional schedules reporting investments or real property are attached

**1. BUSINESS ENTITY OR TRUST**

Name ENPRO, INC.  
 Address (Business Address Acceptable)  
121 S. LOMBARD ROAD, ADDISON, IL 60101

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

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
DISTRIBUTOR & MANUFACTURER'S REPRESENTATIVE

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$0 - \$1,999  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

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

NATURE OF INVESTMENT  
 Partnership  Sole Proprietorship  Other

YOUR BUSINESS POSITION SHAREHOLDER & BOARD OF DIRECTORS MEMBER

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

\$0 - \$499  \$10,001 - \$100,000  
 \$500 - \$1,000  OVER \$100,000  
 \$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  
VARIOUS; NONE IN CALIFORNIA

**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:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

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

NATURE OF INTEREST  
 Property Ownership/Deed of Trust  Stock  Partnership  
 Leasehold      Yrs. remaining  Other     

Check box if additional schedules reporting investments or real property are attached

Comments: \_\_\_\_\_



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

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
VAL CARPENTER

1. INCOME RECEIVED	1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <u>MISSION COLLEGE</u>	NAME OF SOURCE OF INCOME <u>EZOPEN</u>
ADDRESS (Business Address Acceptable) <u>3000 MISSION COLLEGE BOULEVARD</u>	ADDRESS (Business Address Acceptable) <u>4100 EAST THIRD AVENUE, SUITE 400, FOSTER CITY, CA 94407</u>
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>SANTA CLARA, CA 95050</u>	BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>SUPPLY CHAIN MANAGEMENT</u>
YOUR BUSINESS POSITION <u>COMMUNITY COLLEGE</u>	YOUR BUSINESS POSITION <u>TRAINING CONSULTANT</u>
GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input checked="" type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <small>(Real property, car, boat, etc.)</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more <input type="checkbox"/> Other _____ <small>(Describe)</small>	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input checked="" type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <small>(Real property, car, boat, etc.)</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more <input type="checkbox"/> Other _____ <small>(Describe)</small>

**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*	INTEREST RATE	TERM (Months/Years)
ADDRESS (Business Address Acceptable)	_____ % <input type="checkbox"/> None	_____
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN	
HIGHEST BALANCE DURING REPORTING PERIOD	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> Real Property _____	<small>Street address</small>
<input type="checkbox"/> \$1,001 - \$10,000	_____	<small>City</small>
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> OVER \$100,000	<input type="checkbox"/> Other _____	<small>(Describe)</small>

Comments: \_\_\_\_\_

**SCHEDULE D  
Income - Gifts**

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
VAL CARPENTER

▶ NAME OF SOURCE (Not an Acronym)  
LOCAL GOVERNMENT COMMISSION

ADDRESS (Business Address Acceptable)  
1303 J STREET #250 SACRAMENTO, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
EDUCATION NONPROFIT

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>5/24/12</u>	<u>\$ 46</u>	<u>DINNER</u>
<u>6/21/12</u>	<u>\$ 70</u>	<u>DINNER</u>
<u>7/19/12</u>	<u>\$ 46</u>	<u>DINNER</u>

~~▶ NAME OF SOURCE (Not an Acronym)~~ DINNER

~~8/16/12~~ 36

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

Comments: \_\_\_\_\_

**SCHEDULE E**  
**Income – Gifts**  
**Travel Payments, Advances,**  
**and Reimbursements**

Name  
VAL CARPENTER

- You must mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

▶ NAME OF SOURCE (Not an Acronym)  
LOCAL GOVERNMENT COMMISSION  
 ADDRESS (Business Address Acceptable)  
1303 J STREET # 250  
 CITY AND STATE  
SACRAMENTO, CALIFORNIA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)  
EDUCATION NONPROFIT  
 DATE(S): 3/16/12 - 3/18/12 AMT: \$ 795.<sup>00</sup>  
 (If gift)  
 TYPE OF PAYMENT: (must check one)  Gift  Income  
 Made a Speech/Participated in a Panel  
 Other - Provide Description  
ATTENDED ANNUAL CONFERENCE

▶ NAME OF SOURCE (Not an Acronym)  
LOS ALTOS CHAMBER OF COMMERCE  
 ADDRESS (Business Address Acceptable)  
321 UNIVERSITY AVENUE  
 CITY AND STATE  
LOS ALTOS, CALIFORNIA 94022  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)  
BUSINESS ASSOCIATION  
 DATE(S): 5/23/12 AMT: \$ 70.<sup>00</sup>  
 (If gift)  
 TYPE OF PAYMENT: (must check one)  Gift  Income  
 Made a Speech/Participated in a Panel  
 Other - Provide Description

▶ NAME OF SOURCE (Not an Acronym)  
PACKARD FOUNDATION  
 ADDRESS (Business Address Acceptable)  
313 SECOND STREET  
 CITY AND STATE  
LOS ALTOS, CALIFORNIA 94022  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)  
FAMILY FOUNDATION  
 DATE(S): 6/29/12 AMT: \$ 129.<sup>38</sup>  
 (If gift)  
 TYPE OF PAYMENT: (must check one)  Gift  Income  
 Made a Speech/Participated in a Panel  
 Other - Provide Description

▶ NAME OF SOURCE (Not an Acronym)  
 ADDRESS (Business Address Acceptable)  
 CITY AND STATE  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)  
 DATE(S): AMT: \$  
 (If gift)  
 TYPE OF PAYMENT: (must check one)  Gift  Income  
 Made a Speech/Participated in a Panel  
 Other - Provide Description

Comments: \_\_\_\_\_