



10/23/2024

The Honorable City Council
c/o Holly Wolcott, City Clerk
200 North Spring Street
City Hall – 3rd Floor
Los Angeles CA 90012

**Re: Council File Number 24-1194
Appointment of James P. McDonnell as
Chief of Police of the Los Angeles Police Department**

FOR COUNCIL CONSIDERATION

Dear Councilmembers:

James P. McDonnell was appointed by the Mayor's Office as Chief of Police of the Los Angeles Police Department on October 4, 2024. The Ethics Commission received notice of the appointment from the Mayor's Office on October 4, 2024. The Ethics Commission notified Mr. McDonnell on October 4, 2024 of their filing requirement and received Mr. McDonnell's completed pre-confirmation financial disclosure statement on October 22, 2024. In compliance with Los Angeles Municipal Code § 49.5.10, a copy of Mr. McDonnell's financial disclosure statement is enclosed.

If you have questions, please feel free to contact me at (213) 978-1960.

Sincerely,

A handwritten signature in black ink that reads "Carlos Patzi". The signature is written in a cursive, flowing style.

Carlos Patzi
Ethics Program Analyst

Enclosures:

Form 700

Form 60

cc: Mayor Karen Bass

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Date Initial Filing Received
Filing Official Use Only

Filed Date: 10/22/2024 05:28 PM
SAN: 011300006-STH-0006

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
McDonnell James

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Police

Division, Board, Department, District, if applicable

Your Position

Chief of Police

► 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 Los Angeles

☐ Other

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

☐ **Annual:** The period covered is January 1, 2023, through
December 31, 2023.

☐ **Leaving Office:** Date Left ____/____/_____
(Check one circle.)

-or-

The period covered is ____/____/_____, through
December 31, 2023.

☐ The period covered is January 1, 2023, through the date
of leaving office.

-or-

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

☐ **Assuming Office:** Date assumed ____/____/____

☒ **Candidate:** Date of Election 10/04/2024 and office sought, if different than Part 1:

4. Schedule Summary (required)

► Total number of pages including this cover page: 8

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)

DAYTIME TELEPHONE NUMBER

EMAIL ADDRESS

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 10/22/2024 05:28 PM
(month, day, year)

Signature
(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 James McDonnell

1. BUSINESS ENTITY OR TRUST	
McDonnell Strategies Group, Inc.	
Name	
Address (Business Address Acceptable)	
Check one <input type="checkbox"/> Trust, go to 2 <input checked="" type="checkbox"/> Business Entity, complete the box, then go to 2	
GENERAL DESCRIPTION OF THIS BUSINESS Public Safety Consulting Business	
FAIR MARKET VALUE <input type="checkbox"/> \$0 - \$1,999 <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: ____/____/____ ____/____/____ ACQUIRED DISPOSED
NATURE OF INVESTMENT <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input checked="" type="checkbox"/> S Corp Other _____	
YOUR BUSINESS POSITION Principal	

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	
<input type="checkbox"/> \$0 - \$499 <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> 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.)	
<input type="checkbox"/> None or <input checked="" type="checkbox"/> Names listed below 3Plus Logistics, Altumint, CentralSquare Technologies, FirstNet, IACP, RaySecur, TPIRC, VirTra.	

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	
Check one box: <input checked="" type="checkbox"/> INVESTMENT <input type="checkbox"/> REAL PROPERTY	
SEE ATTACHED	
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property SEE ATTACHED	
Description of Business Activity or City or Other Precise Location of Real Property	
FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: ____/____/____ ____/____/____ ACQUIRED DISPOSED
NATURE OF INTEREST <input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership <input type="checkbox"/> Leasehold Yrs. remaining _____ <input checked="" type="checkbox"/> Other SEE ATTACHED	
<input checked="" type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	

1. BUSINESS ENTITY OR TRUST	
Name	
Address (Business Address Acceptable)	
Check one <input type="checkbox"/> Trust, go to 2 <input type="checkbox"/> Business Entity, complete the box, then go to 2	
GENERAL DESCRIPTION OF THIS BUSINESS	
FAIR MARKET VALUE <input type="checkbox"/> \$0 - \$1,999 <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: ____/____/____ ____/____/____ ACQUIRED DISPOSED
NATURE OF INVESTMENT <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other _____	
YOUR BUSINESS POSITION _____	

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	
<input type="checkbox"/> \$0 - \$499 <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> 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.)	
<input type="checkbox"/> None or <input type="checkbox"/> Names listed below	

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	
Check one box: <input type="checkbox"/> INVESTMENT <input type="checkbox"/> 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 <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: ____/____/____ ____/____/____ ACQUIRED DISPOSED
NATURE OF INTEREST <input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership <input type="checkbox"/> Leasehold Yrs. remaining _____ <input type="checkbox"/> Other _____	
<input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached	

Comments: _____

SCHEDULE A-2

Attachment

CALIFORNIA FORM	700
FAIR POLITICAL PRACTICES COMMISSION	
Name	
James McDonnell	

BUSINESS ENTITY OR TRUST : McDonnell Strategies Group, Inc.

Names of Business Entities, if Investments, or Assessor's Parcel Numbers or Street Addresses of Real Properties
SEE ATTACHED
C3.ai - AI Software Company - Fair Market Value - \$10,001 - \$100,000 - Restricted Stock
VirTra - Virtual Reality Training - Fair Market Value - \$10,001 - \$100,000 - Restricted Stock
RaySecur - Mail Security Hardware - Fair Market Value - \$10,000 - \$100,000 - Stock Options
ESports Television - ESports Streaming TV - Fair Market Value - \$2,000 - \$10,000 - Convertible Note

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name <div style="text-align: right;">James McDonnell</div>

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <u>University of Southern California, Sol Price School of Public Policy</u>	NAME OF SOURCE OF INCOME <u>McDonnell Strategies Group, Inc.</u>
ADDRESS (Business Address Acceptable) [REDACTED]	ADDRESS (Business Address Acceptable) [REDACTED]
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Education</u>	BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Public Safety Consulting</u>
YOUR BUSINESS POSITION <u>Director, Safe Communities Institute</u>	YOUR BUSINESS POSITION <u>Principal</u>
GROSS INCOME RECEIVED <input type="checkbox"/> No Income - Business Position Only <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> No Income - Business Position Only <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input checked="" type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) <input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) <input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.) <input type="checkbox"/> Loan repayment <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe) <input type="checkbox"/> Other _____ (Describe)	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) <input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) <input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.) <input type="checkbox"/> Loan repayment <input type="checkbox"/> Commission or <input checked="" type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe) <input type="checkbox"/> Other _____ (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 <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	INTEREST RATE _____% <input type="checkbox"/> None SECURITY FOR LOAN <input type="checkbox"/> None <input type="checkbox"/> Personal residence <input type="checkbox"/> Real Property _____ Street address _____ City <input type="checkbox"/> Guarantor _____ <input type="checkbox"/> Other _____ (Describe)
---	--

Comments: _____

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name James McDonnell

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME TPIRC	NAME OF SOURCE OF INCOME VirTra
ADDRESS (Business Address Acceptable) [REDACTED]	ADDRESS (Business Address Acceptable) [REDACTED]
BUSINESS ACTIVITY, IF ANY, OF SOURCE Non-profit Research & Clinical Care Center	BUSINESS ACTIVITY, IF ANY, OF SOURCE Virtual Reality Public Safety Training
YOUR BUSINESS POSITION Board of Directors	YOUR BUSINESS POSITION Board of Directors
GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> No Income - Business Position Only <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> No Income - Business Position Only <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) <input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) <input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.) <input type="checkbox"/> Loan repayment <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe) <input checked="" type="checkbox"/> Other Board Service _____ (Describe)	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) <input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) <input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.) <input type="checkbox"/> Loan repayment <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe) <input checked="" type="checkbox"/> Other Board Service _____ (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)	SECURITY FOR LOAN	
_____	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
BUSINESS ACTIVITY, IF ANY, OF LENDER	<input type="checkbox"/> Real Property _____	Street address
_____		City
HIGHEST BALANCE DURING REPORTING PERIOD	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> Other _____	(Describe)
<input type="checkbox"/> \$1,001 - \$10,000		
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> OVER \$100,000		

Comments: _____

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name James McDonnell

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <u>YMCA Metro</u>	NAME OF SOURCE OF INCOME <u>National Safety Council</u>
ADDRESS (Business Address Acceptable) <div style="background-color: black; height: 20px; width: 100%;"></div>	ADDRESS (Business Address Acceptable) <div style="background-color: black; height: 20px; width: 100%;"></div>
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Non-profit Community Benefit Organization</u>	BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Non-profit Safety Organization</u>
YOUR BUSINESS POSITION <u>Board of Directors</u>	YOUR BUSINESS POSITION <u>Speaker</u>
GROSS INCOME RECEIVED <input checked="" type="checkbox"/> No Income - Business Position Only <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> No Income - Business Position Only <input type="checkbox"/> \$500 - \$1,000 <input checked="" type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) <input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) <input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.) <input type="checkbox"/> Loan repayment <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe) <input checked="" type="checkbox"/> Other <u>No Income - Business Position Only</u> (Describe)	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) <input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) <input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.) <input type="checkbox"/> Loan repayment <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe) <input checked="" type="checkbox"/> Other <u>Honorarium & Expenses</u> (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) _____	SECURITY FOR LOAN	
BUSINESS ACTIVITY, IF ANY, OF LENDER _____	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
HIGHEST BALANCE DURING REPORTING PERIOD	<input type="checkbox"/> Real Property _____ Street address	
<input type="checkbox"/> \$500 - \$1,000	_____ City	
<input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> Other _____ (Describe)	
<input type="checkbox"/> OVER \$100,000		

Comments: _____

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

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name James McDonnell

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <u>Independent Cities Association</u>	NAME OF SOURCE OF INCOME _____
ADDRESS (Business Address Acceptable) _____	ADDRESS (Business Address Acceptable) _____
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Non-profit Municipalities Organization</u>	BUSINESS ACTIVITY, IF ANY, OF SOURCE _____
YOUR BUSINESS POSITION <u>Speaker</u>	YOUR BUSINESS POSITION _____
GROSS INCOME RECEIVED <input type="checkbox"/> No Income - Business Position Only <input type="checkbox"/> \$500 - \$1,000 <input checked="" type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> No Income - Business Position Only <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) <input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) <input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.) <input type="checkbox"/> Loan repayment <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe) <input checked="" type="checkbox"/> Other <u>Honorarium & Expenses</u> (Describe)	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) <input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) <input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.) <input type="checkbox"/> Loan repayment <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe) <input type="checkbox"/> Other _____ (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)	SECURITY FOR LOAN	
_____	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
BUSINESS ACTIVITY, IF ANY, OF LENDER	<input type="checkbox"/> Real Property _____	Street address
_____		City
HIGHEST BALANCE DURING REPORTING PERIOD	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> Other _____	(Describe)
<input type="checkbox"/> \$1,001 - \$10,000		
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> OVER \$100,000		

Comments: _____

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name <u>James McDonnell</u>

<div><p>▶ NAME OF SOURCE (Not an Acronym)</p><p><u>Warner Bros.</u></p><p>ADDRESS (Business Address Acceptable)</p><p><u>[REDACTED]</u></p><p>BUSINESS ACTIVITY, IF ANY, OF SOURCE</p><p><u>Entertainment</u></p><table><thead><tr><th>DATE (mm/dd/yy)</th><th>VALUE</th><th>DESCRIPTION OF GIFT(S)</th></tr></thead><tbody><tr><td><u>07 / 07 / 24</u></td><td><u>\$ 225</u></td><td><u>Dodgers Tickets</u></td></tr><tr><td><u> / / </u></td><td><u>\$</u></td><td><u> </u></td></tr><tr><td><u> / / </u></td><td><u>\$</u></td><td><u> </u></td></tr></tbody></table></div>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>07 / 07 / 24</u>	<u>\$ 225</u>	<u>Dodgers Tickets</u>	<u> / / </u>	<u>\$</u>	<u> </u>	<u> / / </u>	<u>\$</u>	<u> </u>	<div><p>▶ NAME OF SOURCE (Not an Acronym)</p><p> </p><p>ADDRESS (Business Address Acceptable)</p><p> </p><p>BUSINESS ACTIVITY, IF ANY, OF SOURCE</p><p> </p><table><thead><tr><th>DATE (mm/dd/yy)</th><th>VALUE</th><th>DESCRIPTION OF GIFT(S)</th></tr></thead><tbody><tr><td><u> / / </u></td><td><u>\$</u></td><td><u> </u></td></tr><tr><td><u> / / </u></td><td><u>\$</u></td><td><u> </u></td></tr><tr><td><u> / / </u></td><td><u>\$</u></td><td><u> </u></td></tr></tbody></table></div>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u> / / </u>	<u>\$</u>	<u> </u>	<u> / / </u>	<u>\$</u>	<u> </u>	<u> / / </u>	<u>\$</u>	<u> </u>
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
<u>07 / 07 / 24</u>	<u>\$ 225</u>	<u>Dodgers Tickets</u>																							
<u> / / </u>	<u>\$</u>	<u> </u>																							
<u> / / </u>	<u>\$</u>	<u> </u>																							
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
<u> / / </u>	<u>\$</u>	<u> </u>																							
<u> / / </u>	<u>\$</u>	<u> </u>																							
<u> / / </u>	<u>\$</u>	<u> </u>																							
<div><p>▶ NAME OF SOURCE (Not an Acronym)</p><p><u>Arnie Berghoff and Associates</u></p><p>ADDRESS (Business Address Acceptable)</p><p><u>[REDACTED]</u></p><p>BUSINESS ACTIVITY, IF ANY, OF SOURCE</p><p><u>Government & Public Affairs</u></p><table><thead><tr><th>DATE (mm/dd/yy)</th><th>VALUE</th><th>DESCRIPTION OF GIFT(S)</th></tr></thead><tbody><tr><td><u>07 / 19 / 24</u></td><td><u>\$ 124</u></td><td><u>Dodgers Ticket</u></td></tr><tr><td><u> / / </u></td><td><u>\$</u></td><td><u> </u></td></tr><tr><td><u> / / </u></td><td><u>\$</u></td><td><u> </u></td></tr></tbody></table></div>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>07 / 19 / 24</u>	<u>\$ 124</u>	<u>Dodgers Ticket</u>	<u> / / </u>	<u>\$</u>	<u> </u>	<u> / / </u>	<u>\$</u>	<u> </u>	<div><p>▶ NAME OF SOURCE (Not an Acronym)</p><p> </p><p>ADDRESS (Business Address Acceptable)</p><p> </p><p>BUSINESS ACTIVITY, IF ANY, OF SOURCE</p><p> </p><table><thead><tr><th>DATE (mm/dd/yy)</th><th>VALUE</th><th>DESCRIPTION OF GIFT(S)</th></tr></thead><tbody><tr><td><u> / / </u></td><td><u>\$</u></td><td><u> </u></td></tr><tr><td><u> / / </u></td><td><u>\$</u></td><td><u> </u></td></tr><tr><td><u> / / </u></td><td><u>\$</u></td><td><u> </u></td></tr></tbody></table></div>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u> / / </u>	<u>\$</u>	<u> </u>	<u> / / </u>	<u>\$</u>	<u> </u>	<u> / / </u>	<u>\$</u>	<u> </u>
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
<u>07 / 19 / 24</u>	<u>\$ 124</u>	<u>Dodgers Ticket</u>																							
<u> / / </u>	<u>\$</u>	<u> </u>																							
<u> / / </u>	<u>\$</u>	<u> </u>																							
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
<u> / / </u>	<u>\$</u>	<u> </u>																							
<u> / / </u>	<u>\$</u>	<u> </u>																							
<u> / / </u>	<u>\$</u>	<u> </u>																							
<div><p>▶ NAME OF SOURCE (Not an Acronym)</p><p> </p><p>ADDRESS (Business Address Acceptable)</p><p> </p><p>BUSINESS ACTIVITY, IF ANY, OF SOURCE</p><p> </p><table><thead><tr><th>DATE (mm/dd/yy)</th><th>VALUE</th><th>DESCRIPTION OF GIFT(S)</th></tr></thead><tbody><tr><td><u> / / </u></td><td><u>\$</u></td><td><u> </u></td></tr><tr><td><u> / / </u></td><td><u>\$</u></td><td><u> </u></td></tr><tr><td><u> / / </u></td><td><u>\$</u></td><td><u> </u></td></tr></tbody></table></div>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u> / / </u>	<u>\$</u>	<u> </u>	<u> / / </u>	<u>\$</u>	<u> </u>	<u> / / </u>	<u>\$</u>	<u> </u>	<div><p>▶ NAME OF SOURCE (Not an Acronym)</p><p> </p><p>ADDRESS (Business Address Acceptable)</p><p> </p><p>BUSINESS ACTIVITY, IF ANY, OF SOURCE</p><p> </p><table><thead><tr><th>DATE (mm/dd/yy)</th><th>VALUE</th><th>DESCRIPTION OF GIFT(S)</th></tr></thead><tbody><tr><td><u> / / </u></td><td><u>\$</u></td><td><u> </u></td></tr><tr><td><u> / / </u></td><td><u>\$</u></td><td><u> </u></td></tr><tr><td><u> / / </u></td><td><u>\$</u></td><td><u> </u></td></tr></tbody></table></div>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u> / / </u>	<u>\$</u>	<u> </u>	<u> / / </u>	<u>\$</u>	<u> </u>	<u> / / </u>	<u>\$</u>	<u> </u>
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
<u> / / </u>	<u>\$</u>	<u> </u>																							
<u> / / </u>	<u>\$</u>	<u> </u>																							
<u> / / </u>	<u>\$</u>	<u> </u>																							
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
<u> / / </u>	<u>\$</u>	<u> </u>																							
<u> / / </u>	<u>\$</u>	<u> </u>																							
<u> / / </u>	<u>\$</u>	<u> </u>																							

Comments: _____



Ethics Commission
200 N Spring Street
City Hall — 24th Floor
Los Angeles, CA 90012
(213) 978-1960
ethics.lacity.org

Restricted Source Financial Disclosure Statement Form 60

Elected City officials, general managers and chief administrative officers of City agencies, members of City boards and commissions, and individuals nominated to positions subject to City Council approval must file this form in conjunction with the state Form 700. Please refer to the attached instructions for additional information.

☒ Original Filing ☐ Amended Filing (original filed on ____/____/20____)

Total Pages: 5

Name: **McDonnell, James**
(Last, First, Middle)

Agency: **Police**

Position: **Chief of Police**

Phone: [REDACTED]

Email: [REDACTED]

Type of Statement: ☒ Pre-confirmation Date of nomination: 10 / 04 / 2024
 ☐ Assuming Office First day in position: ____ / ____ / 20____
 ☐ Annual ____ / ____ / 20____ through December 31, 20____
 ☐ Leaving Office Last day in office: ____ / ____ / 20____

I had the following interests associated with restricted sources during this reporting period:

☐ **1. REAL PROPERTY — section attached.**
Interests in real property leased from or to, co-owned by, purchased from, or sold to a restricted source.

☒ **2. INVESTMENTS — section attached.**
Investments (other than real property) co-owned by, purchased from, or sold to a restricted source.

☒ **3. INCOME — section attached.**
Income received from a restricted source.

☒ **4. GIFTS — section attached.**
Gifts, cumulatively valued at \$50 or more, received from a restricted source.

☒ **5. BOARD POSITIONS — section attached.**
Positions held on the board of a restricted source.

- Or -

☐ **6. NO INTERESTS**
I had no interests in real property, investments, income, gifts, or board positions associated with restricted sources during this reporting period.

Certification

I declare under penalty of perjury under the laws of the City of Los Angeles and the state of California that I have read the instructions for this form and the information I have provided is true and complete.

10/22/2024 05:33 PM

Date

[REDACTED]
Signature



Ethics Commission
200 N Spring Street
City Hall — 24th Floor
Los Angeles, CA 90012
(213) 978-1960
ethics.lacity.org

Form 60

Section 2 -- Investments

Name: **McDonnell, James**
(Last, First, Middle)

The following investments (other than real property) were co-owned by, purchased from, or sold to a restricted source.

Name of restricted source:

C3.ai

Address of restricted source:

Name of investment:

C3.ai

Nature of investment:

- ☐ Stock ☐ Partnership
☒ Other Restricted Stock

Investment co-owned/purchased/sold by:

- ☒ Me ☐ My spouse/registered domestic partner
☐ My dependent child

Investment was:

- ☒ Co-owned ☐ Purchased (date: ____ / ____ / 20____)
☐ Sold (date: ____ / ____ / 20____)

Value of investment:

- ☐ \$2,000—\$10,000 ☒ \$10,001—\$100,000
☐ \$100,001—\$1,000,000 ☐ Over \$1,000,000

Name of restricted source:

VirTra

Address of restricted source:

Name of investment:

VirTra

Nature of investment:

- ☐ Stock ☐ Partnership
☒ Other Restricted Stock

Investment co-owned/purchased/sold by:

- ☒ Me ☐ My spouse/registered domestic partner
☐ My dependent child

Investment was:

- ☒ Co-owned ☐ Purchased (date: ____ / ____ / 20____)
☐ Sold (date: ____ / ____ / 20____)

Value of investment:

- ☐ \$2,000—\$10,000 ☒ \$10,001—\$100,000
☐ \$100,001—\$1,000,000 ☐ Over \$1,000,000

Name of restricted source:

Address of restricted source:

Name of investment:

Nature of investment:

- ☐ Stock ☐ Partnership
☐ Other _____

Investment co-owned/purchased/sold by:

- ☐ Me ☐ My spouse/registered domestic partner
☐ My dependent child

Investment was:

- ☐ Co-owned ☐ Purchased (date: ____ / ____ / 20____)
☐ Sold (date: ____ / ____ / 20____)

Value of investment:

- ☐ \$2,000—\$10,000 ☐ \$10,001—\$100,000
☐ \$100,001—\$1,000,000 ☐ Over \$1,000,000

Name of restricted source:

Address of restricted source:

Name of investment:

Nature of investment:

- ☐ Stock ☐ Partnership
☐ Other _____

Investment co-owned/purchased/sold by:

- ☐ Me ☐ My spouse/registered domestic partner
☐ My dependent child

Investment was:

- ☐ Co-owned ☐ Purchased (date: ____ / ____ / 20____)
☐ Sold (date: ____ / ____ / 20____)

Value of investment:

- ☐ \$2,000—\$10,000 ☐ \$10,001—\$100,000
☐ \$100,001—\$1,000,000 ☐ Over \$1,000,000



Ethics Commission
200 N Spring Street
City Hall — 24th Floor
Los Angeles, CA 90012
(213) 978-1960
ethics.lacity.org

Form 60

Section 3 -- Income

Name: McDonnell, James
(Last, First, Middle)

The following income was received from a restricted source.

Name of restricted source:
University of Southern California

Address of restricted source:
[REDACTED]

Business activity of restricted source:
Education

Position title:
Director, Safe Communities Institute

Income received by:
☒ Me ☐ My spouse/registered domestic partner
☐ My dependent child

Value of income:
☐ \$500—\$1,000 ☐ \$1,001—\$10,000
☒ \$10,001—\$100,000 ☐ Over \$100,000

Income was:
☒ Salary/Commission ☐ Loan repayment
☐ Rental income ☐ Sale of _____
(e.g., car, boat, etc.)
☐ Other: _____

Name of restricted source:

Address of restricted source:

Business activity of restricted source:

Position title:

Income received by:
☐ Me ☐ My spouse/registered domestic partner
☐ My dependent child

Value of income:
☐ \$500—\$1,000 ☐ \$1,001—\$10,000
☐ \$10,001—\$100,000 ☐ Over \$100,000

Income was:
☐ Salary/Commission ☐ Loan repayment
☐ Rental income ☐ Sale of _____
(e.g., car, boat, etc.)
☐ Other: _____

Name of restricted source:

Address of restricted source:

Business activity of restricted source:

Position title:

Income received by:
☐ Me ☐ My spouse/registered domestic partner
☐ My dependent child

Value of income:
☐ \$500—\$1,000 ☐ \$1,001—\$10,000
☐ \$10,001—\$100,000 ☐ Over \$100,000

Income was:
☐ Salary/Commission ☐ Loan repayment
☐ Rental income ☐ Sale of _____
(e.g., car, boat, etc.)
☐ Other: _____

Name of restricted source:

Address of restricted source:

Business activity of restricted source:

Position title:

Income received by:
☐ Me ☐ My spouse/registered domestic partner
☐ My dependent child

Value of income:
☐ \$500—\$1,000 ☐ \$1,001—\$10,000
☐ \$10,001—\$100,000 ☐ Over \$100,000

Income was:
☐ Salary/Commission ☐ Loan repayment
☐ Rental income ☐ Sale of _____
(e.g., car, boat, etc.)
☐ Other: _____



Ethics Commission
200 N Spring Street
City Hall — 24th Floor
Los Angeles, CA 90012
(213) 978-1960
ethics.lacity.org

Form 60

Section 4 -- Gifts

Name: McDonnell, James
(Last, First, Middle)

The following gifts cumulatively valued at \$50 or more were received from a restricted source.

Name of restricted source:
Warner Bros. Entertainment

Address of restricted source:
[REDACTED]

Business activity of restricted source:
Entertainment

Gift(s) received by:

☒ Me ☐ My spouse/registered domestic partner
☐ My dependent child

Date received: Value: Description of gift(s):

07 / 07 / 20 24 \$ 225 Dodger Tickets

 / / 20 \$

 / / 20 \$

 / / 20 \$

Name of restricted source:
Arnie Berghoff & Associates

Address of restricted source:
[REDACTED]

Business activity of restricted source:
Government & Public Affairs

Gift(s) received by:

☒ Me ☐ My spouse/registered domestic partner
☐ My dependent child

Date received: Value: Description of gift(s):

07 / 19 / 20 24 \$ 124 Dodger Tickets

 / / 20 \$

 / / 20 \$

 / / 20 \$

Name of restricted source:

Address of restricted source:

Business activity of restricted source:

Gift(s) received by:

☐ Me ☐ My spouse/registered domestic partner
☐ My dependent child

Date received: Value: Description of gift(s):

 / / 20 \$

 / / 20 \$

 / / 20 \$

 / / 20 \$

Name of restricted source:

Address of restricted source:

Business activity of restricted source:

Gift(s) received by:

☐ Me ☐ My spouse/registered domestic partner
☐ My dependent child

Date received: Value: Description of gift(s):

 / / 20 \$

 / / 20 \$

 / / 20 \$

 / / 20 \$



Ethics Commission
200 N Spring Street
City Hall — 24th Floor
Los Angeles, CA 90012
(213) 978-1960
ethics.lacity.org

Form 60

Section 5 -- Board Positions

Name: **McDonnell, James**
(Last, First, Middle)

The following positions were held on the board of a restricted source.

Name of restricted source:

VirTra

Address of restricted source:

[REDACTED]

Position Title:

Board Member

Position held by:

☒ Me ☐ My spouse/registered domestic partner
☐ My dependent child

Name of restricted source:

YMCA

Address of restricted source:

[REDACTED]

Position Title:

Board Member

Position held by:

☒ Me ☐ My spouse/registered domestic partner
☐ My dependent child

Name of restricted source:

Address of restricted source:

Position Title:

Position held by:

☐ Me ☐ My spouse/registered domestic partner
☐ My dependent child

Name of restricted source:

Address of restricted source:

Position Title:

Position held by:

☐ Me ☐ My spouse/registered domestic partner
☐ My dependent child

Name of restricted source:

Address of restricted source:

Position Title:

Position held by:

☐ Me ☐ My spouse/registered domestic partner
☐ My dependent child

Name of restricted source:

Address of restricted source:

Position Title:

Position held by:

☐ Me ☐ My spouse/registered domestic partner
☐ My dependent child