

8/18/2026

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

**Re: Council File Number 26-1200-S51
Appointment of Nick Gaines to the
Area Planning Commission – South Valley**

FOR COUNCIL CONSIDERATION

Dear Councilmembers:

Nick Gaines was appointed by the Mayor to the Area Planning Commission – South Valley on August 14, 2026. The Ethics Commission received notice of the reappointment on August 17, 2026. The Ethics Commission notified Mr. Gaines on August 17, 2026 of their filing requirement and received Mr. Gaines's pre-confirmation financial disclosure statement on August 17, 2026. In compliance with Los Angeles Municipal Code § 49.5.10, a copy of Mr. Gaines's financial disclosure statement is enclosed.

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

Sincerely,



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: 08/17/2026 04:43 PM
SAN: 011300006-STH-0006

Please type or print in ink.

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

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Planning Department

Division, Board, Department, District, if applicable

Your Position

Member, Area Planning 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 (Supreme, Appellate, Superior Court), 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, 2025, through December 31, 2025.

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

-or-

The period covered is ____/____/_____, through December 31, 2025.

☐ The period covered is January 1, 2025, 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 08/14/2026 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

☐ **Attachment 700-P - Prospective Employment (87200 Filers Only)** – 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 08/17/2026 04:43 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 Nick Gaines

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <u>Matthew Perry Foundation</u>	NAME OF SOURCE OF INCOME <u>Amgen</u>
ADDRESS (Business Address Acceptable) 	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Nonprofit</u>	BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Cybersecurity Compliance</u>
YOUR BUSINESS POSITION <u>Program Director</u>	YOUR BUSINESS POSITION <u>Compliance Specialist</u>
GROSS INCOME RECEIVED ☐ No Income - Business Position Only ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000 ☐ \$10,001 - \$100,000 ☒ OVER \$100,000	GROSS INCOME RECEIVED ☐ No Income - Business Position Only ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000 ☐ \$10,001 - \$100,000 ☒ OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED ☒ Salary ☐ Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) ☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) ☐ Sale of _____ (Real property, car, boat, etc.) ☐ Loan repayment ☐ Commission or ☐ Rental Income, list each source of \$10,000 or more _____ (Describe) ☐ Other _____ (Describe)	CONSIDERATION FOR WHICH INCOME WAS RECEIVED ☐ Salary ☒ Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.) ☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.) ☐ Sale of _____ (Real property, car, boat, etc.) ☐ Loan repayment ☐ Commission or ☐ Rental Income, list each source of \$10,000 or more _____ (Describe) ☐ 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 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000 ☐ \$10,001 - \$100,000 ☐ OVER \$100,000	INTEREST RATE _____% ☐ None SECURITY FOR LOAN ☐ None ☐ Personal residence ☐ Real Property _____ Street address _____ City ☐ Guarantor _____ ☐ Other _____ (Describe)
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Comments: _____

AMENDMENT

COVER PAGE

Filed Date: 08/17/2026 04:58 PM
SAN: 011300006-STH-0006

Please type or print in ink.

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

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Planning Department

Division, Board, Department, District, if applicable

Your Position

Member, Area Planning 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 (Supreme, Appellate, Superior Court), 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, 2025, through December 31, 2025.
- or-** The period covered is ____/____/____, through December 31, 2025.
- ☐ **Assuming Office:** Date assumed ____/____/____
- ☒ **Candidate:** Date of Election 08/14/2026 and office sought, if different than Part 1: _____
- ☐ **Leaving Office:** Date Left ____/____/____
(Check one circle below.)
- ☐ The period covered is January 1, 2025, through the date of leaving office.
- or-**
- ☐ The period covered is ____/____/____, through the date of leaving office.

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
- ☐ **Attachment 700-P - Prospective Employment (87200 Filers Only)** – 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 08/17/2026 04:58 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)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Yes on Prop 37

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Statewide Ballot Measure

YOUR BUSINESS POSITION

Policy Director

GROSS INCOME RECEIVED ☐ No Income - Business Position Only

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☒ \$10,001 - \$100,000

☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☒ Salary ☐ Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)

☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

☐ Sale of _____
(Real property, car, boat, etc.)

☐ Loan repayment

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

(Describe)

☐ Other _____
(Describe)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED ☐ No Income - Business Position Only

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)

☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

☐ Sale of _____
(Real property, car, boat, etc.)

☐ Loan repayment

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

(Describe)

☐ Other _____
(Describe)

Comments:

► **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

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

INTEREST RATE

_____% ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property _____
Street address
City

☐ Guarantor _____

☐ Other _____
(Describe)

Filer's Verification

Print Name Nick Gaines Office, Agency or Court Planning Department

Statement Type ☐ 2025/2026 Annual ☐ _____ Annual ☐ Assuming ☐ Leaving ☒ 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 08/17/2026 04:58 PM
(month, day, year)

Filer's Signature _____

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

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Matthew Perry Foundation

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Nonprofit

YOUR BUSINESS POSITION

Program Director

GROSS INCOME RECEIVED ☐ No Income - Business Position Only

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☒ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☒ Salary ☐ Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)

☐ Partnership (Less than 10% ownership. For 10% or greater use
Schedule A-2.)

☐ Sale of _____
(Real property, car, boat, etc.)

☐ Loan repayment

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

(Describe)

☐ Other _____
(Describe)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Amgen

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Cybersecurity Compliance

YOUR BUSINESS POSITION

Compliance Specialist

GROSS INCOME RECEIVED ☐ No Income - Business Position Only

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☒ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☒ Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)

☐ Partnership (Less than 10% ownership. For 10% or greater use
Schedule A-2.)

☐ Sale of _____
(Real property, car, boat, etc.)

☐ Loan repayment

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

(Describe)

☐ Other _____
(Describe)

Comments:

► **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)

ADDRESS (Business Address Acceptable)

_____% ☐ None

SECURITY FOR LOAN

☐ None ☐ Personal residence

BUSINESS ACTIVITY, IF ANY, OF LENDER

☐ Real Property _____
Street address

City

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

☐ Guarantor _____

☐ Other _____
(Describe)

Filer's Verification

Print Name Nick Gaines

Office, Agency or Court Planning Department

Statement Type ☐ 2025/2026 Annual ☐ _____ Annual ☐ Assuming ☐ Leaving ☒ 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 08/17/2026 04:58 PM
(month, day, year)

Filer's Signature _____

FORM
60

Restricted Source Financial Disclosure Statement

Los Angeles City
ETHICS COMMISSION

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** ☐ **Amendment** (original filed on ____/____/20____) **Total pages, including this cover:** 1

General Information

Name (Last, First, Middle)

Gaines, Nick

Agency

Planning Department

Position

Member, Area Planning Commission

Email Address

Phone Number

Type of Statement:

☒ **Pre-confirmation** Date of nomination: 08 / 14 / 2026

☐ **Assuming Office** First day in position: ____ / ____ / 20____

☐ **Annual** ____ / ____ / 20____ through December 31, 20____

☐ **Leaving Office** Last day in office: ____ / ____ / 20____

Schedule Summary (check attached schedules)

- ☐ 1. **REAL PROPERTY**
Interests in real property leased from or to, co-owned by, purchased from, or sold to a restricted source.
- ☐ 2. **INVESTMENTS**
Investments (other than real property) co-owned by, purchased from, or sold to a restricted source.
- ☐ 3. **INCOME**
Income received from a restricted source.
- ☐ 4. **GIFTS**
Gifts, cumulatively valued at \$50 or more, received from a restricted source.
- ☐ 5. **BOARD POSITIONS**
Positions held on the board of a restricted source.
- ☒ **NO REPORTABLE INTERESTS**

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.

Signature

08/17/2026 04:46 PM

Date