CALIFORNIA FORM 7	JU	IENT OF ECONOMIC IN COVER PAGE	TERESTS Date Initial Filing Received Filing Official Use Only
		A PUBLIC DOCUMENT	Filed Date: 02/02/2023 03:26 PM SAN: FPPC
Please type or print in ink.			UNIT TO
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
Cohen	Malia		Michelle
1. Office, Agency, or Cour	rt		
Agency Name (Do not use acro	onyms)		
Controller	trict if conditional to	Vere Desition	
Division, Board, Department, Dis	strict, if applicable	Your Position	
		Controller	
► If filing for multiple positions,	list below or on an attachment.	. (Do not use acronyms)	
Agency:		Position:	
<u> </u>			
2. Jurisdiction of Office (Check at least one box)		
✓ State		Judge, Retired J (Statewide Jurisc	ludge, Pro Tem Judge, or Court Commissioner liction)
Multi-County		County of	
City of			
3. Type of Statement (Che	-		
Annual: The period covered December 31, 202 - or-	ed is January 1, 2022, through 22 .	-	: Date Left/_/ (Check one circle.)
The period covered December 31, 20		leaving offic	covered is January 1, 2022 , through the date of e.
X Assuming Office: Date as	sumed 01 <u>06</u> 202	3 O The period the date of	covered is/, through leaving office.
Candidate: Date of Election	on and	office sought, if different than Part 1:	
4. Schedule Summary (re Schedules attached	equired) ► Tota	al number of pages including	this cover page:4
Schedule A-1 - Investme	ents – schedule attached	Schedule C - Income, I	Loans, & Business Positions – schedule attached
Schedule A-2 - Investments – schedule attached			Gifts – schedule attached
Schedule B - Real Prop	erty - schedule attached	Schedule E - Income –	Gifts – Travel Payments – schedule attached
-or- 🗌 None - No reporta	ble interests on any sche	dule	
5. Verification			
MAILING ADDRESS STR (Business or Agency Address Recommer		CITY	STATE ZIP CODE
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS	
		I have reviewed this statement and to acknowledge this is a public document.	the best of my knowledge the information contained
I certify under penalty of perju	ury under the laws of the Sta	te of California that the foregoing is	true and correct.
	023 03:26 PM	Signature	riginally signed paper statement with your filing official.)
(mor	nth, day, year)	(File the o	nymany signeu paper statement with your IIIII y Unicial.)

SCHEDULE B Interests in Real Property

(Including Rental Income)

california form 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Malia Cohen

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS			
838 Erie Street	A.P.N. Block 4591C, Lot 148			
CITY	CITY			
Oakland, CA	San Francisco			
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000			
Ownership/Deed of Trust Easement	X Ownership/Deed of Trust			
Leasehold Cther IF RENTAL PROPERTY, GROSS INCOME RECEIVED \$0 - \$499 \$500 - \$1,000 \$\$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000 SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. None	Leasehold			
*				
* You are not required to report loans from a commercial lending institution 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*	NAME OF LENDER*			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)			
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER			

INTEREST RATE

HIGHEST BALANCE DURING REPORTING PERIOD

TERM (Months/Years)

\$500 - \$1,000 \$1,001 - \$10,000

OVER \$100,000

\$10,001 - \$100,000

Guarantor, if applicable

BUSINESS ACTIVITY, IF ANY, OF LENDER				
INTEREST RATE	TERM (Months/Years)			
%				
HIGHEST BALANCE DURING REPO	ORTING PERIOD			
\$500 - \$1,000 \$1,000	01 - \$10,000			
S10,001 - \$100,000 OVER \$100,000				
Guarantor, if applicable				

Comments: _

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700

Name

Malia Cohen

1. INCOME RECEIVED	► 1. INCOME RECEIVED		
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME		
Boxer and Gerson, LLP			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
300 Frank H. Ogawa Plaza #500 Oakland, CA 94612			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION		
Partner			
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No 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>		
Boxer and Gerson, LLP			
(Describe)	(Describe)		
Other	Other		
(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	OAN	idence	
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			
Comments:				

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

CALIFORNIA FORM 700

Name

Malia Cohen

- 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. Per Government Code Section 89506, these payments may not be subject to the gift limit. However, they may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
Oxfam America	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
226 Causeway Street	
CITY AND STATE	CITY AND STATE
Boston, MA 02114	
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): 06 / 30 / 22 - 07 / 03 / 22 AMT: \$3,230.93	DATE(S):/// AMT: \$
► MUST CHECK ONE: 🔀 Gift -or- 🗌 Income	► MUST CHECK ONE: Gift -or Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):// AMT: \$	 DATE(S):/// AMT: \$
► MUST CHECK ONE: Gift -or- Income	► MUST CHECK ONE: Gift -or Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
► If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination
Comments:	