

April 18, 2023

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 23-1200-S60
Appointment of Nancy Yap to the
Board of Building and Safety Commissioners**

FOR COUNCIL CONSIDERATION

Dear Councilmembers:

Nancy Yap was appointed by the Mayor to the Board of Building and Safety Commissioners on March 21, 2023. The Ethics Commission received notice of the appointment from the Mayor's Office on March 22, 2023. The Ethics Commission notified Ms. Yap on March 22, 2023 of their filing requirement and received Ms. Yap's complete pre-confirmation financial disclosure statement on April 13, 2023. In compliance with Los Angeles Municipal Code § 49.5.10, a copy of Ms. Yap's financial disclosure statement is enclosed.

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

Sincerely,



Nicole Enriquez
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: 04/06/2023 04:22 PM
SAN: 011300006-STH-0006

Please type or print in ink.

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

Yap Nancy

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Building and Safety, Department of

Division, Board, Department, District, if applicable

Your Position

Commissioner, Building & Safety Commission

► 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, 2022, through
December 31, 2022.

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

-or-

The period covered is / /, through
December 31, 2022.

☐ The period covered is January 1, 2022, 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 03/21/2023 and office sought, if different than Part 1:

4. Schedule Summary (required)

► Total number of pages including this cover page: 2

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 04/06/2023 04:22 PM
(month, day, year)

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

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;">Nancy Yap</div>

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <u>Center for Asian Americans United for Self Empowerment (CAUSE)</u>	NAME OF SOURCE OF INCOME <u>iMobile Ventures Inc.</u>
ADDRESS (Business Address Acceptable) [REDACTED]	ADDRESS (Business Address Acceptable) [REDACTED]
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Nonprofit</u>	BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Telecommunications</u>
YOUR BUSINESS POSITION <u>Executive Director</u>	YOUR BUSINESS POSITION <u>President</u>
GROSS INCOME RECEIVED <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	GROSS INCOME RECEIVED <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.)	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"/> 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"/> Sale of _____ (Real property, car, boat, etc.)
<input type="checkbox"/> Loan repayment	<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"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe)
<input type="checkbox"/> Other _____ (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 TERM (Months/Years) _____ 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: _____

AMENDMENT

COVER PAGE

Filed Date: 04/13/2023 12:38 PM
SAN: 011300006-STH-0006

Please type or print in ink.

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

Yap

Nancy

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Building and Safety, Department of

Division, Board, Department, District, if applicable

Your Position

Commissioner, Building & Safety Commission

► 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, 2022, through
December 31, 2022.

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

-or-

The period covered is ____/____/_____, through
December 31, 2022.

☐ The period covered is January 1, 2022, through the date of
leaving office.

☐ Assuming Office: Date assumed ____/____/_____
-

-or-

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

☒ Candidate: Date of Election 03/21/2023 and office sought, if different than Part 1: _____

4. Schedule Summary (required)

► Total number of pages including this cover page: 3

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 E-MAIL 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 04/13/2023 12:38 PM

(month, day, year)

Signature

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

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

▶ NAME OF BUSINESS ENTITY
Altria Group

GENERAL DESCRIPTION OF THIS BUSINESS
Tobacco

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
Coca-Cola

GENERAL DESCRIPTION OF THIS BUSINESS

Beverages

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 Dynamics Corp

GENERAL DESCRIPTION OF THIS BUSINESS

Aerospace and Defense

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
Broadcom Inc.

GENERAL DESCRIPTION OF THIS BUSINESS
Global Infrastructure Tecnology

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
Exxon Mobile Corp

GENERAL DESCRIPTION OF THIS BUSINESS

Energy - Gas

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

Filer's Verification

Print Name Nancy Yap


Office, Agency Building and Safety, Department of
or Court _____

Statement Type ☐ 2022/2023 Annual ☐ Assuming ☐ Leaving
☐ _____ Annual ☒ Candidate
(yr)

I have viewed 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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 04/13/2023 12:38 PM
(month, day, year)

Filer's Signature 

Comments: _____

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

▶ NAME OF BUSINESS ENTITY
Marathon Petroleum Corp

GENERAL DESCRIPTION OF THIS BUSINESS

Energy - Gas

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
Newmont Corp

GENERAL DESCRIPTION OF THIS BUSINESS

Gold Mining

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
Principal Financial Group

GENERAL DESCRIPTION OF THIS BUSINESS

Financial Investment

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
Valero Energy Corp

GENERAL DESCRIPTION OF THIS BUSINESS

Energy - Gas

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

Filer's Verification

Print Name Nancy Yap


Office, Agency or Court Building and Safety, Department of

Statement Type ☐ 2022/2023 Annual ☐ Assuming ☐ Leaving
☐ _____ Annual ☒ Candidate
(yr)

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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 04/13/2023 12:38 PM
(month, day, year)

Filer's Signature 

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: Yap, Nancy

(Last, First, Middle)

Agency: Building and Safety, Department of

Position: Commissioner, Building & Safety Commission

Phone:

Email:

Type of Statement:

☒ **Pre-confirmation**

Date of nomination: 03 / 21 / 2023

☐ **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.

04/06/2023 04:28 PM

Date

Signature



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: Yap, Nancy
(Last, First, Middle)

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

Name of restricted source:
Arts District Little Tokyo Neighborhood Council

Address of restricted source:
[REDACTED]

Position Title:
President

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

Name of restricted source:

Address of restricted source:

Position Title:

Position held by:
☐ Me ☐ My spouse/registered domestic partner
☐ My dependent child