



5/19/2025

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 11-0452-S12  
Appointment of Tim O'Connor as the  
Executive Director of the Office of Public Accountability**

***FOR COUNCIL CONSIDERATION***

Dear Councilmembers:

Tim O'Connor was appointed by the Citizen's Committee for the Selection of the Executive Director as the Executive Director of the Office of Public Accountability on May 16, 2025. The Ethics Commission received notice of the appointment on May 19, 2025. The Ethics Commission notified Mr. O'Connor on May 19, 2025 of their filing requirement and received Mr. O'Connor's pre-confirmation financial disclosure statement on May 19, 2025. In compliance with Los Angeles Municipal Code § 49.5.10, a copy of Mr. O'Connor'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".

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: 05/19/2025 02:14 PM  
SAN: 011300006-STH-0006

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
O'Connor Tim

**1. Office, Agency, or Court**

Agency Name (Do not use acronyms)

Office of Public Accountability

Division, Board, Department, District, if applicable

Your Position

Executive Director

► 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, 2024, through  
December 31, 2024.

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

-or-

The period covered is / / , through  
December 31, 2024.

☐ The period covered is January 1, 2024, through the date of  
leaving office.

-or-

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

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

☒ **Candidate:** Date of Election 05/16/2025 and office sought, if different than Part 1:

**4. Schedule Summary (required)**

► 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)

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 05/19/2025 02:14 PM  
(month, day, year)

Signature  
(File the originally signed paper statement with your filing official.)

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

Name

Tim O'Connor

► NAME OF BUSINESS ENTITY

Advanced Micro Devices

GENERAL DESCRIPTION OF THIS BUSINESS

Technology

FAIR MARKET VALUE

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

NATURE OF INVESTMENT

- ☒ Stock ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

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

NATURE OF INVESTMENT

- ☐ Stock ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

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

NATURE OF INVESTMENT

- ☐ Stock ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

Pfizer Inc

GENERAL DESCRIPTION OF THIS BUSINESS

Pharmaceutical

FAIR MARKET VALUE

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

NATURE OF INVESTMENT

- ☒ Stock ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

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ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

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☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
ACQUIRED DISPOSED

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

## Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

Tim O'Connor

## ► 1. INCOME RECEIVED

Deloitte Consulting LLP

\_\_\_\_\_

## Management Consulting

## Specialist Leader

☐ \$1,001 - \$10,000☒ OVER \$100,000

☐ Other \_\_\_\_\_  
(Describe)

► 1. INCOME RECEIVED

## Lowercase Capital Management

\_\_\_\_\_

## Venture Capital

## Partner

☐ \$1,001 - \$10,000☒ OVER \$100,000

☐ 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:

☐ OVER \$100,000

☐ Other \_\_\_\_\_  
(Describe)

Comments:

SCHEDULE D

Income – Gifts

<div>▶ NAME OF SOURCE (Not an Acronym)</div> <div>Robert Rosenheck</div> <div>ADDRESS (Business Address Acceptable)</div> <div></div> <div>BUSINESS ACTIVITY, IF ANY, OF SOURCE</div> <div>Philanthropy</div> <table> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> <tr> <td>04 / 02 / 25</td> <td>\$ 500</td> <td>Seat at table for Fundraising Gala</td> </tr> <tr> <td>____/____/____</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>____/____/____</td> <td>\$ _____</td> <td>_____</td> </tr> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	04 / 02 / 25	\$ 500	Seat at table for Fundraising Gala	____/____/____	\$ _____	_____	____/____/____	\$ _____	_____	<div>▶ NAME OF SOURCE (Not an Acronym)</div> <div></div> <div>ADDRESS (Business Address Acceptable)</div> <div></div> <div>BUSINESS ACTIVITY, IF ANY, OF SOURCE</div> <div></div> <table> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> <tr> <td>____/____/____</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>____/____/____</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>____/____/____</td> <td>\$ _____</td> <td>_____</td> </tr> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	____/____/____	\$ _____	_____	____/____/____	\$ _____	_____	____/____/____	\$ _____	_____
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____/____/____	\$ _____	_____																							

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: 2

Name: **O'Connor, Tim**  
(Last, First, Middle)

Agency: **Office of Public Accountability**

Position: **Executive Director**

Phone: [REDACTED]

Email: [REDACTED]

Type of Statement:    ☒ **Pre-confirmation**    Date of nomination: 05 / 16 / 2025  
                                  ☐ **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.*

05/19/2025 01:51 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 3 -- Income

**Name:** O'Connor, Tim  
(Last, First, Middle)

The following income was received from a restricted source.

Name of restricted source:

Deloitte Consulting LLP

Address of restricted source:

[REDACTED]

Business activity of restricted source:

Management Consulting

Position title:

Specialist Leader

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  
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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  
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