NAME OF FILER (LAST) (FIRST) (MIDDLE)
Raburn, Robert

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
San Francisco Bay Area Rapid Transit District
Division, Board, Department, District, if applicable
Board of Directors - BART Board
Your Position
Member, Board of Directors

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
San Francisco, Alameda, Contra Costa, Placer, Sacramento, Santa Clara, Solano, Yolo

☐ Multi-County

☐ City of

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

County of

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)

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

☐ 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: 3

Schedules attached

☐ Schedule A-1 - Investments – schedule attached

☐ Schedule A-2 - Investments – schedule attached

☐ Schedule A-3 - Real Property – schedule attached

☐ Schedule C - Income, Loans, & Business Positions – schedule attached

☐ Schedule D - Income – Gifts – schedule attached

☐ Schedule E - Income – Gifts – Travel Payments – schedule attached

☐ None - No reportable interests on any schedule

5. Verification

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 03/17/2022
(month, day, year)

Signature Robert Raburn
(If the originally signed paper statement with your filing official.)
* This table lists all positions including the primary position listed in the Office, Agency, or Court section of the Cover Page.

<table>
<thead>
<tr>
<th>Agency</th>
<th>Div/Board/Dept/District</th>
<th>Position</th>
<th>Type of Statement</th>
<th>SAN #</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Francisco Bay Area Rapid Transit District</td>
<td>Board of Directors - BART Board</td>
<td>Member, Board of Directors</td>
<td>Annual 1/1/2021 - 12/31/2021</td>
<td>122100409-NFH-0409</td>
</tr>
<tr>
<td>Capitol Corridor Joint Powers Authority</td>
<td></td>
<td>Member of Governing Body CCJPA</td>
<td>Annual 1/1/2021 - 12/31/2021</td>
<td></td>
</tr>
</tbody>
</table>
SCHEDULE A-2
Investments, Income, and Assets of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

1. BUSINESS ENTITY OR TRUST

Robert and Patricia Raburn 2000 Family Trust
Name
Oakland, CA 94612
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
☐ $0 - $1,999
☒ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000
IF APPLICABLE, LIST DATE:
/ / / /
ACQUIRED DISPOSED

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
☒ $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
Z units frm rental property (Gort/Kenne)

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
Oakland, CA 94610

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☒ $100,001 - $1,000,000
☐ Over $1,000,000

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:

FAIR MARKET VALUE
☐ $0 - $1,999
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

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
☐ $10,001 - $100,000
☒ $100,001 - $1,000,000
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None or ☒ Names listed below

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