

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE

Date Initial Filing Received  
Official Use Only  
RECEIVED  
FAIR POLITICAL  
PRACTICES COMMISSION  
2018 MAR 11 (MIDDLE) PM 4:04

Please type or print in ink.

NAME OF FILER (LAST) (FIRST)  
Chiang John

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

State Treasurer's Office

Division, Board, Department, District, if applicable

Your Position

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

Agency: See Attached

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, 2017, through December 31, 2017.

☐ Leaving Office: Date Left / / (Check one)

-or-

The period covered is / / through December 31, 2017.

☐ The period covered is January 1, 2017, through the date of leaving office.

-or-

☐ The period covered is / / through the date of leaving office.

☐ Assuming Office: Date assumed / /

☐ Candidate: Date of Election 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 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

-or-

☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE

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 foregoing is true and correct.

Date Signed 2/28/18  
(month, day, year)

Signature

(Sign with your filing official.)

FPPC Form 700 (2017/2018)

Service Email: advice@fppc.ca.gov

FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

State Treasurer John Chiang

Filing of SEI Form 700  
Original must be signed and dated and filed with the  
Fair Political Practices Commission  
428 J Street, Suite 620  
Sacramento, CA 95814

Copies to the Following

**State Treasurers Office**

**Achieving Better Life Experience for the Disabled**  
**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 School Finance Authority**  
**California Urban Waterfront Area Restoration Financing Authority**  
**Scholar Share Investment Board**  
**California Tax Credit Allocation Committee**  
**CA Healthy Food Financing Initiative Council**  
**CA Secure Choice Retirement Savings Investment Board**  
**California Transportation Financing Authority**  
**Local Investment Advisory Board**  
**Pooled Money Investment Board**  
Brittney Trost – FPPC Filing Officer  
915 Capitol Map, Sacramento CA 95814

**CalPERS**

(CalPERS) Attn: Tifani Vincent, FPPC Filing Officer  
400 Q Street, LPN - Sacramento, CA 95811

**CalSTRS**

Attn: Amanda Connors, FPPC Filing Officer  
100 Waterfront Place  
West Sacramento, CA 95851-0275

**CalHFA**

Attn: Misty Miller, FPPC Filing Officer  
500 Capitol Mall # 1400  
Sacramento, CA 95814

**California Earthquake Authority (CEA)**

Attn: Neil Hall, FPPC Filing Officer  
801 K Street, Suite 1000  
Sacramento, CA 95814

**California Infrastructure and Economic Development Bank (IBANK)**

Attn: Nancee Trombley, FPPC Filing Officer  
1325 J Street, 18<sup>th</sup> Floor

State Treasurer John Chiang

Sacramento CA 95814

**Commission on State Mandates**

Attn: Jill Magee, FPPC Filing Officer

980 Ninth Street, Suite 300

Sacramento, CA 95814

**Golden State Tobacco Securitization Corporation**

**California Economic Recovery Financing Committee**

**Golden State Transportation Financing Corporation**

**State Public Works Board**

California Department of Finance

Attn: Jeanna Wimberly, FPPC Filing Officer

915 L Street 12<sup>th</sup> Floor

Sacramento, CA 95814

**CA Competes Tax Credit Committee**

Attn: Virginia Gutierrez

1325 J Street, Suite 1800

Sacramento, CA 95814

(916)322-0659

**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  
John Chiang

► NAME OF BUSINESS ENTITY  
Dunn Edwards\*

GENERAL DESCRIPTION OF THIS BUSINESS  
Paint

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:  
       /        / 17             /        / 17  
ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY

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:  
       /        / 17             /        / 17  
ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY

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:  
       /        / 17             /        / 17  
ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY

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:  
       /        / 17             /        / 17  
ACQUIRED                      DISPOSED

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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:  
       /        / 17             /        / 17  
ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY

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:  
       /        / 17             /        / 17  
ACQUIRED                      DISPOSED

Comments: \*Spouse ESOP

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

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <b>John Chiang</b>

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

**Caesars Entertainment**

ADDRESS (Business Address Acceptable)

**1 Harrah's Court, Las Vegas, NV 89119**

BUSINESS ACTIVITY, IF ANY, OF SOURCE

**Entertainment**

YOUR BUSINESS POSITION

**Marketing**

GROSS INCOME RECEIVED

☐ \$500 - \$1,000

☒ \$10,001 - \$100,000

☐ No Income - Business Position Only

☐ \$1,001 - \$10,000

☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary

☒ Spouse's or registered domestic partner's income  
(For self-employed use Schedule A-2.)

☐ 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

(Describe)

☐ Other \_\_\_\_\_  
(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

☐ \$10,001 - \$100,000

☐ No Income - Business Position Only

☐ \$1,001 - \$10,000

☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary

☐ Spouse's or registered domestic partner's income  
(For self-employed use Schedule A-2.)

☐ 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

(Describe)

☐ 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: \_\_\_\_\_

# SCHEDULE D Income - Gifts

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

John Chiang

► NAME OF SOURCE (Not an Acronym)

Singpoli

ADDRESS (Business Address Acceptable)

2 North Lake Ave. Penthouse, Pasadena, CA 91101

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Real Estate

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 02 / 17	\$ 80.00	Breakfast (4)
01 / 02 / 17	\$ 100.00	Rose Parade Viewing
___ / ___ / ___	\$ _____	Tickets (4)

► NAME OF SOURCE (Not an Acronym)

Pasadena Tournament of Roses

ADDRESS (Business Address Acceptable)

391 S. Orange Grove Blvd., Pasadena, CA 91184

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 02 / 17	\$ 210.00	Rose Bowl Ticket
___ / ___ / ___	\$ _____	
___ / ___ / ___	\$ _____	

► NAME OF SOURCE (Not an Acronym)

Cleantech Group\*\*

ADDRESS (Business Address Acceptable)

1714 Franklin Street, #100-286, Oakland, CA 94612

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Sustainability

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 23 / 17	\$ 300.00	Dinner
___ / ___ / ___	\$ _____	
___ / ___ / ___	\$ _____	

► NAME OF SOURCE (Not an Acronym)

Parsons

ADDRESS (Business Address Acceptable)

100 West Walnut Street, Pasadena, CA 91124

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Infrastructure

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 02 / 17	\$ 141.00	Post-Rose Parade
___ / ___ / ___	\$ _____	Brunch (2)
___ / ___ / ___	\$ _____	

► NAME OF SOURCE (Not an Acronym)

Holly Andrade Blair

ADDRESS (Business Address Acceptable)

555 College Avenue Lemoore, CA 93245

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Education

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 20 / 17	\$ 55.00	Lemoore Chamber*
___ / ___ / ___	\$ _____	Installation & Awards
___ / ___ / ___	\$ _____	Banquet

► NAME OF SOURCE (Not an Acronym)

Metropolitan News Company\*\*\*

ADDRESS (Business Address Acceptable)

210 S. Spring Street, Los Angeles, CA 90012

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Newspaper

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 27 / 17	\$ 210.00	Dinner
01 / 27 / 17	\$ 270.00	Glass Award
___ / ___ / ___	\$ _____	

Comments: \*I made remarks and presented certificates \*\*I was the opening evening plenary keynote speaker \*\*\* \*I sent a check because the total of the dinner and award was \$480, \$10 above the gift limit.

# SCHEDULE D Income – Gifts

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

John Chiang

► NAME OF SOURCE (Not an Acronym)

California Democratic Party

ADDRESS (Business Address Acceptable)

1830 9th Street, Sacramento, CA 95811

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Politics

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 01 / 17	\$ 10.99	Asm.CaucusReception
02 / 01 / 17	\$ 106.77	Asm.CaucusReception
/ /	\$	

► NAME OF SOURCE (Not an Acronym)

Dr. Sabrina Kay

ADDRESS (Business Address Acceptable)

18000 Studebaker Road, Cerritos, CA 90703

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Education

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 16 / 17	\$ 131.83	Dinner
/ /	\$	
/ /	\$	

► 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)

SEIU Employees International Union CTW, CLC\*

ADDRESS (Business Address Acceptable)

1800MassachusettsAve.NW,Washington,DC20036

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Labor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 13 / 17	\$ 70.00	Dinner Meeting
/ /	\$	
/ /	\$	

► NAME OF SOURCE (Not an Acronym)

CalAsian Chamber of Commerce

ADDRESS (Business Address Acceptable)

2331 Alhambra Blvd. #100 Sacramento, CA 95817

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 28 / 17	\$ 85.00	Dinner
/ /	\$	
/ /	\$	

► 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: \*As a State Treasurer, I provided an update on my work in California

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name  John Chiang

► NAME OF SOURCE (Not an Acronym)

Rod Pacheco

ADDRESS (Business Address Acceptable)

535 Anton Blvd. 9th Fl. Costa Mesa, CA 92626

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Attorney

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 03 / 17	\$ 150.00	B. Sinatra Children's
/  /	\$	Center Champion
/  /	\$	Honors Luncheon

► 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)
/  /	\$	
/  /	\$	
/  /	\$	

► 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 D Income – Gifts

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
John Chiang

► NAME OF SOURCE (Not an Acronym)  
University of California Riverside\*

ADDRESS (Business Address Acceptable)  
900 University Avenue, Riverside, CA 92521

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Higher education

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 19 / 17	\$ 18.22	School of Medicine-Pen
04 / 19 / 17	\$ 1.82	School of Medicine-Pin
04 / 19 / 17	\$ 8.88	Lunch

► NAME OF SOURCE (Not an Acronym)  
University of California Riverside\*

ADDRESS (Business Address Acceptable)  
900 University Avenue, Riverside, CA 92521

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Higher education

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 19 / 17	\$ 11.83	Community Reception
/ /	\$	
/ /	\$	

► NAME OF SOURCE (Not an Acronym)  
Kairos Society

ADDRESS (Business Address Acceptable)  
1132 5th Ave, Venice, CA 90291

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Elite Club

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 20 / 17	\$ 100.00	Opening Night Dinner
/ /	\$	
/ /	\$	

► NAME OF SOURCE (Not an Acronym)  
University of California Riverside\*

ADDRESS (Business Address Acceptable)  
900 University Avenue, Riverside, CA 92521

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Higher education

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 19 / 17	\$ 4.25	Snacks
04 / 19 / 17	\$ 48.73	Student Shoulder Bag
04 / 19 / 17	\$ 32.73	Travel Mug

► NAME OF SOURCE (Not an Acronym)  
Fly Blade

ADDRESS (Business Address Acceptable)  
499 East 34th Street, New York, NY 10016

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Transportation

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 20 / 17	\$ 400.00	Helicopter Service
/ /	\$	
/ /	\$	

► 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: \*I toured the University of California Riverside for half a day and spoke at the a School of Public Policy Seminar

# SCHEDULE D Income - Gifts

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

John Chiang

► NAME OF SOURCE (Not an Acronym)

Brian Sun

ADDRESS (Business Address Acceptable)

555 S. Flower St. 50th Fl. Los Angeles, CA 90071

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Law Partner

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 12 / 17	\$ 150.00	So. CA Chinese Law-
___ / ___ / ___	\$ _____	yers Assoc.Installation
___ / ___ / ___	\$ _____	& Awards Banquet

► NAME OF SOURCE (Not an Acronym)

One Belt One Road Corporation, Beijing

ADDRESS (Business Address Acceptable)

5F,BicokAthePl.#9GuanghuaRd.ChaoyDistrictBeijing

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Economic Development

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 28 / 17	\$ 90.00	Statue
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► 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)

American Jewish Committee Los Angeles

ADDRESS (Business Address Acceptable)

11766 Wilshire Blvd #800, Los Angeles, CA 90025

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Non-profit organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 15 / 17	\$ 150.00	Annual Meeting -
___ / ___ / ___	\$ _____	Dinner
___ / ___ / ___	\$ _____	_____

► 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 D Income - Gifts

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

John Chiang

► NAME OF SOURCE (Not an Acronym)

North America Chang Hua Association\*

ADDRESS (Business Address Acceptable)

19401 Harbortgate Way, Torrance, CA 90501

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Hometown association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06/25/17	\$ 50.00	Annual Banquet -
/ /	\$	Lunch
/ /	\$	

► 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)

Changhua County Government\*\*

ADDRESS (Business Address Acceptable)

#416Sec.2ZhongshanRd.ChanghuaCty.500,Taiwan

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06/25/17	\$ 8.00	Lion Trinket
06/25/17	\$ 10.26	Green Glass Gift
06/25/17	\$ 32.16	Mutli-Color Glass Gift

► 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: \*I made brief remarks \*\*Gifts from meet and greet with Changhua County Chief Magistrate

# SCHEDULE D Income – Gifts

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
John Chiang

► NAME OF SOURCE (Not an Acronym)

Royal Business Bank

ADDRESS (Business Address Acceptable)

121 East Valley Blvd. #201 San Gabriel CA 91776

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Financial

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
7 / 08 / 17	\$ 50.00	Welcome Dinner for
/ /	\$	the Mayor of Taoyuan
/ /	\$	City, Taiwan

► 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)
/ /	\$	
/ /	\$	
/ /	\$	

► 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 D Income - Gifts

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
John Chiang

► NAME OF SOURCE (Not an Acronym)  
Chinese People's Assn for Friendship w Foreign Countries

ADDRESS (Business Address Acceptable)  
No. 1 Taijichang Street, Dong Cheng Dist Beijing PRC China

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Foreign Government Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07/28/17	\$ 104.00	Lunch
07/28/17	\$ 43.00	Tea Set
07/28/17	\$ 28.00	Tour Great Wall

► NAME OF SOURCE (Not an Acronym)  
Sichuan People's Assn for Friendship w Foreign Countries

ADDRESS (Business Address Acceptable)  
100 E Section 31st Ring Road Chengdu Sichuan PRC China

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Foreign Government Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07/29/17	\$ 61.00	Welcome Dinner & Gift
/ /	\$	Exchange
07/30/17	\$ 61.00	Irrigation Plant Dinner

► NAME OF SOURCE (Not an Acronym)  
Sichuan People's Assn for Friendship w Foreign Countries

ADDRESS (Business Address Acceptable)  
100 E Section 31st Ring Road Chengdu Sichuan PRC China

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Foreign Government Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07/31/17	\$ 26.00	Lunch
07/31/17	\$ 43.00	Gift Exchange-Scroll
/ /	\$	

► NAME OF SOURCE (Not an Acronym)  
Chinese People's Assn for Friendship w Foreign Countries

ADDRESS (Business Address Acceptable)  
No. 1 Taijichang Street, Dong Cheng Dist Beijing PRC China

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Foreign Government Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07/28/17	\$ 38.00	Dinner voucher
07/29/17	\$ 16.00	Tour Forbidden City
07/30/17	\$ 36.00	Research Base lunch

► NAME OF SOURCE (Not an Acronym)  
Sixuan Hexin Real Estate Co.

ADDRESS (Business Address Acceptable)  
No 806 Western Tower No 18 S Renmin Rd Sec 4 Chendu

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Real Estate Investment Group

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07/30/17	\$ 46.00	Dinner
07/30/17	\$ 200.00	Gift Exchange
/ /	\$	

► NAME OF SOURCE (Not an Acronym)  
Foreign Affairs Office of People's Gov't Guangdong Prov In'tl Rlns

ADDRESS (Business Address Acceptable)  
45 Shamian Street, Guangzhou, China

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Foreign Government Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08/02/17	\$ 46.00	Lunch
08/02/17	\$ 30.00	Gift Exchange Scroll
/ /	\$	

Comments:

# SCHEDULE D Income – Gifts

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

John Chiang

► NAME OF SOURCE (Not an Acronym)

Daniel Fong

ADDRESS (Business Address Acceptable)

855 Washington Blvd, Montebello, CA 90640

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Baby Furniture

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 08 / 17	\$ 116.00	Hollywood Bowl
___ / ___ / ___	\$ _____	Ticket
___ / ___ / ___	\$ _____	

► NAME OF SOURCE (Not an Acronym)

Mike Layton

ADDRESS (Business Address Acceptable)

501 Shatto Place, Suite 400, Los Angeles, CA 90020

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Labor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 23 / 17	\$ 146.00	Angel Game Ticket
___ / ___ / ___	\$ _____	
___ / ___ / ___	\$ _____	

► 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)

Faculty Association of CA Community Colleges

ADDRESS (Business Address Acceptable)

1823 11th Street, Sacramento, CA 95811

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Labor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 09 / 17	\$ 104.60	Dinner
___ / ___ / ___	\$ _____	
___ / ___ / ___	\$ _____	

► NAME OF SOURCE (Not an Acronym)

CA Legislative Black Caucus

ADDRESS (Business Address Acceptable)

Leg. Office Bldg., Rm. 158, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 26 / 17	\$ 75.00	Gala Dinner
___ / ___ / ___	\$ _____	
___ / ___ / ___	\$ _____	

► 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 D Income - Gifts

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
John Chiang

► NAME OF SOURCE (Not an Acronym)  
Asian Americans Advancing Justice - Los Angeles\*

ADDRESS (Business Address Acceptable)  
1145 Wilshire Boulevard, Los Angeles, CA 90017

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Non-profit organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 06 / 17	\$ 101.15	GCPI Conference -
/ /	\$	Private Dinner
/ /	\$	

► 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)  
This is Bahrain

ADDRESS (Business Address Acceptable)  
Manama, Kingdom of Bahrain

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Non governmental organization (NGO)

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 13 / 17	\$ 150.00	The Kingdom of Bah-
/ /	\$	rain Declaration Dinner
/ /	\$	& Ceremony

► 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: \*I was the morning speaker at the conference

# SCHEDULE D Income – Gifts

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

John Chiang

► NAME OF SOURCE (Not an Acronym)

Northern CA Carpenters Regional Council

ADDRESS (Business Address Acceptable)

265 Hegenberger Rd. #200, Oakland, CA 94621

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Labor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/08/17	\$ 75.00	Holiday Moose Feed
/ /	\$	Luncheon
/ /	\$	

► 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)
/ /	\$	
/ /	\$	
/ /	\$	

► 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**

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

John Chiang

- 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 gift limit, but may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

▶ NAME OF SOURCE (Not an Acronym)  
The Hunt Institute  
ADDRESS (Business Address Acceptable)  
1000 Park Forty Plaza, Suite 280  
CITY AND STATE  
Durham, NC 27713  
☒ 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): 04/30/17 - 05/01/17 AMT: \$ 871.59  
(If gift)

▶ MUST CHECK ONE: ☒ Gift -or- ☐ Income

☐ Made a Speech/Participated in a Panel

☒ Other - Provide Description  
Participant in the Hunt Kean Leadership Fellows Session 2

▶ If Gift, Provide Travel Destination  
Denver, CO

▶ 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)

▶ MUST CHECK ONE: ☐ Gift -or- ☐ Income

☐ Made a Speech/Participated in a Panel

☐ Other - Provide Description

▶ If Gift, Provide Travel Destination

▶ 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)

▶ MUST CHECK ONE: ☐ Gift -or- ☐ Income

☐ Made a Speech/Participated in a Panel

☐ Other - Provide Description

▶ If Gift, Provide Travel Destination

▶ 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)

▶ MUST CHECK ONE: ☐ Gift -or- ☐ Income

☐ Made a Speech/Participated in a Panel

☐ Other - Provide Description

▶ If Gift, Provide Travel Destination

Comments: I was a Hunt/Kean Leadership Fellow. Travel Expenses: Hotel: \$216.88; Airfare: \$355.40; Ground Transportation: \$73.50; Meals: \$225.81

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

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

John Chiang

- 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 gift limit, but may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

▶ NAME OF SOURCE (Not an Acronym)  
U.S. China Innovation Gateway  
ADDRESS (Business Address Acceptable)  
488 University Avenue #623  
CITY AND STATE  
Palo Alto, CA  
☒ 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): 05 / 24 / 17 - 05 / 28 / 17 AMT: \$ 5561.10  
(If gift)

▶ MUST CHECK ONE: ☒ Gift -or- ☐ Income

☒ Made a Speech/Participated in a Panel

☐ Other - Provide Description

▶ If Gift, Provide Travel Destination

Beijing, China

▶ 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)

▶ MUST CHECK ONE: ☐ Gift -or- ☐ Income

☐ Made a Speech/Participated in a Panel

☐ Other - Provide Description

▶ If Gift, Provide Travel Destination

▶ 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)

▶ MUST CHECK ONE: ☐ Gift -or- ☐ Income

☐ Made a Speech/Participated in a Panel

☐ Other - Provide Description

▶ If Gift, Provide Travel Destination

▶ 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)

▶ MUST CHECK ONE: ☐ Gift -or- ☐ Income

☐ Made a Speech/Participated in a Panel

☐ Other - Provide Description

▶ If Gift, Provide Travel Destination

Comments: I gave a speech at the Z-Park and Silicon Valley Technology and Financial Week Grand Opening Ceremony Summit Forum-Airfare:\$4628.00 Hotel&Transpo \$573.04 Meals\$360.06

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

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

John Chiang

- 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 gift limit, but may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

▶ NAME OF SOURCE (Not an Acronym)  
Chinese Peoples Assn for Friendship w Foreign Countries\*  
ADDRESS (Business Address Acceptable)  
No 1 Taijiching Street Dong Cheng District  
CITY AND STATE  
Beijing, China 100740

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

DATE(S): 07/27/17 - 08/02/17 AMT: \$ 5850.00  
(If gift)

▶ MUST CHECK ONE: ☒ Gift -or- ☐ Income

☒ Made a Speech/Participated in a Panel

☐ Other - Provide Description \_\_\_\_\_

▶ If Gift, Provide Travel Destination Beijing, China

▶ 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)

▶ MUST CHECK ONE: ☐ Gift -or- ☐ Income

☐ Made a Speech/Participated in a Panel

☐ Other - Provide Description \_\_\_\_\_

▶ If Gift, Provide Travel Destination \_\_\_\_\_

▶ 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)

▶ MUST CHECK ONE: ☐ Gift -or- ☐ Income

☐ Made a Speech/Participated in a Panel

☐ Other - Provide Description \_\_\_\_\_

▶ If Gift, Provide Travel Destination \_\_\_\_\_

▶ 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)

▶ MUST CHECK ONE: ☐ Gift -or- ☐ Income

☐ Made a Speech/Participated in a Panel

☐ Other - Provide Description \_\_\_\_\_

▶ If Gift, Provide Travel Destination \_\_\_\_\_

Comments: I led a delegation of Legislators and Mayors on a U.S. Diplomatic Trade Mission to China-Airfare: \$4950.00, Lodging: \$900.00.

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

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name

John Chiang

- 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 gift limit, but may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

▶ NAME OF SOURCE (Not an Acronym)  
National Rongxiang Xu Foundation\*  
 ADDRESS (Business Address Acceptable)  
44 East Huntington Drive, Suite 215  
 CITY AND STATE  
Arcadia, CA 91006

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

DATE(S): 08 / 15 / 17 - 08 / 16 / 17 AMT: \$ 4815  
 (If gift)

▶ MUST CHECK ONE: ☒ Gift -or- ☐ Income

☒ Made a Speech/Participated in a Panel

☐ Other - Provide Description \_\_\_\_\_

▶ If Gift, Provide Travel Destination Beijing, China

▶ 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)

▶ MUST CHECK ONE: ☐ Gift -or- ☐ Income

☐ Made a Speech/Participated in a Panel

☐ Other - Provide Description \_\_\_\_\_

▶ If Gift, Provide Travel Destination \_\_\_\_\_

▶ NAME OF SOURCE (Not an Acronym)  
Wilson Lee\*\*  
 ADDRESS (Business Address Acceptable)  
8 Wykeham Road  
 CITY AND STATE  
West Newton, MA 02465

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

DATE(S): 08 / 19 / 17 - 08 / 20 / 17 AMT: \$ 124.21  
 (If gift)

▶ MUST CHECK ONE: ☒ Gift -or- ☐ Income

☒ Made a Speech/Participated in a Panel

☐ Other - Provide Description \_\_\_\_\_

▶ If Gift, Provide Travel Destination Boston, MA

▶ 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)

▶ MUST CHECK ONE: ☐ Gift -or- ☐ Income

☐ Made a Speech/Participated in a Panel

☐ Other - Provide Description \_\_\_\_\_

▶ If Gift, Provide Travel Destination \_\_\_\_\_

Comments: \*I was a speaker@2nd Global Conf Collaboration and Development on Regenerative Life Science & 30th Anniversary of MEBO International - Airfare: \$4565.00; Lodging: \$200.00; Meal: \$50.00. \*\*I gave the keynote address@ChineseAmericanCitizensAllianceBostonLodge Annual Award Gala -Lodging: \$124.21