

AT ORIGINAL

AMENDED RECEIVED
STATEMENT OF ECONOMIC INTERESTS
FAIR POLITICAL PRACTICES COMMISSION

APR 10 2013
Date Received
Official Use Only

Frank A. McGuire
Frank A. McGuire Clerk

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

COVER PAGE
2013 APR 11 AM 10:36

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
CANTIL-SAKAUYE TANI GORRE

1. Office, Agency, or Court

Agency Name
California Supreme Court
Division, Board, Department, District, if applicable
Your Position
Chief Justice

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

Agency: _____ Position: _____

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

State Judge or Court Commissioner (Statewide Jurisdiction)
 Multi-County _____ County of _____
 City of _____ Other _____

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

Annual: The period covered is January 1, 2012, through December 31, 2012.
-or-
The period covered is _____, through December 31, 2012.
 Assuming Office: Date assumed _____
 Leaving Office: Date Left _____ (Check one)
 The period covered is January 1, 2012, through the date of leaving office.
 The period covered is _____, through the date of leaving office.
 Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

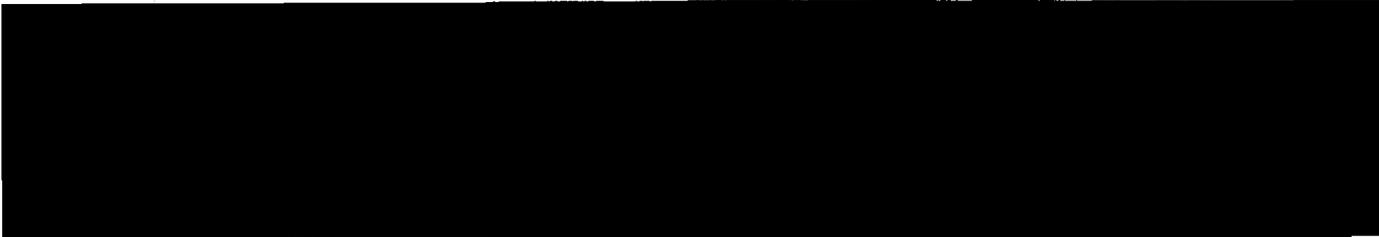
► Total number of pages including this cover page: 2

Schedule A-1 - Investments - schedule attached
 Schedule A-2 - Investments - schedule attached
 Schedule B - Real Property - schedule attached
 Schedule C - Income, Loans, & Business Positions - schedule attached
 Schedule D - Income - Gifts - schedule attached
 Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

None - No reportable interests on any schedule

5. Verification



Date Signed 4/10/13
(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.

CALIFORNIA FORM 700
<small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name CANTIL-SAKAUYE, TANI G.

▶ NAME OF BUSINESS ENTITY
The Park

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Restaurant/Bar/Lounge

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:
08 / 05 / _____
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
BP p.l.c

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Gas/Oil Production

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:
08 / 10 / 05 09 / 12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Westgate Resorts

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Timeshare

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 **1 week every other year** (Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
11 / 11 / 09 _____
 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:
 _____ / _____ / _____
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Baidu

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Chinese language search engine

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
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IF APPLICABLE, LIST DATE:
08 / 10 / _____
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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

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

IF APPLICABLE, LIST DATE:
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 ACQUIRED DISPOSED

AN

GZ

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FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

2013 FEB 28 AM 11:37

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
CANTIL-SAKAUYE TANI GORRE

1. Office, Agency, or Court

Agency Name: California Supreme Court
Your Position: Chief Justice
FEB 26 2013

SUPREME COURT
FILED

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

Agency: _____ Position: _____
Frank A. McGuire Clerk
JORGE NAVARRETE Deputy

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

- State Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County _____ County of _____
- City of _____ Other _____

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

- Annual: The period covered is January 1, 2012, through December 31, 2012.
- Leaving Office: Date Left _____ (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: 6

- 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 B - Real Property - schedule attached
- Schedule E - Income - Gifts - Travel Payments - schedule attached
- None - No reportable interests on any schedule

5. Verification
[Redacted Signature Area]

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

Date Signed: 2/22/13
(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.

CALIFORNIA FORM 700
<small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name CANTIL-SAKAUYE, TANI G.

▶ NAME OF BUSINESS ENTITY
The Park

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Restaurant/Bar/Lounge

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:
08 / / 05 / /
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
B.P., Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Gas/Oil Production

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:
08 / / 10 10 / / 12
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Westgate Resorts

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Timeshare

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 **1 week every other year**
(Describe)
 Partnership Income Received of \$0 - \$499
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IF APPLICABLE, LIST DATE:
11 / 11 / 09 / /
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:
 / / / /
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Baidu

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Chinese language search engine

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

Comments: _____

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

Name
CANTIL-SAKAUYE, TANI G.

- 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)
CAL-ABOTA (American Board of Trial Advocates)

ADDRESS (Business Address Acceptable)
5567 Reseda Blvd., Suite 108

CITY AND STATE
Tarzana, CA 91356

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
Education on history/value of Justice System

DATE(S): 11 / 08 / 12 - 11 / 10 / 12 AMT: \$ 1,710.50
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel
 Other - Provide Description
Swear in new CAL-ABOTA Officers

▶ NAME OF SOURCE (Not an Acronym)
National Center for State Courts (NCSC)

ADDRESS (Business Address Acceptable)
300 Newport Avenue

CITY AND STATE
Williamsburg, VA 23185

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
Improve Administration of Justice

DATE(S): 11 / 14 / 12 - 11 / 16 / 12 AMT: \$ 1,179.60
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel
 Other - Provide Description
Attend Annual Rehnquist Award Dinner

▶ NAME OF SOURCE (Not an Acronym)
California State Bar Assoc./California Judges Assoc.

ADDRESS (Business Address Acceptable)
180 Howard Street / 88 Kearny Street

CITY AND STATE
San Francisco, CA 94105 / San Francisco, CA 94108

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
Promoting Judicial Excellence

DATE(S): 10 / 11 / 12 - 10 / 14 / 12 AMT: \$ 450.00
 (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)
Hawaii Filipino Lawyers Association

ADDRESS (Business Address Acceptable)
P.O. Box 2300

CITY AND STATE
Honolulu, HI 96804

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
HFLA Annual Meeting

DATE(S): 09 / 20 / 12 - 09 / 23 / 12 AMT: \$ 1,663.00
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel
 Other - Provide Description
**Meet with Hawaii Supreme Court
 Speaker & HFLA Annual Meeting**

Comments: _____

SCHEDULE E
Income - Gifts
Travel Payments, Advances,
and Reimbursements

Name
CANTIL-SAKAUYE, TANI G.

- 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)
National Association of Court Management

ADDRESS (Business Address Acceptable)
c/o NCSC, 300 Newport Avenue

CITY AND STATE
Williamsburg, VA 23185-4147

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
2013 Midyear Conference

DATE(S): 02 / 10 / 13 - 02 / 11 / 13 AMT: \$ 206.87
 (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)
American Bar Association (ABA)

ADDRESS (Business Address Acceptable)
321 North Clark Street

CITY AND STATE
Chicago, IL 60654

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
National Representative of Legal Profession

DATE(S): 08 / 03 / 12 - 08 / 05 / 12 AMT: \$ 794.90
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel
 Other - Provide Description
Recipient of the ABA's Margaret Brent Achievement Award

▶ NAME OF SOURCE (Not an Acronym)
Yale Law School

ADDRESS (Business Address Acceptable)
127 Wall Street

CITY AND STATE
New Haven, CT 06511

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
Fifteenth Annual Liman Colloquium

DATE(S): 02 / 29 / 12 - 03 / 02 / 12 AMT: \$ 950.60
 (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)
Permanent Judicial Comm. on Justice for Children

ADDRESS (Business Address Acceptable)
150 State Street, 2nd Floor

CITY AND STATE
Albany, NY 12207

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
Nat. Leadership Summit on School-Justice Partners

DATE(S): 03 / 11 / 12 - 03 / 13 / 12 AMT: \$ 711.80
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel
 Other - Provide Description

Comments: _____

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

Name
 CANTIL-SAKAUYE, TANI G.

- 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)
 Southwestern Law School

ADDRESS (Business Address Acceptable)
 3050 Wilshire Boulevard

CITY AND STATE
 Los Angeles, CA 90010

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
 Supreme Court Fellows Alumni Association

DATE(S): 02 / 23 / 12 - 02 / 24 / 12 AMT: \$ 278.48
 (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

▶ 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

▶ 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: _____