

**STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT**

Date Initial Filing Received
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4/1/2022 - 3:57 P.M. - er

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Eng Aimee Sueko

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Oakland Unified School District

Division, Board, Department, District, if applicable

Board of Education

Your Position

School Board Director

► 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

Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
(Statewide Jurisdiction)

Multi-County _____

County of _____

City of Oakland

Other _____

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

Annual: The period covered is January 1, 2021, through
December 31, 2021.

Leaving Office: Date Left _____
(Check one circle.)

-or-

The period covered is _____, through
December 31, 2021.

The period covered is January 1, 2021, through the date of
leaving office.

-or-

Assuming Office: Date assumed _____

The period covered is _____, through
the date of leaving office.

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: 4

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
(Business or Agency Address Recommended - Public Document)

1008 Broadway Suite 300

Oakland

CA

94610

DAYTIME TELEPHONE NUMBER

(510) 747-8393

EMAIL ADDRESS

aimee.ery@ousd.org

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

A
(month, day, year)

3/31/22

Signature

AS
(File the originally signed paper statement with your filing official.)

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
Amee Eng

▶ 1. BUSINESS ENTITY OR TRUST

Name Amee Eng Consulting
Address (Business Address Acceptable) 668 Hillgert Circle, Oakland 94610
Check one
Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
Nonprofit/philanthropic advising, sole proprietorship

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$0 - \$1,999
\$2,000 - \$10,000
\$10,001 - \$100,000
\$100,001 - \$1,000,000
Over \$1,000,000

ACQUIRED 1/21 DISPOSED 1/21

NATURE OF INVESTMENT
Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION Consultant

▶ 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 or Names listed below
New Venture Fund

▶ 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 IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000
\$10,001 - \$100,000
\$100,001 - \$1,000,000
Over \$1,000,000

ACQUIRED 1/21 DISPOSED 1/21

NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership
Leasehold _____ Other _____
Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

▶ 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 IF APPLICABLE, LIST DATE:
\$0 - \$1,999
\$2,000 - \$10,000
\$10,001 - \$100,000
\$100,001 - \$1,000,000
Over \$1,000,000

ACQUIRED 1/21 DISPOSED 1/21

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 or Names listed below

▶ 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 IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000
\$10,001 - \$100,000
\$100,001 - \$1,000,000
Over \$1,000,000

ACQUIRED 1/21 DISPOSED 1/21

NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership
Leasehold _____ Other _____
Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

Comments: _____

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
668 Hillcrest Circle
 CITY
Oakland CA 94610

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
Over \$1,000,000

IF APPLICABLE, LIST DATE:
 / / 21 / / 21
 ACQUIRED DISPOSED

NATURE OF INTEREST
Ownership/Deed of Trust Easement
 Leasehold _____
 Yrs. remaining Other

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
Jason Lee
Krystle Chipman

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

 CITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

IF APPLICABLE, LIST DATE:
 / / 21 / / 21
 ACQUIRED DISPOSED

NATURE OF INTEREST
 Ownership/Deed of Trust Easement
 Leasehold _____
 Yrs. remaining Other

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

* 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*

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF LENDER

 INTEREST RATE TERM (Months/Years)
 _____% None _____
 HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

NAME OF LENDER*

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF LENDER

 INTEREST RATE TERM (Months/Years)
 _____% None _____
 HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

Comments: _____

SCHEDULE C

Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name _____
Ameery

▶ 1. INCOME RECEIVED		▶ 1. INCOME RECEIVED	
NAME OF SOURCE OF INCOME <u>Mickos Properties Inc</u>		NAME OF SOURCE OF INCOME <u>Asian Health Services</u>	
ADDRESS (Business Address Acceptable) <u>PO Box 129</u>		ADDRESS (Business Address Acceptable) <u>101 8th Street Oakland</u>	
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Real Estate</u>		BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Health Care Services</u>	
YOUR BUSINESS POSITION <u>Project Manager</u>		YOUR BUSINESS POSITION <u>Health Coach</u>	
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
<u>\$10,001 - \$100,000</u>	OVER \$100,000	<u>\$10,001 - \$100,000</u>	OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED		CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
<u>Salary</u>	Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	<u>Salary</u>	<u>Spouse's or registered domestic partner's income</u> (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 _____ <small>(Real property, car, boat, etc.)</small>		Sale of _____ <small>(Real property, car, boat, etc.)</small>	
Loan repayment		Loan repayment	
Commission or Rental Income, list each source of \$10,000 or more		Commission or Rental Income, list each source of \$10,000 or more	
_____ <small>(Describe)</small>		_____ <small>(Describe)</small>	
Other _____ <small>(Describe)</small>		Other _____ <small>(Describe)</small>	

▶ 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* _____ 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 _____ <small>Street address</small> <small>City</small> Guarantor _____ Other _____ <small>(Describe)</small>
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Comments: _____