

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
A PUBLIC DOCUMENT

Filed Date: 02/16/2021 02:17 PM  
SAN: FPPC

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Martin Kelsey

1. Office, Agency, or Court

Agency Name (Do not use acronyms)  
California Institute of Regenerative Medicine  
Division, Board, Department, District, if applicable Your Position  
Alternate Board Member

► 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 \_\_\_\_\_  Other \_\_\_\_\_

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

- Annual: The period covered is January 1, 2020, through December 31, 2020.  Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
(Check one circle.)
- or- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_\_, through December 31, 2020.  The period covered is January 1, 2020, through the date of leaving office.
- Assuming Office: Date assumed 01 / 08 / 2021  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)  
1999 Harrison St Oakland CA 94612-3520  
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
( 510 ) 340-9114

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 02/16/2021 02:17 PM Signature Electronic Submission  
(month, day, year) (File the originally signed paper statement with your filing official.)

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
 (Other than Gifts and Travel Payments)

**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
McKnight Foundation

ADDRESS (Business Address Acceptable)  
710 South 2nd street #400, Minneapolis, MN 55401

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 \_\_\_\_\_

YOUR BUSINESS POSITION  
Advisory Board member

GROSS INCOME RECEIVED     No Income - Business Position Only  
 \$500 - \$1,000             \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 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.)

Sale of \_\_\_\_\_  
 (Real property, car, boat, etc.)

Loan repayment

Commission or     Rental Income, list each source of \$10,000 or more  
 \_\_\_\_\_  
 (Describe)

Other \_\_\_\_\_  
 (Describe)

NAME OF SOURCE OF INCOME  
Macmillan Publishers

ADDRESS (Business Address Acceptable)  
175 Fifth Ave, New York, NY 10010

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 \_\_\_\_\_

YOUR BUSINESS POSITION  
co-author

GROSS INCOME RECEIVED     No Income - Business Position Only  
 \$500 - \$1,000             \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 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.)

Sale of \_\_\_\_\_  
 (Real property, car, boat, etc.)

Loan repayment

Commission or     Rental Income, list each source of \$10,000 or more  
 \_\_\_\_\_  
 (Describe)

Other Royalty payment  
 (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)
_____	_____ % <input type="checkbox"/> None	_____
ADDRESS (Business Address Acceptable) _____		
BUSINESS ACTIVITY, IF ANY, OF LENDER _____	SECURITY FOR LOAN	
	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
HIGHEST BALANCE DURING REPORTING PERIOD	<input type="checkbox"/> Real Property _____	_____
<input type="checkbox"/> \$500 - \$1,000	_____	Street address
<input type="checkbox"/> \$1,001 - \$10,000		_____
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> Guarantor _____	City
<input type="checkbox"/> OVER \$100,000	<input type="checkbox"/> Other _____	_____
		(Describe)

Comments: \_\_\_\_\_

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
Burroughs Wellcome Fund  
ADDRESS (*Business Address Acceptable*)  
21 T. W. Alexander Drive, Triangle Park, NC 17709  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Philanthropic Foundation  
YOUR BUSINESS POSITION  
Chair of Advisory Board  
GROSS INCOME RECEIVED  No Income - Business Position Only  
 \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000  
CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 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.)  
 Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)  
 Loan repayment  
 Commission or  Rental Income, list each source of \$10,000 or more  
\_\_\_\_\_  
(Describe)  
 Other \_\_\_\_\_  
(Describe)

NAME OF SOURCE OF INCOME  
Charles R. Drew University of Medicine and Science  
ADDRESS (*Business Address Acceptable*)  
1731 E 120th St, Los Angeles, CA 90059  
BUSINESS ACTIVITY, IF ANY, OF SOURCE  
\_\_\_\_\_  
YOUR BUSINESS POSITION  
Board of Trustee member  
GROSS INCOME RECEIVED  No Income - Business Position Only  
 \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000  
CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 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.)  
 Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)  
 Loan repayment  
 Commission or  Rental Income, list each source of \$10,000 or more  
\_\_\_\_\_  
(Describe)  
 Other No income received for this position  
(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\* \_\_\_\_\_  
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 \_\_\_\_\_ TERM (Months/Years) \_\_\_\_\_  
\_\_\_\_\_%  None  
SECURITY FOR LOAN  
 None  Personal residence  
 Real Property \_\_\_\_\_  
\_\_\_\_\_  
Street address  
\_\_\_\_\_  
City  
 Guarantor \_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

**Comments:** \_\_\_\_\_

# SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
Kelsey Martin

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
<p>NAME OF SOURCE OF INCOME <u>National Academy of Medicine</u></p> <p>ADDRESS <i>(Business Address Acceptable)</i> <u>500 5th Street NW Washington, DC 20001</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <hr/> <p>YOUR BUSINESS POSITION <u>Council Member</u></p> <p>GROSS INCOME RECEIVED    <input checked="" type="checkbox"/> No Income - Business Position Only</p> <p><input type="checkbox"/> \$500 - \$1,000                  <input type="checkbox"/> \$1,001 - \$10,000</p> <p><input type="checkbox"/> \$10,001 - \$100,000        <input type="checkbox"/> OVER \$100,000</p> <p>CONSIDERATION FOR WHICH INCOME WAS RECEIVED</p> <p><input type="checkbox"/> Salary    <input type="checkbox"/> Spouse's or registered domestic partner's income <i>(For self-employed use Schedule A-2.)</i></p> <p><input type="checkbox"/> Partnership <i>(Less than 10% ownership. For 10% or greater use Schedule A-2.)</i></p> <p><input type="checkbox"/> Sale of _____ <i>(Real property, car, boat, etc.)</i></p> <p><input type="checkbox"/> Loan repayment</p> <p><input type="checkbox"/> Commission or    <input type="checkbox"/> Rental Income, <i>list each source of \$10,000 or more</i></p> <hr/> <p><input checked="" type="checkbox"/> Other <u>No income received for this position</u> <i>(Describe)</i></p>	<p>NAME OF SOURCE OF INCOME</p> <hr/> <p>ADDRESS <i>(Business Address Acceptable)</i></p> <hr/> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <hr/> <p>YOUR BUSINESS POSITION</p> <hr/> <p>GROSS INCOME RECEIVED    <input type="checkbox"/> No Income - Business Position Only</p> <p><input type="checkbox"/> \$500 - \$1,000                  <input type="checkbox"/> \$1,001 - \$10,000</p> <p><input type="checkbox"/> \$10,001 - \$100,000        <input type="checkbox"/> OVER \$100,000</p> <p>CONSIDERATION FOR WHICH INCOME WAS RECEIVED</p> <p><input type="checkbox"/> Salary    <input type="checkbox"/> Spouse's or registered domestic partner's income <i>(For self-employed use Schedule A-2.)</i></p> <p><input type="checkbox"/> Partnership <i>(Less than 10% ownership. For 10% or greater use Schedule A-2.)</i></p> <p><input type="checkbox"/> Sale of _____ <i>(Real property, car, boat, etc.)</i></p> <p><input type="checkbox"/> Loan repayment</p> <p><input type="checkbox"/> Commission or    <input type="checkbox"/> Rental Income, <i>list each source of \$10,000 or more</i></p> <hr/> <p><input type="checkbox"/> Other _____ <i>(Describe)</i></p>

**▶ 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:

<p>NAME OF LENDER* _____</p> <p>ADDRESS <i>(Business Address Acceptable)</i> _____</p> <p>BUSINESS ACTIVITY, IF ANY, OF LENDER _____</p> <p>HIGHEST BALANCE DURING REPORTING PERIOD</p> <p><input type="checkbox"/> \$500 - \$1,000</p> <p><input type="checkbox"/> \$1,001 - \$10,000</p> <p><input type="checkbox"/> \$10,001 - \$100,000</p> <p><input type="checkbox"/> OVER \$100,000</p>	<p>INTEREST RATE                                  TERM (Months/Years)</p> <p>_____ %    <input type="checkbox"/> None                                  _____</p> <p>SECURITY FOR LOAN</p> <p><input type="checkbox"/> None                                  <input type="checkbox"/> Personal residence</p> <p><input type="checkbox"/> Real Property _____</p> <p style="text-align: right; margin-left: 400px;"><i>Street address</i></p> <p style="text-align: right; margin-left: 400px;">_____</p> <p style="text-align: right; margin-left: 400px;"><i>City</i></p> <p><input type="checkbox"/> Guarantor _____</p> <p><input type="checkbox"/> Other _____</p> <p style="text-align: right; margin-left: 400px;"><i>(Describe)</i></p>
--	---

**Comments:** \_\_\_\_\_