

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

CG

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FEB 27 2015
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CLERK OF THE COURT
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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Kelly Kathleen Anne

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Superior Court of California, County of San Francisco

Division, Board, Department, District, if applicable

Your Position

Judge

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____

Position: _____

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

- State
- Multi-County _____
- City of _____
- 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, 2014, through December 31, 2014.
- or-
- The period covered is ____/____/____, through December 31, 2014.
- Assuming Office: Date assumed ____/____/____
- Candidate: Election year _____ and office sought, if different than Part 1: _____
- Leaving Office: Date Left ____/____/____ (Check one)
- The period covered is January 1, 2014, through the date of leaving office.
- The period covered is ____/____/____, through the date of leaving office.

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

-or-
 None - No reportable interests on any schedule

5. Verification

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

Date Signed 02/25/2015
(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>CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION</p> <p>Name <u>Kathleen A. Kelly</u></p>
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▶ NAME OF BUSINESS ENTITY
Bank of America Corporation

GENERAL DESCRIPTION OF THIS BUSINESS
Financial services

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:
 / / 14 / / 14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Qwest Corporation - 7.5% Preferred

GENERAL DESCRIPTION OF THIS BUSINESS
Telecommunications

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:
02 / 14 / 14 / / 14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Costco Wholesale Corporation

GENERAL DESCRIPTION OF THIS BUSINESS
Wholesale

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 / 04 / 14 / / 14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Sunstone Hotel - 8% Preferred

GENERAL DESCRIPTION OF THIS BUSINESS
Lodging real estate investment trust

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:
03 / 03 / 14 / / 14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Visa Inc. - Class A

GENERAL DESCRIPTION OF THIS BUSINESS
Payments technology

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 / 04 / 14 / / 14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Citigroup Inc.

GENERAL DESCRIPTION OF THIS BUSINESS
Financial services

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:
 / / 14 04 / 11 / 14
 ACQUIRED DISPOSED

Comments: _____

**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 Kathleen A. Kelly
--

▶ NAME OF BUSINESS ENTITY
Frontier Communications

GENERAL DESCRIPTION OF THIS BUSINESS
Telecommunications

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:
 _____/_____/14 _____/_____/14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
UnitedHealth Group Inc.

GENERAL DESCRIPTION OF THIS BUSINESS
Medical services

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:
 _____/_____/14 _____/_____/14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Stericycle Inc.

GENERAL DESCRIPTION OF THIS BUSINESS
Medical waste management

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:
 _____/_____/14 _____/_____/14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Apple Inc.

GENERAL DESCRIPTION OF THIS BUSINESS
Consumer Electronics

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:
 11/04/14 _____/_____/14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Texas Instruments Inc.

GENERAL DESCRIPTION OF THIS BUSINESS
Semiconductors

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:
 _____/_____/14 _____/_____/14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Chevron Corporation

GENERAL DESCRIPTION OF THIS BUSINESS
Energy

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:
 02/25/14 _____/_____/14
 ACQUIRED DISPOSED

Comments: _____

**SCHEDULE A-1
Investments**

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

Do not attach brokerage or financial statements.

<p>CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION</p> <p>Name <u>Kathleen A. Kelly</u></p>
--

▶ NAME OF BUSINESS ENTITY
Strategic Hotel - 8.5% preferred

GENERAL DESCRIPTION OF THIS BUSINESS

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:
 / / 14 04 / 03 / 14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
JP Morgan Chase & Co.

GENERAL DESCRIPTION OF THIS BUSINESS

Financial services

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:
 / / 14 / / 14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Health Care REIT Inc.

GENERAL DESCRIPTION OF THIS BUSINESS

Health care real estate

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:
04 / 23 / 14 / / 14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
SolarCity Corp.

GENERAL DESCRIPTION OF THIS BUSINESS

Energy

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:
10 / 21 / 14 / / 14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Goldman Sachs Group Inc.

GENERAL DESCRIPTION OF THIS BUSINESS

Financial services

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:
 / / 14 / / 14
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Kinder Morgan Inc.

GENERAL DESCRIPTION OF THIS BUSINESS

Energy

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 / 02 / 14 / / 14
 ACQUIRED DISPOSED

Comments: _____

ADDENDUM TO SCHEDULE A-2

Investments, Income and Assets of Business Entities/Trusts

3. List the names of each reportable single source of income of \$10,000 or more:

- Pacific Gas & Electric Company
- Hartford Fire Insurance Company
- Baby be Mine, LLC
- Lai Honua, LLC
- West Coast Surgical, LLC
- Lancer Insurance Company
- Sedgwick Claims Management Inc.
- Chris White

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

Name
 Kathleen A. Kelly

- 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)
California Judges Association ("Assoc")

ADDRESS (Business Address Acceptable)
2520 Venture Oaks Way, Suite 150

CITY AND STATE
Sacramento, CA 95833

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): 01 / 17 / 14 - ___/___/___ AMT: \$ 163.64
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____
Attended Board Meeting in Los Angeles (meals and travel)

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

ADDRESS (Business Address Acceptable)
2520 Venture Oaks Way, Suite 150

CITY AND STATE
Sacramento, CA 95833

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): 03 / 07 / 14 - ___/___/___ AMT: \$ 34.34
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____
Attended Board Meeting in South SF. (meals)

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

ADDRESS (Business Address Acceptable)
2530 Venture Oaks Way, Suite 150

CITY AND STATE
Sacramento, CA 95833

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): 01 / 14 / 14 - ___/___/___ AMT: \$ 116.73
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____
Travel to Court Related Legislative Hearings (travel)

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

ADDRESS (Business Address Acceptable)
2530 Venture Oaks Way, Suite 150

CITY AND STATE
Sacramento, CA 95833

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): 05 / 02 / 14 - ___/___/___ AMT: \$ 511.40
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____
Attended Board Meeting and Conference in Palm Desert (travel and meals)

Comments: _____

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

Name
 Kathleen A. Kelly

- 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)
 California Judges Association ("Assoc")

ADDRESS (Business Address Acceptable)
 2520 Venture Oaks Way, Suite 150

CITY AND STATE
 Sacramento, CA 95833

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): 06/02/14 - 06/03/14 AMT: \$ 335.62
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____
Attended Legislative Day and Board Meeting in
Sacramento (meals and lodging)

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

ADDRESS (Business Address Acceptable)
 2520 Venture Oaks Way, Suite 150

CITY AND STATE
 Sacramento, CA 95833

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): 09/11/14 - 09/14/14 AMT: \$ 298.32
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____
Attended Board Meeting and Conference in San Diego
(travel and meals)

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

ADDRESS (Business Address Acceptable)
 2530 Venture Oaks Way, Suite 150

CITY AND STATE
 Sacramento, CA 95833

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): 07/25/14 - ____/____/____ AMT: \$ 316.91
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____
Attended Board Meeting in Los Angeles (travel and
meals)

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): ____/____/____ - ____/____/____ AMT: \$ _____
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

Comments: _____