

# Limited Liability Company (LLC) Statement of Members

(Government Code Section 84109)

Type or Print in Ink.

<b>Amendment</b> <input type="checkbox"/> Check box if an Amendment  11 / 01 / 2022 # _____ Date qualification threshold met (Month, Day, Year)
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Date Stamp
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<b>CALIFORNIA FORM</b>
For Official Use Only

## 1. LLC Information

LEGAL NAME OF LIMITED LIABILITY COMPANY: San Francisco Baseball Associates, LLC	NAME OF RESPONSIBLE OFFICER OR PRINCIPAL OFFICER: Jack Bair	PRINCIPAL/RESPONSIBLE OFFICER PHONE #: 415-972-2000	PRINCIPAL/RESPONSIBLE OFFICER EMAIL: SFBA@deaneandcompany.com
LLC STREET ADDRESS: 24 Willie Mays Plaza	CITY: San Francisco	STATE: CA	ZIP CODE: 94107
LLC MAILING ADDRESS (IF DIFFERENT):	CITY:	STATE:	ZIP CODE:
NAME OF COMMITTEE: San Francisco Baseball Associates, LLC	COMMITTEE ID: 1415544	COMMITTEE PHONE NUMBER: 415-972-2000	COMMITTEE EMAIL ADDRESS: SFBA@deaneandcompany.com
COMMITTEE STREET ADDRESS: 24 Willie Mays Plaza	CITY: San Francisco	STATE: CA	ZIP CODE: 94107
COMMITTEE MAILING ADDRESS (IF DIFFERENT):	CITY:	STATE:	ZIP CODE:

## 2. Members (If any members are other LLCs, further disclosure is required in Part 3.)

FULL NAME	MEMBERSHIP TYPE	DATE(S) OF CAPITAL CONTRIBUTION <small>(ONLY COMPLETE IF MEMBER HAS MET CAPITAL CONTRIBUTION THRESHOLD)</small>	CUMULATIVE CAPITAL CONTRIBUTIONS TO LLC	PERCENTAGE OWNERSHIP INTEREST
Bay Ball, Inc.	<input checked="" type="checkbox"/> MEMBERSHIP 10% OR GREATER <input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE			19.8%
	<input type="checkbox"/> MEMBERSHIP 10% OR GREATER <input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE			
	<input type="checkbox"/> MEMBERSHIP 10% OR GREATER <input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE			
	<input type="checkbox"/> MEMBERSHIP 10% OR GREATER <input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE			

## 3. Names of Member LLCs Listed in Part 2

NAME OF LLC LISTED IN PART 2	FULL NAMES OF MEMBERS

## 4. 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 in it is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 11/01/2022  
DATE

By Jack Bair  
SIGNATURE

Attach additional information on appropriately labeled continuation sheets.