



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 cursive script 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

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.
- Assuming Office: Date assumed ____/____/____ -or- The period covered is ____/____/____, through the date of leaving office.
- 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
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS
Public Safety Consulting Business

| | |
|---|----------------------------------|
| FAIR MARKET VALUE | IF APPLICABLE, LIST DATE: |
| <input type="checkbox"/> \$0 - \$1,999 | ____/____/____ ____/____/____ |
| <input type="checkbox"/> \$2,000 - \$10,000 | ACQUIRED DISPOSED |
| <input type="checkbox"/> \$10,001 - \$100,000 | |
| <input checked="" type="checkbox"/> \$100,001 - \$1,000,000 | |
| <input type="checkbox"/> Over \$1,000,000 | |

NATURE OF INVESTMENT
 Partnership Sole Proprietorship 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"/> \$10,001 - \$100,000 |
| <input type="checkbox"/> \$500 - \$1,000 | <input checked="" type="checkbox"/> OVER \$100,000 |
| <input type="checkbox"/> \$1,001 - \$10,000 | |

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None or 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:
 INVESTMENT 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 | IF APPLICABLE, LIST DATE: |
| <input type="checkbox"/> \$2,000 - \$10,000 | ____/____/____ ____/____/____ |
| <input checked="" type="checkbox"/> \$10,001 - \$100,000 | ACQUIRED DISPOSED |
| <input type="checkbox"/> \$100,001 - \$1,000,000 | |
| <input type="checkbox"/> Over \$1,000,000 | |

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Other SEE ATTACHED

Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

▶ 1. BUSINESS ENTITY OR TRUST

Name _____

Address (Business Address Acceptable) _____

Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

| | |
|--|----------------------------------|
| FAIR MARKET VALUE | IF APPLICABLE, LIST DATE: |
| <input type="checkbox"/> \$0 - \$1,999 | ____/____/____ ____/____/____ |
| <input type="checkbox"/> \$2,000 - \$10,000 | ACQUIRED DISPOSED |
| <input type="checkbox"/> \$10,001 - \$100,000 | |
| <input type="checkbox"/> \$100,001 - \$1,000,000 | |
| <input type="checkbox"/> Over \$1,000,000 | |

NATURE OF INVESTMENT
 Partnership Sole Proprietorship 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"/> \$10,001 - \$100,000 |
| <input type="checkbox"/> \$500 - \$1,000 | <input type="checkbox"/> OVER \$100,000 |
| <input type="checkbox"/> \$1,001 - \$10,000 | |

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None or Names listed below

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT 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 | IF APPLICABLE, LIST DATE: |
| <input type="checkbox"/> \$2,000 - \$10,000 | ____/____/____ ____/____/____ |
| <input type="checkbox"/> \$10,001 - \$100,000 | ACQUIRED DISPOSED |
| <input type="checkbox"/> \$100,001 - \$1,000,000 | |
| <input type="checkbox"/> Over \$1,000,000 | |

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Other _____

Yrs. remaining

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 <u>James McDonnell</u> |

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 D
Income – Gifts

Name
James McDonnell

▶ NAME OF SOURCE *(Not an Acronym)*
Warner Bros.
 ADDRESS *(Business Address Acceptable)*
 [REDACTED]
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Entertainment

| 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> |

▶ NAME OF SOURCE *(Not an Acronym)*
 ADDRESS *(Business Address Acceptable)*
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| 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> |

▶ NAME OF SOURCE *(Not an Acronym)*
Arnie Berghoff and Associates
 ADDRESS *(Business Address Acceptable)*
 [REDACTED]
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Government & Public Affairs

| 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> |

▶ NAME OF SOURCE *(Not an Acronym)*
 ADDRESS *(Business Address Acceptable)*
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| 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> |

▶ NAME OF SOURCE *(Not an Acronym)*
 ADDRESS *(Business Address Acceptable)*
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| 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> |

▶ NAME OF SOURCE *(Not an Acronym)*
 ADDRESS *(Business Address Acceptable)*
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| 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: | <input checked="" type="checkbox"/> Pre-confirmation | Date of nomination: <u>10</u> / <u>04</u> / 20 <u>24</u> |
| | <input type="checkbox"/> Assuming Office | First day in position: ___ / ___ / 20___ |
| | <input type="checkbox"/> Annual | ___ / ___ / 20___ through December 31, 20___ |
| | <input type="checkbox"/> 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:
[REDACTED]

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:
[REDACTED]

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:

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
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 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:

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): |
|------------------------|---------------|-------------------------|
| <u>07 / 07 / 20 24</u> | <u>\$ 225</u> | <u>Dodger Tickets</u> |
| ____ / ____ / 20 ____ | \$ ____ | _____ |
| ____ / ____ / 20 ____ | \$ ____ | _____ |
| ____ / ____ / 20 ____ | \$ ____ | _____ |

Name of restricted source:
Arnie Berghoff & Associates

Address of restricted source:

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): |
|------------------------|---------------|-------------------------|
| <u>07 / 19 / 20 24</u> | <u>\$ 124</u> | <u>Dodger Tickets</u> |
| ____ / ____ / 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 ____ | \$ ____ | _____ |



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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