CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Please type or print in ink. NAME OF FILER (LAST)	STATEMENT OF ECON COVER F A PUBLIC DC	PAGE CUMENT Filed	Date Initial Filing Received Filing Official Use Only Date: 03/20/2023 12:16 PM N: 011300005-STH-0005
Musicco	Nicole	Theres	а
1. Office, Agency, or Court		Theres	а
Agency Name (Do not use acronyms) California Public Employees' Reti Division, Board, Department, District, if appli	cable You	r Position	
Executive Office (EXEO)		nief Investment Officer	
 If filing for multiple positions, list below o Agency: 			
2. Jurisdiction of Office (Check at le State Multi-County City of	□ Jι (S □ Cr	atewide Jurisdiction)	Judge, or Court Commissioner
 3. Type of Statement (Check at least ➢ Annual: The period covered is Januar December 31, 2022. -or- The period covered is O3 December 31, 2022. Assuming Office: Date assumed Candidate: Date of Election 	y 1, 2022, through	 The period covered is Janual leaving office. The period covered is the date of leaving office. 	// one circle.) aary 1, 2022 , through the date of //, through
 4. Schedule Summary (required) Schedules attached Schedule A-1 - Investments – sched Schedule A-2 - Investments – sched Schedule B - Real Property – sched -Or- None - No reportable intered 	dule attached Schedule	C - Income, Loans, & Busine D - Income – Gifts – schedu	ess Positions – schedule attached
5. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public D 400 Q Street DAYTIME TELEPHONE NUMBER	city ocument) Sacramento EMAIL ADDF	STATE CA JESS	ZIP CODE 95811

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 Signed03/20/2023 12:16 PMSignatureNicole Theresa Musicco	
(month, day, year) (File the originally signed paper statement with your filing official.)	

	SCHEDULE A-1 CALIFORNIA FORM 700							
	Invostmonts							
	Stocks, Bonds, and Other Interests Name							
			is Less Than 10%) Nicole Musicco					
	Investments m Do not attach brokerag		st be itemized.					
►	NAME OF BUSINESS ENTITY	Ĭ	 NAME OF BUSINESS ENTITY 					
	RedBird Capital Partners, Fund I L.P.							
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS					
	Private Equity Fund							
	FAIR MARKET VALUE		FAIR MARKET VALUE					
	□ \$2,000 - \$10,000 □ \$10,000 □ \$10,000							
	S100,001 - \$1,000,000 Over \$1,000,000		\$100,001 - \$1,000,000 Over \$1,000,000					
	NATURE OF INVESTMENT		NATURE OF INVESTMENT					
	(Describe)		(Describe)					
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		Partnership () Income Received of \$0 - \$499 () Income Received of \$500 or More (Report on Schedule C)					
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:					
	<u>22</u> <u>22</u>		<u>/22</u> <u>/22</u>					
_	ACQUIRED DISPOSED		ACQUIRED DISPOSED					
	NAME OF BUSINESS ENTITY		► NAME OF BUSINESS ENTITY					
	RedBird Capital Partners, Fund II, L.P. GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS					
	Private Equity Fund							
	FAIR MARKET VALUE		FAIR MARKET VALUE					
	\$2,000 - \$10,000 \$10,001 - \$100,000		\$2,000 - \$10,000 \$10,001 - \$100,000					
	S100,001 - \$1,000,000 Over \$1,000,000		S100,001 - \$1,000,000 Over \$1,000,000					
	NATURE OF INVESTMENT Unrealized Carry		NATURE OF INVESTMENT					
	(Describe) ☐ Partnership ◯ Income Received of \$0 - \$499		(Describe)					
	Income Received of \$500 or More (Report on Schedule C)		Income Received of \$500 or More (Report on Schedule C)					
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:					
	ACQUIRED DISPOSED		ACQUIRED DISPOSED					
►	NAME OF BUSINESS ENTITY		► NAME OF BUSINESS ENTITY					
	RedBird Series 2019, L.P.							
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS					
	Private Equity Fund							
	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,000 \$10,001 - \$100,000		FAIR MARKET VALUE \$2,000 - \$10,000 \$10,000 \$10,000					
	\$10,001 - \$1,000,000 \$10,001 - \$10,000 \$100,001 - \$1,000,000 \$10,001 - \$1,000,000		\$2,000 \$10,000 \$10,000 \$100,001 \$1,000,000 Over \$1,000,000					
	NATURE OF INVESTMENT Stock Stock Capital & Unrealized Carry		NATURE OF INVESTMENT					
	(Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (<i>Report on Schedule C</i>)		(Describe) ☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More (<i>Report on Schedule C</i>)					
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:					
	/ / 22 / / 22		/ / 22 / / 22					
	ACQUIRED DISPOSED		ACQUIRED DISPOSED					

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Nicole Musicco

► 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED		
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME		
	RedBird Capital Partners		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
	667 Madison Ave., 16th Floor, NY, NY 10065		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
	Private Equity		
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION		
	Partner		
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED ON Income - Business Position Only		
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000		
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000		
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED		
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	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.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)		
Sale of	Sale of		
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)		
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, <i>list each source of \$10,000 or more</i>		
(Describe)	(Describe)		
Other	X Other Carry Distributions		
(Describe)	(Describe)		

► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from a commercial lending institution, 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)	%	None
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LO	AN
HIGHEST BALANCE DURING REPORTING PERIOD	Real Property	Street address
\$500 - \$1,000		City
\$1,001 - \$10,000 \$10,001 - \$100,000	Guarantor	
OVER \$100,000	Other	(Describe)
Comments:		