CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

RECEIVED FAIR POLITICAL PRACTICES COMMISSION 2014 FEB 28 AM 9:36

Date Received
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Enterprise Compliance Division

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Coony Stephen Patrick

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*
State Treasurer's Office

Division, Board, Department, District, if applicable: Executive

Your Position: Chief Deputy Treasurer

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

Agency: See attached Position: Designee

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

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

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

- [x] **Annual:** The period covered is January 1, 2013, through December 31, 2013.
  -or-
  The period covered is ___/___/_____, through December 31, 2013.
- [ ] **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, 2013, 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:*** 4

- [ ] **Schedule A-1** - *Investments* – schedule attached
- [x] **Schedule A-2** - *Investments* – schedule attached
- [ ] **Schedule B** - *Real Property* – schedule attached
- [x] **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

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)

[redacted]

contained

Steve Coony, Chief Deputy Treasurer

Filing of SEI Form 700
Original filed with
Fair Political Practices Commission
428 J Street, Suite 620
Sacramento, CA 95814

State Treasurer's Office
Attn: Brittney Trost, FPPC Filing Officer
915 Capitol Mall, Room 587
Sacramento, CA 95814

CalPERS
Attn: Nadia Sabile, FPPC Filing Officer
400 Q Street, LPN - 3110
Sacramento, CA 95811

Board of Administration of the State Teachers' Retirement System (CalSTRS)
Attn: Tiffani Vincent, FPPC Filing Officer
100 Waterfront Place
West Sacramento, CA 95851-0275

Board of Directors for the California Housing Finance Agency (CalHFA)
Attn: JoJo Ojima, FPPC Filing Officer
1415 L Street, Suite 500
Sacramento, CA 95814

California Earthquake Authority (CEA)
Attn: Niel Hall, FPPC Filing Officer
801 K Street, Suite 1000
Sacramento, CA 95814

IBANK
Attn: Tom Tengan, FPPC Filing Officer
980 Ninth Street, Suite 900
Sacramento CA 95814

California Public Library Construction and Renovation Board (CA State Library)
Attn: Victor Pong, FPPC Filing Officer
California State Library
Library & Courts Building II
900 N Street, Room 438B
Sacramento, CA 95814

Commission on State Mandates
Attn: Heidi Palchick, FPPC Filing Officer
980 Ninth Street, Suite 300
Sacramento, CA 95814

Electronic Benefits Transfer Committee (Office of Technology Services)
Attn: LeeAnn Maucieri, FPPC Filing Officer
Prospect Greenbuilding 1
10860 Gold Center Drive, 4th Floor
Rancho Cordova, CA 95741-1810

Golden State Transportation Financing Corporation
California Department of Finance
Attn: Jeanna Wimberly, FPPC Filing Officer
915 L Street 12th Floor
Sacramento, CA 95814

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
Coony, Stephen P.

▶ 1. BUSINESS ENTITY OR TRUST

Name: K Bowler Group

Address *(Business Address Acceptable)*: 1111 H Street #203, Sacramento, CA 95814

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

GENERAL DESCRIPTION OF THIS BUSINESS: Consulting

FAIR MARKET VALUE
☐ $0 - $1,999
☐ $2,000 - $10,000
☑ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/13 ACQUIRED ___/___/13 DISPOSED

NATURE OF INVESTMENT
☐ Partnership ☑ Sole Proprietorship ☐ _____ Other

YOUR BUSINESS POSITION: President

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

☐ $0 - $499
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☑ OVER $100,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary.)

☐ None

California Democratic Party, Californians Against Higher Health Care Costs

▶ 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
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/13 ACQUIRED ___/___/13 DISPOSED

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

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▶ 1. BUSINESS ENTITY OR TRUST

Name

Address *(Business Address Acceptable)*

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

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE
☐ $0 - $1,999
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/13 ACQUIRED ___/___/13 DISPOSED

NATURE OF INVESTMENT
☐ Partnership ☐ Sole Proprietorship ☐ _____ Other

YOUR BUSINESS POSITION

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

☐ $0 - $499
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary.)

☐ None

▶ 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
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/13 ACQUIRED ___/___/13 DISPOSED

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
Coony, Stephen P.

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Lockyer 2014

ADDRESS *(Business Address Acceptable)*
1230 H Street, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Political campaign

YOUR BUSINESS POSITION
Consultant

GROSS INCOME RECEIVED
☐ $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
☐ Loan repayment ☐ Partnership
☐ Sale of _____ *(Real property, car, boat, etc.)*
☐ Commission or ☐ Rental Income, *list each source of $10,000 or more*
☑ Other consulting contract *(Describe)*

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED
☐ $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
☐ Loan repayment ☐ Partnership
☐ Sale of _____ *(Real property, car, boat, etc.)*
☐ Commission or ☐ Rental Income, *list each source of $10,000 or more*
☐ Other _____ *(Describe)*

▶ 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*

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
_____% ☐ None

TERM (Months/Years)

SECURITY FOR LOAN
☐ None ☐ Personal residence
☐ Real Property _____ *Street address*
_____ *City*
☐ Guarantor _____
☐ Other _____ *(Describe)*

Comments: _____