	STATEMENT	OF ECONOMIC INTERESTS	Date Initial Filing Receive
CALIFORNIA FORM 700		COVER PAGE	Official Use Only
			Legal Affaira
Please type or print in ink. NAME OF FILER (LAST)		JBLIC DOCUMENT	(MIDDLE)
Brown	(FIRST) Siri		(MIDDLE)
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
Peralta Community College Distric	t		
Division, Board, Department, District, if applica		Your Position	
Academic Affairs		Vice Chancellor	
► If filing for multiple positions, list below or	on an attachment. (Do not	use acronyms)	
Agency:		Position:	
2. Jurisdiction of Office (Check at lease	st one box)		
State		Judge or Court Commissioner (Stat	ewide Jurisdiction)
Multi-County		_ County of	
City of Oakland			
3. Type of Statement (Check at least of	ne box)		
Annual: The period covered is January December 31, 2018.	1, 2018, through	Leaving Office: Date Left/ (Check one c	
The period covered is/ December 31, 2018.	, through	 The period covered is January -or- leaving office. 	1, 2018, through the date of
Assuming Office: Date assumed]]	 The period covered is/_ the date of leaving office. 	/, through
Candidate: Date of Election	and office sough	ht, if different than Part 1:	
4. Schedule Summary (must comp	lete) Total number 	er of pages including this cover page);
Schedules attached			
Schedule A-1 - Investments - schedul	e attached	Schedule C - Income, Loans, & Business F	Positions - schedule attached
Schedule A-2 - Investments – schedul		Schedule D - Income – Gifts – schedule at	
Schedule B - Real Property – schedul	e attached	Schedule E - Income – Gifts – Travel Payn	nents - schedule attached
-or- D None - No reportable interest	s on any schedule		
5. Verification MAILING ADDRESS STREET	CITY	CTATE	
(Business or Agency Address Recommended - Public Docu		STATE	ZIP CODE
	ment)		
333 East 8th Avenue	ment) Oakland		4606
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS	4606
DAYTIME TELEPHONE NUMBER (510)466-7218 I have used all reasonable diligence in preparin	Oakland g this statement. I have rev	EMAIL ADDRESS sbrown@peralta.edu iewed this statement and to the best of my know	
DAYTIME TELEPHONE NUMBER (510)466-7218	Oakland g this statement. I have rev nd complete. I acknowledg	EMAIL ADDRESS sbrown@peralta.edu iewed this statement and to the best of my know e this is a public document.	
DAYTIME TELEPHONE NUMBER (510)466-7218 I have used all reasonable diligence in preparin herein and in any attached schedules is true a	Oakland g this statement. I have rev nd complete. I acknowledg laws of the State of Califo	EMAIL ADDRESS sbrown@peralta.edu iewed this statement and to the best of my know e this is a public document.	

FPPC Form 700 (2018/2019) FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov Page - 5

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM

FAIR POLITICAL PRACTICES COMMISSION

Siri Brown

Name

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Global Academics	
Name	Name
248-3rd Street Oakland Ca 91607	
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one Trust, go to 2 I Business Entity, complete the box, then go to 2	Check one
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Conducts research and international reserch support	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 //18 \$2,000 - \$10,000 /_/18 \$10,001 - \$100,000 ACQUIRED \$10,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
YOUR BUSINESS POSITION Owner	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000	\$10,001 - \$100,000 \$500 - \$1,000 \$10,001 - \$100,000 \$1,001 - \$10,000
 > 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) ☑ None or	S. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) None or
4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST Check one box: INVESTMENT REAL PROPERTY	 ▲ INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box: INVESTMENT REAL PROPERTY
N/A Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 _/18 \$10,001 - \$100,000 _/18 \$100,001 - \$1,000,000 ACQUIRED Over \$1,000,000 DISPOSED NATURE OF INTEREST	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 ///18 \$10,001 - \$100,000 ///18 \$100,001 - \$1,000,000 ACQUIRED Over \$1,000,000 DISPOSED NATURE OF INTEREST DISPOSED
Property Ownership/Deed of Trust Stock Partnership Property Ownership/Deed of Trust	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

Comments: This is an online business. No property

	STATEMENT O	F ECONOMIC INTERESTS	Date Initial Filing Receive Ruly Otker ow Un
FAR POSITICAL PRACTICES COMMISSION		OVER PAGE	
were type or point in ink.	A PU	BLIC DOCUMENT	
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Brown	Siri		
Office, Agency, or Court			
Agency Name (Do not use acronyms)		1989 - Constanting of the second s	and the second
Peralta Community Collogo [
Division, Board, Department, District, if	applicable	Your Position	
District Office		Vice Chancellot of Academ	tic Affairs and Student S
► If fiting for multiple positions, list be	llow or on an attachment, (Do not a	ise scronyme)	
Agency:		Position:	
Jurisdiction of Office (Check	k at least one box)		
C State		Judge, Retired Judge, Pro Tem Ju (Statewide Junsdiction)	idge, or Court Commissioner
Multi-County		County of	
Oakland			
and the second			
. Type of Statement (Check at			
Annual: The period covered is J December 31, 2019.		Leaving Office: Date Left (Check one	circle.)
This period covered is _ December 31, 2019.	/, Peough	-or-leaving office.	
Assuming Office: Date assume	Ø	O The period covered is the data of leaving office.	/, through
Candidate: Date of Election	and office soug	ht, if different then Part 1:	
Schedule Summary (must	complete) > Total number	ar of pages including this cover pa	ge:
Schedules attached			
Schedule A-1 - investments -	adjudit allached	50 Schedule C - Income, Loans, & Busines	Positions - scherule starbal
Schedule A-2 - Investments -		Schedule D - income - Gitts - schedule	
Schedule B - Real Property -		Schedule E - Incomo - Gifts - Travel Ps	iyments - schedule allached
-or- None - No reportable i	interests on any schedule		
5. Verification			and the second
WILING ADDRESS STREFT	GTY	STATE	3P 000E
(Business of Agency Address Reconstanded -) 033 Earst 6th Avenue	Public Decurrent) Oakiland	CA	94696
GATTAVE TELEPHONE ALIMPLE	Constitution	EMAL ADDITION	1000
CHARLENCE FELLER Y KUPLE FRUIDER H		sbrown@peralta.edu	
(510) 4667801		1.0 CAN TANK PORT GOVE DOTO	
(510)4667801		viewed this statement and to the best of my kn	lawledge the information contain
(510) 4667801 herein and in any attached schodulos	is true and complete. I soknowled	viewed this statement and to the best of my kn	
(510) 4667801 herein and in any attached schodulos	is true and complete. I soknowled	viewed this statement and to the best of my ke ge this is a public documonit.	

SCHEDULE C Income, Loans, & Business

Positions

(Other than Gifts and Travel Payments)

CAL	IFORN	IA FC	RM	700)
FAR	POLITICA			OMMISSIO	
Nam	100				
		-			
					-

1 INCOME REPEIVED	► 4 INCOME RECEIVED	
	NAME OF SOURCE OF INCOME	
Global Academic Adventures		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
248 3rd St #403		
BUSINESS ACTIVITY # ANY. OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
Academic Research Organizer/Conductor		
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION	
Owner		
GROSS INCOME RECEIVED No Income - Business Poston Only	GROSS INCOME RECEIVED No Incomé - Sustmers Position On	
\$500 - \$1,000 S1,001 \$10,000	S500 - \$1,000 S1,001 - \$10,000	
S10.001 - \$100,000	S10,001 - \$100,000 OVER \$100,000	
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
Salary Spoulo's or regislassed damastic pertner's income 9 or set employed use Schedule A 2.)	Setary Social's or registered denestic partner's incurse (For add-emptysed use Schedule A.2.)	
Partnership (Loss than 10% ownership. For 10% or greater use Schedule A.2.)	Pathership (Less than 10% centership. Fix 10% or greater use Schedule 4-2.)	
_ Sae of	C Sala of	
Real property, car, see, etc.)	What property say trast, and	
	Loan repayment	
Gommikelan ar	Commission or Runtal instants, 64 water source of \$10,000 or more	
(Sistere)	(Desorte)	
Coner	C) Other	
Distance 2 LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING E	(Deporte)	

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 (Monthe/Years)
ADDRESS (Bushess Address Acceptable)	% [] None	
	SECURITY FOR LOAN	
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Pers	Grisil resolutions
	Real Property	
HIGHEST BALANCE DURING REPORTING PERIOD		Strawl waterwat
5000 - \$1,000		
\$1,001 \$10,000		City
\$10.001 - \$100.000	Guarantor	
CVER \$100,000		
	_	(Describe)
Comments:		
Contanorida,		and the second

###C Form 190 - Schudule C (2015/2026) advice@#pp6.63.gov + 866-275-5772 + www.fppr.cs.gov Page 13