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STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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NAN	IE OF FILER (LAST)	(FIRST)		(MIDDLE)	
Ri	lley, Irene				
1.	Office, Agency, or Court				
	Agency Name (Do not use acronyms)				
	City and County of San Francisco				
	Division, Board, Department, District, if applicable	Your Position			
	Human Rights Commission	Commission	er		
	▶ If filing for multiple positions, list below or on an attachment. (Do not us	e acronyms)			
	Agency: *SEE ATTACHED FOR ADDITIONAL POSITIONS	Position:			
<u>-</u>	Jurisdiction of Office (Check at least one box)	ludes Detire	d Judgo Dro Tom Jud	ge, or Court Commissioner	
	State	☐ (Statewide Ju	ırisdiction)	ge, or court commissioner	
	Multi-County	X County of S	an Francisco		
	City of				
_					
3.	Type of Statement (Check at least one box)	_		21 21	
	Annual: The period covered is January 1, 2023 through December 31, 2023.	Leaving Off	ice: Date Left	one circle)	
	-Or-	O The perio	•	1, 2023 through the date	
	The period covered is/, through December 31, 2023.	of leaving	g office.		
	Assuming Office: Date assumed	The periorof leavin		, through the date	
	Candidate:Date of Election and office sought, if	different than Part 1:			
4.	Schedule Summary (required) ► Total number	of pages including	this cover page:	6	
ľ	Schedules attached	5. pag-1			
	X Schedule A-1 - Investments – schedule attached	X Schedule C - Inco	ome, Loans, & Busine	ss Positions - schedule attached	
	Schedule A-2 - Investments – schedule attached	Schedule D - Inco	ome – Gifts – schedule	e attached	
	Schedule B - Real Property - schedule attached	Schedule E - Inco	ome – Gifts – Travel F	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)	Francisco	CA	94103	
	DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS			
	()				
	I have used all reasonable diligence in preparing this statement. I have re herein and in any attached schedules is true and complete. I acknowled	viewed this statement an ge this is a public docum	d to the best of my known	owledge the information contained	
	I certify under penalty of perjury under the laws of the State of Calif				
	Turne Pallati				
	Date Signed 02/29/2024 (month, day, year)	Signature Irene R	ile the originally signed paper st	atement with your filing official.)	

STATEMENT OF ECONOMIC INTERESTS COVER PAGE Expanded Statement Attachment

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
Irene Riley

* This table lists all positions including the primary position listed in the Office, Agency, or Court section of the Cover Page.

	Div/Board/Dept/District		Type of Statement	SAN #
J - 1	Human Rights Commission	Commissioner	Annual 1/1/2023 - 12/31/2023	
City and County of San Francisco	Mayor Office of the	Mayor's Office of Housing and Community Development Citizen's Committee on Community Development, Members	Annual 1/1/2023 - 12/31/2023	060600029-NFH-0029

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.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION					
Name					
Riley, Irene					

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	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)	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 O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE \$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000
IF APPLICABLE, LIST DATE: /	IF APPLICABLE, LIST DATE:
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Stock Other (Describe)	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 O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0°-\$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED
Comments: See attached.	

Comments: _____

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION					
Name					
Riley, Irene					

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
CITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED
Over \$1,000,000
NATURE OF INTEREST
Ownership/Deed of Trust Easement
Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
None
:=
I lending institution made in the lender's regular course of without regard to your official status. Personal loans and less must be disclosed as follows:
without regard to your official status. Personal loans and less must be disclosed as follows:
without regard to your official status. Personal loans and less must be disclosed as follows: NAME OF LENDER*
without regard to your official status. Personal loans and less must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
without regard to your official status. Personal loans and less must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)
without regard to your official status. Personal loans and less must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable)
without regard to your official status. Personal loans and less must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) ———————————————————————————————————
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without regard to your official status. Personal loans and less must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE Whone HIGHEST BALANCE DURING REPORTING PERIOD

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION				
Name				
Riley, Irene				

1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
SF Human Rights Commission	HSBC
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
San Francisco, CA 94103	Buffalo, NY 14240-1393
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
	- TOTAL PROPERTY OF THE PROPER
OUR BUSINESS POSITION	YOUR BUSINESS POSITION
Commissioner	
ROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Or
₹ \$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,000 \$1,000
\$10,001 - \$100,000 OVER \$100,000	X \$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	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	Partnership (Less than 10% ownership. For 10% or greater use
Schedule A-2.)	Schedule A-2.) Sale of
Sale of(Real property, car, boat, etc.)	(Real property, car, boat, etc.)
Loan repayment	Loan repayment
	Commission or Rental Income, list each source of \$10,000 or more
Commission or Rental Income, list each source of \$10,000 or more	Commission of Literature
Commission or Rental Income, list each source of \$10,000 or more	- Commission of - Commission o
(Describe)	(Describe)
(Describe)	(Describe)
(Describe)	(Describe) X Other Interest Income (Describe)
(Describe) X Other commission pay (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING F * You are not required to report loans from a commercial retail installment or credit card transaction, made in	(Describe) X Other Interest Income (Describe) Cial lending institution, or any indebtedness created as part of the lender's regular course of business on terms available to status. Personal loans and loans received not in a lender's
(Describe) Z Other Commission pay (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING For a retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as follows:	(Describe) X Other Interest Income (Describe) Cial lending institution, or any indebtedness created as part of the lender's regular course of business on terms available to status. Personal loans and loans received not in a lender's
(Describe) Z Other Commission pay (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING For a retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as follows:	(Describe) X Other Interest Income (Describe) Cial lending institution, or any indebtedness created as part of the lender's regular course of business on terms available to status. Personal loans and loans received not in a lender's lows:
(Describe) Z Other Commission pay (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING For a retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as followable of LENDER*	(Describe) X Other Interest Income (Describe) Stall lending institution, or any indebtedness created as part of in the lender's regular course of business on terms available to status. Personal loans and loans received not in a lender's lows: INTEREST RATE TERM (Months/Years)
(Describe) Z Other Commission pay (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING For a retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as followable of LENDER*	(Describe) X Other Interest Income (Describe) Cial lending institution, or any indebtedness created as part of in the lender's regular course of business on terms available to status. Personal loans and loans received not in a lender's lows: INTEREST RATE TERM (Months/Years)
(Describe) Z Other Commission pay (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING F You are not required to report loans from a commerce a retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as followed by the public of LENDER* ADDRESS (Business Address Acceptable)	(Describe) X Other Interest Income (Describe) Stall lending institution, or any indebtedness created as part of in the lender's regular course of business on terms available to status. Personal loans and loans received not in a lender's lows: INTEREST RATE TERM (Months/Years)
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(Describe) X Other Commission pay (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING F You are not required to report loans from a commerce a retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as followed by the public of LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	(Describe) X Other Interest Income (Describe) X Other Interest Income (Describe) Status Personal loans and loans received not in a lender's lows: INTEREST RATE TERM (Months/Years)
(Describe) Z Other Commission pay (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING F You are not required to report loans from a commerce a retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as followed by the public of Lender (Business Address Acceptable) BUSINESS (Business Address Acceptable) HIGHEST BALANCE DURING REPORTING PERIOD	(Describe) X Other Interest Income (Describe) Cial lending institution, or any indebtedness created as part of in the lender's regular course of business on terms available to status. Personal loans and loans received not in a lender's lows: INTEREST RATE TERM (Months/Years)
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(Describe) Z Other Commission pay (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING F You are not required to report loans from a commerce a retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business	(Describe) X Other

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION			
Name			
Riley, Irene			

I. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Social Security	Goldman Sachs
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
Richmond , CA 94802	San Francisco, CA 94104
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
ROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position C
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	☐ \$10,001 - \$100,000 🗓 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Spland Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
(For self-employed use Schedule A-2.) Partnership (Less than 10% ownership. For 10% or greater use	Partnership (Less than 10% ownership. For 10% or greater use
Schedule A-2.)	Schedule A-2.)
Sale of(Real property, car, boat, etc.)	Sale of(Real property, car, boat, etc.)
Loan repayment	Loan repayment
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Oominission of	
	1.1
(Describe)	(Describe)
X Other Social security	X Other Investment Income
- Social security	X Other Income (Describe)
Other Social security (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P * You are not required to report loans from a commerce a retail installment or credit card transaction, made in	ial lending institution, or any indebtedness created as part or the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's
X Other Social security (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P * You are not required to report loans from a commerc a retail installment or credit card transaction, made in members of the public without regard to your official	ial lending institution, or any indebtedness created as part on the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's
Other Social security (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P You are not required to report loans from a commerce a retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as follows:	ial lending institution, or any indebtedness created as part on the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's ows: INTEREST RATE TERM (Months/Years)
*You are not required to report loans from a commerc a retail installment or credit card transaction, made ir members of the public without regard to your official regular course of business must be disclosed as follows.	ial lending institution, or any indebtedness created as part on the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's pows:
*You are not required to report loans from a commerc a retail installment or credit card transaction, made ir members of the public without regard to your official regular course of business must be disclosed as followable.	ial lending institution, or any indebtedness created as part on the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's ows: INTEREST RATE TERM (Months/Years)
2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P You are not required to report loans from a commerce a retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as followable of LENDER* ADDRESS (Business Address Acceptable)	ial lending institution, or any indebtedness created as part on the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's ows: INTEREST RATE TERM (Months/Years) None
2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P You are not required to report loans from a commerce a retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as followable. NAME OF LENDER* ADDRESS (Business Address Acceptable)	Investment Income (Describe) ital lending institution, or any indebtedness created as part on the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's ows: INTEREST RATE TERM (Months/Years) ———————————————————————————————————
*You are not required to report loans from a commerce a retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business acceptable)	ial lending institution, or any indebtedness created as part on the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's ows: INTEREST RATE TERM (Months/Years) None SECURITY FOR LOAN
* Other Social security (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P * You are not required to report loans from a commerce a retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business and the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular regular course of business and the public without regard to your official regular r	Investment Income (Describe)
* Other Social security (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P You are not required to report loans from a commerce a retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business must be disclosed as followed by the public without regard to your official regular course of business acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$\$\text{	Investment Income (Describe) DERIOD Dial lending institution, or any indebtedness created as part on the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's ows: INTEREST RATE TERM (Months/Years) Mone SECURITY FOR LOAN None Personal residence
* Other Social security (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P * You are not required to report loans from a commerce a retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as followed as followed by the second se	Investment Income (Describe)
*You are not required to report loans from a commerce a retail installment or credit card transaction, made in members of the public without regard to your official regular course of business must be disclosed as followable. *ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000	ial lending institution, or any indebtedness created as part on the lender's regular course of business on terms available status. Personal loans and loans received not in a lender's ows: INTEREST RATE TERM (Months/Years)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION AMENDMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

E-Filed 03/15/2024 19:49:08 Filing ID: 211002994

Please type or print in ink.	211002934
NAME OF FILER (LAST)	(FIRST) (MIDDLE)
Riley, Irene	
1. Office, Agency, or Court	
Agency Name (Do not use acronyms)	
City and County of San Francisco	
Division, Board, Department, District, if applicable	Your Position
Human Rights Commission	Commissioner
▶ If filing for multiple positions, list below or on an attachment.	(Do not use acronyms)
Agency: *SEE ATTACHED FOR ADDITIONAL POSITIONS	Position:
2. Jurisdiction of Office (Check at least one box)	D. T. L. L. Court Commissioner
☐ State	Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
Multi-County	
City of	Outd
3. Type of Statement (Check at least one box)	
X Annual:The period covered is January 1, 2023, through	Leaving Office: Date Left/
December 31, 2023.	(Check one circle.)
-or- The period covered is/, thro	ough Ough The period covered is January 1, 2023, through the date of leaving office.
December 31, 2023.	
Assuming Office: Date assumed/	 The period covered is, through the date of leaving office.
Candidate:Date of Election and office	e sought, if different than Part 1:
I. Schedule Summary (required) ► Total n	umber of pages including this cover page:47
Schedules attached	
X 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)	San Francisco CA 94103
DAYTIME TELEPHONE NUMBER	San Francisco CA 94103 E-MAIL ADDRESS
()	
I have used all reasonable diligence in preparing this statement. herein and in any attached schedules is true and complete.	. I have reviewed this statement and to the best of my knowledge the information contained acknowledge this is a public document.
I certify under penalty of perjury under the laws of the Sta	
• • • • • • •	
Date Signed 03/15/2024 (month day year)	Signature Irene Riley (File the originally signed paper statement with your filing official)
imonin nav veari	pro- a my market

STATEMENT OF ECONOMIC INTERESTS COVER PAGE Expanded Statement Attachment

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
Irene Riley

This table lists all positions including the primary position listed in the Office, Agency, or Court section of the Cover Page.

Agency	Div/Board/Dept/District	Position	Type of Statement	SAN #
City and County of San Francisco	Human Rights Commission	Commissioner	Annual 1/1/2023 - 12/31/2023	060600029-NFH-0029
City and County of San Francisco	Mayor Office of the	Mayor's Office of Housing and Community Development Citizen's Committee on Community Development, Members	Annual 1/1/2023 - 12/31/2023	060600029-NFH-0029

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests AMENDMENT

FAIR POLITICAL PRACTICES COMMISSION

CALIFORNIA FORM

<u> </u>	NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
	TEXAS INDTRUMENTS INC. CMN	PLIGRIM'S PRIDE CORPORATION CMN
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	US EQUITY	US EQUITY
		FAIR MARKET VALUE
	FAIR MARKET VALUE	\$2,000 - \$10,000 X \$10,001 - \$100,000
	∑ \$2,000 - \$10,000 ∑ \$10,001 - \$100,000	\$100,001 - \$1,000,000 Over \$1,000,000
	S100,001 - \$1,000,000 Over \$1,000,000	[4100,001 - 41,000,000
	A STATE OF AN COTAGNIT	NATURE OF INVESTMENT
	NATURE OF INVESTMENT	V Stock Other
	X Stock Other(Describe)	(Describe)
	Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)
	O Income Received of \$500 or More(Report on Schedule C)	O Income Received of \$300 or More/Report on assessed 27
	AS ARRUMANUS LINT DATE.	IF APPLICABLE, LIST DATE:
	IF APPLICABLE, LIST DATE:	
	/ / <u>23</u> // <u>23</u>	
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
_		► NAME OF BUSINESS ENTITY
	NAME OF BUSINESS ENTITY	CSXCOPRORATION CMN
	ROPERTECHNOLOGIES INC. CMN	
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
		US EQUITY
	US EQUITY	US EQUITE
	FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000 X \$10,001 - \$100,000	■ \$2,000 - \$10,000 ■ X \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	NATURE OF INVESTMENT
	X Stock Other	X Stock Other
	(Describe)	(Describe)
	Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)
	O Income Received of \$500 or More(Report on Schedule C)	O IIICOME NECEIVED OF \$555 C. MOTOPOSE STATES
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
		, , , 23, 23
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
_	NAME OF BUSINESS ENTITY	Filer's Verification
•		Filer S Verification
	NRG ENERGY INC. CMN	Print Name Riley, Irene
	GENERAL DESCRIPTION OF THIS BUSINESS	Friit Name
		Office, Agency
	US EQUITY	or Court See Expanded Statement Attachment
	FAIR MARKET VALUE	Statement Type X 2023/2024 Annual Assuming Leaving
	X \$2,000 - \$10,000 S10,001 - \$100,000	Statement Type
	\$1,000,001 - \$1,000,000 Over \$1,000,000	Statement Type
		I have used all reasonable diligence in preparing this statement. I have
	NATURE OF INVESTMENT	reviewed this statement and to the best of my knowledge the information
	X Stock Other	contained herein and in any attached schedules is true and complete.
	(Describe) Partnership () Income Received of \$0 - \$499	I certify under penalty of perjury under the laws of the State of
	O Income Received of \$500 or More (Report on Schedule C)	California that the foregoing is true and correct.
	IF APPLICABLE, LIST DATE:	Date Signed 03/15/2024
	, ,23 , ,23	(month. day. year)
	ACQUIRED DISPOSED	Trene Riley
	10401140	Filer's Signature Irene Riley

Comments: _____

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

(Ownership Interest is Less Than 10%)
Investments must be itemized.
Do not attach brokerage or financial statements.

► NAME OF BUSINESS ENTITY ▶ NAME OF BUSINESS ENTITY EBAY INC CMN COTY INC CMN CLASS A GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EOUITY US EOUITY FAIR MARKET VALUE FAIR MARKET VALUE S10,001 - \$100,000 X \$10,001 - \$100,000 X \$2,000 - \$10,000 \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other X Stock Other __ (Describe) Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: / /23 / /23 ACQUIRED DISPOSED ACQUIRED NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY OUALCOMM INC. CMN INTUITIVE SURGICAL INC. GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EOUITY US EQUITY FAIR MARKET VALUE FAIR MARKET VALUE \$2,000 - \$10,000 X \$10,001 - \$100,000 X \$10,001 - \$100,000 \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000.000 Over \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other __ X Stock Other _ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More(Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: / /23 / /23
ACQUIRED DISPOSED / /23 NAME OF BUSINESS ENTITY Filer's Verification LKQ CORPORATION INC. SMN Print Name Riley, Irene GENERAL DESCRIPTION OF THIS BUSINESS Office, Agency
or Court See Expanded Statement Attachment US EOUITY FAIR MARKET VALUE X 2023/2024 Annual Assuming Leaving Annual Candidate Statement Type X \$10,001 - \$100,000 \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000 I have used all reasonable diligence in preparing this statement. I have NATURE OF INVESTMENT reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. X Stock Other _ I certify under penalty of perjury under the laws of the State of Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) California that the foregoing is true and correct. IF APPLICABLE, LIST DATE: Date Signed _____03/15/2024 (month, day, year) / /23 / /23 ACQUIRED DISPOSED Filer's Signature Irene Riley

Comments:

SCHEDULE A-1 Investments

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)
Investments must be itemized.
Do not attach brokerage or financial statements.

\triangleright	NAME OF BUSINESS ENTITY	NAIVIE OF BUSINESS ENTITI
	ADVANCE MICRO DEVICES INC,CMN	SEMPRA ENERGY CMN
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	US EQUITY	US EQUITY
	FAIR MARKET VALUE	FAIR MARKET VALUE
		X \$2,000 - \$10,000
		\$100,001 - \$1,000,000 Over \$1,000,000
	\$100,001 - \$1,000,000 Over \$1,000,000	
	NATURE OF INVESTMENT	NATURE OF INVESTMENT X Stock Other
	X Stock Other (Describe)	(Describe)
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	//23//23	
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
_		► NAME OF BUSINESS ENTITY
	NAME OF BUSINESS ENTITY	NIKE CLASS B CMN
	AMERICAN TOWER CORPORATION CMN	112.11
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	US EQUITY	US EQUITY
	FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000 X S10,001 - \$100,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	NATURE OF INVESTMENT
	X Stock Other	X Stock Other(Describe)
	(Describe)	Partnership () Income Received of \$0 - \$499
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)	Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
	ACQUIRED BIGI COLD	
▶	NAME OF BUSINESS ENTITY	Filer's Verification
	PAYCHECK INC. CMN	Print Name Riley, Irene
	GENERAL DESCRIPTION OF THIS BUSINESS	Print Name
	US EQUITY	Office, Agency or Court See Expanded Statement Attachment
	FAIR MARKET VALUE	Statement Type 2023/2024 Annual Assuming Leaving
	\$2,000 - \$10,000 X \$10,001 - \$100,000	Statement Type
	\$100,001 - \$1,000,000 Over \$1,000,000	Statement Type 2023/2024 Annual Candidate
		I have used all reasonable diligence in preparing this statement. I have
	NATURE OF INVESTMENT	reviewed this statement and to the best of my knowledge the information
	X Stock Other (Describe)	contained herein and in any attached schedules is true and complete.
	Partnership O Income Received of \$0 - \$499	I certify under penalty of perjury under the laws of the State of
	O Income Received of \$500 or More(Report on Schedule C)	California that the foregoing is true and correct.
	IF APPLICABLE, LIST DATE:	Date Signed03/15/2024
	, , 23	(month, day, year)
	ACQUIRED DISPOSED	Filer's Signature Irene Riley
	18	Filer's Signature

Comments:

SCHEDULE A-1 Investments

CALIFORNIA FORM / UU
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

▶	NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
	CVS HEALTH GROUP CMN	S&P GLOBAL INC. CMN
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	US EQUITY	US EQUITY
	FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000 X \$10,000 - \$100,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	2100'001 - 21'000'000	
	NATURE OF INVESTMENT X Stock Other	NATURE OF INVESTMENT X Stock Other
	(Describe)	(Describe)
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	, , <u>23</u> , <u>23</u>	
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
<u> </u>	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	THE HOME DEPOT INC. CMN	PUBLIC STORAGE CMN
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	US EQUITY	US EQUITY
	FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000 X \$10,001 - \$100,000	<u>X</u> \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	NATURE OF INVESTMENT ☐ Stock ☐ Other
	X Stock Other (Describe)	(Describe)
	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More(Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	/ /23/_23	
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
-	NAME OF BUSINESS ENTITY	Filer's Verification
	TYLER TECHNOLOGY INC. CMN	Pilor Irono
	GENERAL DESCRIPTION OF THIS BUSINESS	Print Name Riley, Irene
	US EQUITY	Office, Agency or Court See Expanded Statement Attachment
	FAIR MARKET VALUE	Statement Type X 2023/2024 Annual Assuming Leaving
	☐ \$2,000 - \$10,000 X \$10,001 - \$100,000	Annual Candidate
	S100,001 - \$1,000,000 Over \$1,000,000	(yr)
	NATURE OF INVESTMENT	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information
	X Stock Other	contained herein and in any attached schedules is true and complete.
	(Describe)	
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
	IF APPLICABLE, LIST DATE:	Date Signed03/15/2024(month, day, year)
	/ /23 / /23	month, day, year)
	ACQUIRED DISPOSED	Filer's Signature Irene Riley

SCHEDULE A-1 Investments

CALIFORNIA FORM / UU FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
CITIGROUP INC CMN	LENNAR CORPORATION CMN CLASS A
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
CENTER OF SECOND CONTRACTOR OF	
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
X \$2,000 - \$10,000 S10,001 - \$100,000	X \$2,000 - \$10,000 S10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT X Stock Other (Describe)	NATURE OF INVESTMENT X Stock Other(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//23/	
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
TARGET CORP. CMN	TAKE TWO INTERACTIVE SOFTWARE INC. CMN
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	X \$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT X Stock Other	NATURE OF INVESTMENT X Stock
(Describe)	(Describe) Partnership () Income Received of \$0 - \$499
Partnership Oncome Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	○ Income Received of \$500 or More(Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, , 23 , <u>, 23</u>	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	Filer's Verification
·	There's verification
ADOBE INC CMN GENERAL DESCRIPTION OF THIS BUSINESS	Print Name Riley, Irene
US EQUITY	Office, Agency or Court See Expanded Statement Attachment
FAIR MARKET VALUE	Statement Type 🗵 2023/2024 Annual 🔲 Assuming 🔲 Leaving
\$2,000 - \$10,000	Statement Type X 2023/2024 Annual
\$100,001 - \$1,000,000 Over \$1,000,000	
NATURE OF INVESTMENT	I have used all reasonable diligence in preparing this statement, I have reviewed this statement and to the best of my knowledge the information
X Stock (Describe)	contained herein and in any attached schedules is true and complete.
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More(Report on Schedule C)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
IF APPLICABLE, LIST DATE:	Date Signed03/15/2024
, ,23 , ,23	(month, day, year)
ACQUIRED DISPOSED	Filer's Signature Irene Riley

► NAME OF BUSINESS ENTITY ACCENTUREPLC CMN CLASS A GENERAL DESCRIPTION OF THIS BUSINESS

X \$10,001 - \$100,000

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

S10,001 - \$100,000
Over \$1,000,000

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

X \$10,001 - \$100,000

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

/___/**23** DISPOSED

Over \$1,000,000

DISPOSED

Over \$1,000,000

US EQUITY FAIR MARKET VALUE

X Stock

\$2,000 - \$10,000

\$100,001 - \$1,000,000 NATURE OF INVESTMENT

IF APPLICABLE, LIST DATE:

NAME OF BUSINESS ENTITY GENERAL MOTOR COMPANY CMN GENERAL DESCRIPTION OF THIS BUSINESS

ACQUIRED

US EQUITY FAIR MARKET VALUE

X Stock

X \$2,000 - \$10,000 \$100,001 - \$1,000,000

NATURE OF INVESTMENT

IF APPLICABLE, LIST DATE:

NAME OF BUSINESS ENTITY EMERSON ELECTRIC CO. CMN GENERAL DESCRIPTION OF THIS BUSINESS

ACQUIRED

US EOUITY

X Stock

FAIR MARKET VALUE

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

NATURE OF INVESTMENT

IF APPLICABLE, LIST DATE:

ACQUIRED

/23

Other _ Partnership O Income Received of \$0 - \$499

Other _ Partnership O Income Received of \$0 - \$499

Other _ Partnership O Income Received of \$0 - \$499

SCHEDULE A-1 Investments

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

"	Illianciai statements.		
Ī	► NAME OF BUSINESS ENTITY		
١	VISTRA CORP. CMN		
١	GENERAL DESCRIPTION OF THIS BUSINESS		
١			
١	US EQUITY		
١	FAIR MARKET VALUE \$2,000 - \$10,000 \times \$10,001 - \$100,000		
	\$2,000 - \$10,000 X \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000		
	NATURE OF INVESTMENT		
П	X Stock Other (Describe)		
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		
	IF APPLICABLE, LIST DATE:		
	ACQUIRED DISPOSED		
	► NAME OF BUSINESS ENTITY		
	GENERAL ELECTRIC COMPANY CMN		
ı	GENERAL DESCRIPTION OF THIS BUSINESS		
l	US EQUITY		
ı	FAIR MARKET VALUE		
ı	X \$2,000 - \$10,000		
ı	\$100,001 - \$1,000,000 Over \$1,000,000		
	NATURE OF INVESTMENT		
ı	X Stock Other (Describe)		
١	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		
ı	IF APPLICABLE, LIST DATE:		
1	Filer's Verification		
ı	Print Name Riley, Irene		
ı			
١	Office, Agency or Court See Expanded Statement Attachment		
	Statement Type		
	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 Signed03/15/2024		
	(month, day. year)		
	Filer's Signature Irene Riley		
	i nor o dignorare		

Co	mm	en	ts	•
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SCHEDULE A-1 Investments

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

NAME OF	BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
KLA CORE	O CMN	JOHNSON & JOHNSON CMN
	DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL	DESCRIPTION OF THIS SOCIALISE	
US EOUIT	rv.	US EQUITY
US EQUII		
FAIR MARK	KET VALUE	FAIR MARKET VALUE \$2,000 - \$10,000 X \$10,001 - \$100,000
X \$2,000 ·		
5100,00	01 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
	· · · · · · · · · · · · · · · · · · ·	NATURE OF INVESTMENT
	F INVESTMENT	Stock Other
X Stock	Other(Describe)	(Describe)
Partner	ship O Income Received of \$0 - \$499	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
	O Income Received of \$500 or More(Report on Schedule C)	O Income Received of \$500 of More Report on Schedule Cy
15 ADDI 101	ADLE LIGT DATE.	IF APPLICABLE, LIST DATE:
IF APPLICA	ABLE, LIST DATE:	
1	/ 23 // 23	
ACQU		ACQUIRED DISPOSED
	THE STATE OF THE S	► NAME OF BUSINESS ENTITY
	BUSINESS ENTITY	TRIMBLE INC. CMN
	SEALY INTL INC. CMN	
GENERAL	DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
		US EQUITY
US EQUI	TY	05 EQ0111
FAIR MAR	KET VALUE	FAIR MARKET VALUE
X \$2,000		
	01 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE C	DF INVESTMENT	NATURE OF INVESTMENT
X Stock		X Stock Other(Describe)
	(Describe)	Partnership O Income Received of \$0 - \$499
Partne	rship O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)	Income Received of \$500 or More(Report on Schedule C)
	O Income Received of \$300 of More/Report of Streets of	
IF APPLIC	ABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	22	/ /23// <u>23</u>
/_	<u></u>	ACQUIRED DISPOSED
ACQL	JIRED DISPOSED	Aogonies
NAME OF	BUSINESS ENTITY	Filer's Verification
	US INDUSTRIAL PARTNERSHIP LP	
		Print Name Riley, Irene
GENERAL	DESCRIPTION OF THIS BUSINESS	
	ALIAN DE DUNITO	Office, Agency
INVESTM	MENT PARTNER	or Court See Expanded Statement Attachment
FAIR MAR	RKET VALUE	Statement Type X 2023/2024 Annual Assuming Leaving
) - \$10,000 S10,001 - \$100,000	Annual Candidate
X \$100,0	001 - \$1,000,000 Over \$1,000,000	(yr)
		I have used all reasonable diligence in preparing this statement. I have
	OF INVESTMENT	reviewed this statement and to the best of my knowledge the information
X Stock	Other(Describe)	contained herein and in any attached schedules is true and complete.
Partne	ership O Income Received of \$0 - \$499	I certify under penalty of perjury under the laws of the State of
	O Income Received of \$500 or More(Report on Schedule C)	California that the foregoing is true and correct.
IE ADDI 10	CABLE, LIST DATE:	02/15/2024
IF APPLIC	PAULE, GIOT DATE.	Date Signed03/15/2024 (month. day, year)
	<u> </u>	,
ACQ	UIRED DISPOSED	Filer's Signature Irene Riley
		Filet 5 Signature

SCHEDULE A-1 Investments

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT 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	► NAME OF BUSINESS ENTITY
EDWARDSLIFSCIENCES CORPORATION CMN	WHIRLPOOL CORP. CMN
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
X \$2,000 - \$10,000	X \$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other (Describe)	X Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or Mare (Report on Schedule C)	O Income Received of \$500 or More(Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ /23/	/ / 23/_23
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	▶ NAME OF BUSINESS ENTITY
ORACLE CORP. CMN	DIAMONDBACK ENERGY INC, CMN
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000.000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT X Stock Other
X Stock Other(Describe)	(Describe)
☐ Partnership ○ Income Received of \$0 - \$499 ○ Income Received of \$500 or More(Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	File de Manification
	Filer's Verification
BIOGENINC CMN GENERAL DESCRIPTION OF THIS BUSINESS	Print Name Riley, Irene
GENERAL DESCRIPTION OF THIS DOGINESS	
US EQUITY	Office, Agency or Court See Expanded Statement Attachment
FAIR MARKET VALUE	Statement Type X 2023/2024 Annual Assuming Leaving
X \$2,000 - \$10,000	Annual Candidate
S100,001 - \$1,000,000 Over \$1,000,000	I have used all reasonable diligence in preparing this statement. I have
NATURE OF INVESTMENT	reviewed this statement and to the best of my knowledge the information
X Stock Other(Describe)	contained herein and in any attached schedules is true and complete.
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
IF APPLICABLE, LIST DATE:	WW/15/2004
00	Date Signed(month. day, year)
ACQUIRED DISPOSED	Filer's SignatureIrene Riley

SCHEDULE A-1 Investments

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

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	► NAME OF BUSINESS ENTITY
ANALOG DEVICES INC. DMN	AMERICAN INTL GROUP INC CMN
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
-	
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	<u> </u>
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT
NATURE OF INVESTMENT	X Stock Other
X Stock (Describe)	(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
O Income Received of \$500 or More(Report on Schedule C)	- Commence of the commence of
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 23 / / 23	/ / 23
ACQUIRED DISPOSED	ACQUIRED DISPOSED
	► NAME OF BUSINESS ENTITY
NAME OF BUSINESS ENTITY	PRINCIPAL FINANCIAL INC. CMN
NGIC INVESTMENT CORP CMN	GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
US EQUITY	US EQUITY
	FAIR MARKET VALUE
FAIR MARKET VALUE [X] \$2 000 - \$10,000 S10,001 - \$100,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
X \$2,000 - \$10,000 S10,001 - \$100,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	X Stock Other (Describe)
(Describe) Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IT ARRIVED TO LIGHT DATE.	IF APPLICABLE, LIST DATE:
IF APPLICABLE, LIST DATE:	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	Filer's Verification
KENVUE INC. CMN	
GENERAL DESCRIPTION OF THIS BUSINESS	Print Name Riley, Irene
CENERAL SECONIII PROVINCE SECO	
US EQUITY	Office, Agency or Court See Expanded Statement Attachment
FAIR MARKET VALUE	or source
	Statement Type 🗵 2023/2024 Annual Assuming Leaving Annual Candidate
\$100,001 - \$1,000,000 Over \$1,000,000	W) Annual Candidate
	I have used all reasonable diligence in preparing this statement. I have
NATURE OF INVESTMENT	reviewed this statement and to the best of my knowledge the information
X Stock Other(Describe)	contained herein and in any attached schedules is true and complete.
Partnership O Income Received of \$0 - \$499	I certify under penalty of perjury under the laws of the State of
☐ Income Received of \$500 or More(Report on Schedule C)	California that the foregoing is true and correct.
IF APPLICABLE, LIST DATE:	Date Signed03/15/2024
23 / 23	(month. day, year)
ACQUIRED DISPOSED	Irene Rilev
3	Filer's Signature Irene Riley

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

(Ownership Interest is Less Than 10%)
Investments must be itemized.
Do not attach brokerage or financial statements.

► NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY DOMINION ENERGY INC. CMN MICRON TECHNOLOGY INC. CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY US EQUITY FAIR MARKET VALUE FAIR MARKET VALUE **\$10,001 - \$100,000** X \$2,000 - \$10,000 X \$10,001 - \$100,000 \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other _ X Stock Other _ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY STRYKER CORPORATION. CMN O'REILLY AUTOMOTIVE INC. CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US FOULTY US EQUITY FAIR MARKET VALUE FAIR MARKET VALUE X \$10,001 - \$100,000 \$2,000 - \$10,000 X \$10,001 - \$100,000 \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other __ Other _ X Stock Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: ACQUIRED NAME OF BUSINESS ENTITY Filer's Verification TRUST FINANCIAL CORO, CMN Print Name Riley, Irene GENERAL DESCRIPTION OF THIS BUSINESS Office, Agency
See Expanded Statement Attachment US EQUITY FAIR MARKET VALUE \$10,001 - \$100,000 X \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information NATURE OF INVESTMENT Other __ contained herein and in any attached schedules is true and complete. X Stock I certify under penalty of perjury under the laws of the State of Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) California that the foregoing is true and correct. IF APPLICABLE, LIST DATE: Date Signed _____03/15/2024 (month, day, year) / / 23 / 23 ACQUIRED DISPOSED Filer's Signature Irene Riley

SCHEDULE A-1 Investments

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

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 ▶ NAME OF BUSINESS ENTITY MERCADOLIBRE INC. CMN DUKE ENERGY CORPORATION: CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY US EQUITY FAIR MARKET VALUE FAIR MARKET VALUE X \$2,000 - \$10,000 \$10,001 - \$100,000 S10,001 - \$100,000 X \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other __ X Stock Other _ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY ALLY FINANCIAL INC CMN PRODTER& GAMBLE COMPANY (THE) CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY US FOUITY FAIR MARKET VALUE FAIR MARKET VALUE \$10,001 - \$100,000 X \$2,000 - \$10,000 X \$10,001 - \$100,000 \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other _ Other _ X Stock Partnership O Income Received of \$0 - \$499 Partnership Olncome Received of \$0 - \$499 O Income Received of \$500 or Mare(Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: ACQUIRED Filer's Verification NAME OF BUSINESS ENTITY ACTIVISIONBUZZARD INC CMN Print Name Riley, Irene GENERAL DESCRIPTION OF THIS BUSINESS Office, Agency
See Expanded Statement Attachment US EQUITY FAIR MARKET VALUE Statement Type X \$10,001 - \$100,000 \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information NATURE OF INVESTMENT contained herein and in any attached schedules is true and complete. X Stock Other __ I certify under penalty of perjury under the laws of the State of Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C) California that the foregoing is true and correct. IF APPLICABLE, LIST DATE: Date Signed _____03/15/2024 (month, day, year) / / 23 / 23 ACQUIRED DISPOSED ACQUIRED Filer's Signature Irene Riley

SCHEDULE A-1 Investments

FAIR POLITICAL PRACTICES COMMISSION

CALIFORNIA FORM

Stocks, Bonds, and Other Interests

AMENDMENT

(Ownership Interest is Less Than 10%) Investments must be itemized.

Do not attach brokerage or financial statements. ▶ NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY MERCK&CO.INC. CMN WELL TOWER INC. GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY US EQUITY FAIR MARKET VALUE FAIR MARKET VALUE X \$10,001 - \$100,000 \$2,000 - \$10,000 \$2,000 - \$10,000 X S10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other_ X Stock Other_ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: / / 23 / / 23
ACQUIRED DISPOSED NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY EDISON INTERNATIONAL. CMN DARDEN RESTAURANTS INC. CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY US EQUITY FAIR MARKET VALUE FAIR MARKET VALUE \$10,001 - \$100,000 X \$10,001 - \$100,000 X \$2,000 - \$10,000 \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other __ X Stock Other = (Describe) Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: / /23 / /23 ACQUIRED DISPOSED NAME OF BUSINESS ENTITY Filer's Verification BAXTER INTERNATIONAL INC. CMN Print Name Riley, Irene GENERAL DESCRIPTION OF THIS BUSINESS Office, Agency
See Expanded Statement Attachment US EQUITY FAIR MARKET VALUE \$10,001 - \$100,000 X \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information NATURE OF INVESTMENT X Stock Other = contained herein and in any attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) California that the foregoing is true and correct. IF APPLICABLE, LIST DATE: Date Signed _____03/15/2024 (month, day, year) / /23 / /23 ACQUIRED DISPOSED

Filer's Signature Irene Riley

Comments:

SCHEDULE A-1 Investments

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

TATES SECTION OF THE

AMENDMENT

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

	► NAME OF BUSINESS ENTITY
NAME OF BUSINESS ENTITY	
TOLLBBBROTHERS INC. CMN	IQVIA HOLDINGS INC. CMN
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	X \$2,000 - \$10,000 S10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT X Stock Other	NATURE OF INVESTMENT X Stock Other (Describe)
(Describe) ☐ Partnership	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
UNITED PARCEL SERVICE, INC CLASS B COMMON STOCK	BECTON DICKINSON AND COMPANY CMN
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
US EQUITY	US EQUITY
	FAIR MARKET VALUE
FAIR MARKET VALUE	\$2,000 - \$10,000 X \$10,001 - \$100,000
\$2,000 - \$10,000 X \$10,001 - \$100,000 \$100,001 - \$1,000,000 \	\$100,001 - \$1,000,000 Over \$1,000,000
\$100,001 - \$1,000,000 Over \$1,000,000	
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other(Describe)	X Stock Other(Describe)
Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership Oncome Received of \$0 - \$499 Oncome Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ /23 / / /23	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	Filer's Verification
CIGNA GROUP/THE	
GENERAL DESCRIPTION OF THIS BUSINESS	Print Name Riley, Irene
US EQUITY	Office, Agency or Court See Expanded Statement Attachment
FAIR MARKET VALUE	Statement Type X 2023/2024 Annual Assuming Leaving
S10,001 - \$100,000	Annual Candidate
S100,001 - \$1,000,000 Over \$1,000,000	25.00
NATURE OF INVESTMENT	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information
X Stock Other (Describe)	contained herein and in any attached schedules is true and complete.
Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
IF APPLICABLE, LIST DATE:	Date Signed03/15/2024
, , , 23	(month, day. year)
ACQUIRED DISPOSED	Filer's SignatureIrene Riley

Comments:

SCHEDULE A-1 Investments

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
CME GROUP INC CMN	DEVON ENERGY CORPORATION INC. CMN
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
SEREIVE SESSION TO THE SESSION TO TH	
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	<u>X</u> \$10,000 <u>X</u> \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT X Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT X Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	/ /23
	ACQUIRED DISPOSED
ACQUIRED DISPOSED	
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
HONEYWELL INTL. INC. CMN	MCDONALDS CORP. CMN
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
■ \$2,000 - \$10,000 X \$10,001 - \$100,000	□ \$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT X Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT X Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED
NAME OF BUSINESS ENTITY	Filer's Verification
BEST BUY CO. INC CMN	Dilara Tremo
GENERAL DESCRIPTION OF THIS BUSINESS	Print Name Riley, Irene
US EQUITY	Office, Agency or Court See Expanded Statement Attachment
FAIR MARKET VALUE	
X \$2,000 - \$10,000 S10,001 - \$100,000	Statement Type
\$100,001 - \$1,000,000 Over \$1,000,000	[]
NATURE OF INVESTMENT X Stock Other (Describe)	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.
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
IF APPLICABLE, LIST DATE:	Date Signed03/15/2024
, , 23	(month. day. year)
	Turn Piler
ACQUIRED DISPOSED	Filer's Signature

Comments: _____

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

<u></u>	NAME OF BUSINESS ENTITY	>	NAME OF BUSINESS ENTITY
	BRIXMOR PROPERTY GROUP CMN	l	ESTEE LAUDER COS. INC. CMN
	GENERAL DESCRIPTION OF THIS BUSINESS	l	GENERAL DESCRIPTION OF THIS BUSINESS
	GENERAL DESCRIPTION OF THIS BUSINESS	1	
	HO BOILEY	l	US EQUITY
	US EQUITY	1	
	FAIR MARKET VALUE	1	FAIR MARKET VALUE
	X \$2,000 - \$10,000 S10,001 - \$100,000		X \$2,000 - \$10,000
	S100,001 - \$1,000,000 Over \$1,000,000		S100,001 - \$1,000,000 Over \$1,000,000
		ı	NATURE OF INVESTMENT
	NATURE OF INVESTMENT	1	NATURE OF INVESTMENT
	X Stock Other (Describe)	1	X Stock Other (Describe)
	Partnership O Income Received of \$0 - \$499	ı	Partnership O Income Received of \$0 - \$499
	O Income Received of \$500 or More (Report on Schedule C)	1	○ Income Received of \$500 or More (Report on Schedule C)
		1	
	IF APPLICABLE, LIST DATE:	ı	IF APPLICABLE, LIST DATE:
	22	ł	/ /23//23
		1	ACQUIRED DISPOSED
	ACQUIRED DISPOSED		ACQUIRED
_	NAME OF BUSINESS ENTITY	 	NAME OF BUSINESS ENTITY
	EATON CORP. PLC. CMN	1	CUMMINGS INC CMN
		1	GENERAL DESCRIPTION OF THIS BUSINESS
	GENERAL DESCRIPTION OF THIS BUSINESS	1	GENERAL DESCRIPTION OF THIS BOSINESS
		1	US EQUITY
	US EQUITY	1	03 EQ0111
	FAIR MARKET VALUE	1	FAIR MARKET VALUE
	X \$2,000 - \$10,000 S10,001 - \$100,000	1	X \$2,000 - \$10,000
	\$100,001 - \$1,000,000 Over \$1,000,000	1	\$100,001 - \$1,000,000 Over \$1,000,000
	3100,001 \$1,000,000	1	
	MATURE OF INVESTMENT	1	NATURE OF INVESTMENT
	NATURE OF INVESTMENT X Stock Other	1	X Stock Other
	X Stock (Describe)	1	(Describe)
	Partnership O Income Received of \$0 - \$499	1	Partnership O Income Received of \$0 - \$499
	O Income Received of \$500 or More (Report on Schedule C)	1	O Income Received of \$500 or More (Report on Schedule C)
	IE ADDITOADI E LICE DATE		IF APPLICABLE, LIST DATE:
	IF APPLICABLE, LIST DATE:	1	
	/ /23 / /23	1	
	ACQUIRED DISPOSED	1	ACQUIRED DISPOSED
_		_	
•	NAME OF BUSINESS ENTITY		iler's Verification
	ELI LILY&CO CMN		
	GENERAL DESCRIPTION OF THIS BUSINESS	Pr	rint Name Riley, Irene
		1	
	US EQUITY		ffice, Agency See Expanded Statement Attachment
		or	r Court See Expanded Statement Actachment
	FAIR MARKET VALUE	e	tatement Type X 2023/2024 Annual Assuming Leaving
	S2,000 - \$10,000 S10,001 - \$100,000	ادا	Annual Candidate
	X \$100,001 - \$1,000,000 Over \$1,000,000	ı	(yi)
		111	have used all reasonable diligence in preparing this statement. I have
	NATURE OF INVESTMENT	l re	eviewed this statement and to the best of my knowledge the information
	X Stock Other (Describe)	CC	ontained herein and in any attached schedules is true and complete.
	Partnership O Income Received of \$0 - \$499	Ъ.	certify under penalty of perjury under the laws of the State of
	O Income Received of \$500 or More (Report on Schedule C)	l c	alifornia that the foregoing is true and correct.
		1	
	IF APPLICABLE, LIST DATE:	D	ate Signed03/15/2024
	, ,,,, , ,,,,,		(month, day, year)
	ACQUIRED DISPOSED	П	
	ACQUIRED DISPOSED	l Ei	iler's Signature Irene Riley

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests A M

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

▶	NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
	GENERAL MILLA CMN	RNIYED AIRLINES HOLDINGS INC. CMN
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	US EQUITY	US EQUITY
	FAID MADIZET VALUE	FAIR MARKET VALUE
	FAIR MARKET VALUE	X \$2,000 - \$10,000 S10,001 - \$100,000
	X \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,000 - \$1,000,000 \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
		ALTERE OF INVESTMENT
	NATURE OF INVESTMENT	NATURE OF INVESTMENT X Slock Other
	X Stock Other (Describe)	(Describe)
	Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More(Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	_// <u>23</u> / <u></u> / <u>23</u>	
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
<u> </u>	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	CHEMOURS COMPANY (THE) CMN	ONEOK INC.
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	US EQUITY	US EQUITY
	FAIR MARKET VALUE	FAIR MARKET VALUE
	X \$2,000 - \$10,000	\$2,000 - \$10,000 X \$10,001 - \$100,000 S100,001 - \$1,000,000 Over \$1,000,000
	\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	NATURE OF INVESTMENT X Stock Other
	X Stock (Describe)	(Describe)
	Partnership Oncome Received of \$0 - \$499 Oncome Received of \$500 or More(Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	/ /23/ <u></u> /_23	
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
<u></u>	NAME OF BUSINESS ENTITY	Filer's Verification
	BROADCOM INC CMN	Print Name Riley, Irene
	GENERAL DESCRIPTION OF THIS BUSINESS	
	US EQUITY	Office, Agency or Court See Expanded Statement Attachment
	FAIR MARKET VALUE	Statement Type X 2023/2024 Annual Assuming Leaving
	□ \$2,000 - \$10,000 □ \$2,000 □ \$2,000	Annual Candidate
	\$100,001 - \$1,000,000 Over \$1,000,000	0.7500
	NATURE OF INVESTMENT	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information
	X Stock Other	contained herein and in any attached schedules is true and complete.
	(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
	IF APPLICABLE, LIST DATE:	Date Signed03/15/2024
	/ /23 / /23	(month, day, year)
	ACQUIRED DISPOSED	Turne Pilou
	AOGOIVED DIG OCED	Filer's Signature Irene Riley

SCHEDULE A-1 Investments

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

•	NAME OF BUSINESS ENTITY	NAIVIE OF BUSINESS LIVITI
	T-MOBILE US. CMN	MICROSOFT INC. CMN
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	US EQUITY	US EQUITY
	FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000	X \$100,001 - \$1,000,000 Over \$1,000,000
	[\$100,001 - \$1,000,000 [Over \$1,000,000	
	NATURE OF INVESTMENT	NATURE OF INVESTMENT X Slock Other
	X Stock Other (Describe)	(Describe)
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
_		
▶	NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
	OCCIDENTALPETROLEUM CORP. CMN	ELEVANCE HEALTH INC. CMN
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	US EQUITY	US EQUITY
	FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000 X \$10,001 - \$100,000	X \$2,000 - \$10,000
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	NATURE OF INVESTMENT
	X Stock Other	X Stock Other (Describe)
	(Describe) Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
	O Income Received of \$500 or More(Report on Schedule C)	○ Income Received of \$500 or More(Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
<u> </u>	NAME OF BUSINESS ENTITY	Filer's Verification
	NORTHROP GRUMMAN CORP. CMN	
	GENERAL DESCRIPTION OF THIS BUSINESS	Print Name Riley, Irene
	US EQUITY	Office, Agency or Court See Expanded Statement Attachment
	FAIR MARKET VALUE	
	\$2,000 - \$10,000	Statement Type 2023/2024 Annual Assuming Leaving
	\$100,001 - \$1,000,000 Over \$1,000,000	Annual Candidate
	NATURE OF INVESTMENT	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information
	X Stock Other	contained herein and in any attached schedules is true and complete.
	(Describe)	
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
	IF APPLICABLE, LIST DATE:	Date Signed 03/15/2024
	/ /23 / /23	(month, day, year)
	ACQUIRED DISPOSED	
	AOGOINED DIOI OCED	Filer's Signature Irene Riley

Comments:

SCHEDULE A-1 Investments

CALIFORNIA FORM / UU
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

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 ▶ NAME OF BUSINESS ENTITY FORD MOTOR COMPny can EXXON MOBIL CORPORATION CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS us equity US EQUITY FAIR MARKET VALUE FAIR MARKET VALUE \$10,001 - \$100,000 X \$2,000 - \$10,000 X \$10,001 - \$100,000 \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other X Stock Other _ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY CISCO SYSTEMS INC CMN CENTENE CORPORATION CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY US EQUITY FAIR MARKET VALUE FAIR MARKET VALUE X \$10,001 - \$100,000 S10,001 - \$100,000 \$2,000 - \$10,000 X \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other X Stock Other (Describe) Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: _/___/**23**_ NAME OF BUSINESS ENTITY Filer's Verification BANK OF AMERICA CORP. INC CMN Print Name Riley, Irene GENERAL DESCRIPTION OF THIS BUSINESS Office, Agency
See Expanded Statement Attachment US EQUITY FAIR MARKET VALUE X 2023/2024 Annual Assuming Leaving Annual Candidate Statement Type X \$10,001 - \$100,000 \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information NATURE OF INVESTMENT Other __ contained herein and in any attached schedules is true and complete. X Stock I certify under penalty of perjury under the laws of the State of Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) California that the foregoing is true and correct. IF APPLICABLE, LIST DATE: Date Signed _____03/15/2024 (month, day, year) / /23 / /23 ACQUIRED DISPOSED Filer's Signature Irene Riley

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

(Ownership Interest is Less Than 10%) Investments must be itemized. Do not attach brokerage or financial statements.

► NAME OF BUSINESS ENTITY ▶ NAME OF BUSINESS ENTITY REALTY INCOME CORPIRATION. VMN PULTEGROUP CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EOUITY US EQUITY FAIR MARKET VALUE FAIR MARKET VALUE S10,001 - \$100,000 S10,001 - \$100,000 X \$2,000 - \$10,000 X \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other X Stock Other __ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: ACQUIRED NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY ANSYS INC CMN OLD REPUBLICAN INTL CORP/ CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY US EOUITY FAIR MARKET VALUE FAIR MARKET VALUE X \$10,001 - \$100,000 \$2,000 - \$10,000 X \$10,001 - \$100,000 \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other __ X Stock Other _ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: / /23 / /23
ACQUIRED DISPOSED ACQUIRED NAME OF BUSINESS ENTITY Filer's Verification WALT DISNEY COMPANY (THE) .. CMN Print Name Riley, Irene GENERAL DESCRIPTION OF THIS BUSINESS Office, Agency
or Court ___ See Expanded Statement Attachment US EQUITY Statement Type 🐰 2023/2024 Annual Assuming Leaving Annual FAIR MARKET VALUE \$2,000 - \$10,000 X \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information NATURE OF INVESTMENT contained herein and in any attached schedules is true and complete. X Stock Other ___ I certify under penalty of perjury under the laws of the State of Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) California that the foregoing is true and correct. IF APPLICABLE, LIST DATE: Date Signed _____03/15/2024 (month, day, year) / / 23 / 23
ACQUIRED DISPOSED Filer's Signature Irene Riley

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

(Ownership Interest is Less Than 10%)
Investments must be itemized.
Do not attach brokerage or financial statements.

▶ NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY CHENERE ENERGY INC CMN DANAHER DORPORATION CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY US EQUITY FAIR MARKET VALUE FAIR MARKET VALUE X \$10,001 - \$100,000 \$2,000 - \$10,000 X \$2,000 - \$10,000 S10,001 - \$100,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other X Stock Other _ (Describe) Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: / / 23 ACQUIRED ACQUIRED NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY TESLA INC. CMN ABBVIE INC CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY US EQUITY FAIR MARKET VALUE FAIR MARKET VALUE \$10,001 - \$100,000 X \$10,001 - \$100,000 \$2,000 - \$10,000 \$2,000 - \$10,000 Over \$1,000,000 Over \$1,000,000 X \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other _ X Stock Other _ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: _/___/**23**_ ACQUIRED / /23 / /23
ACQUIRED DISPOSED NAME OF BUSINESS ENTITY Filer's Verification SERVICENOW INC. CMN Print Name Riley, Irene GENERAL DESCRIPTION OF THIS BUSINESS Office, Agency
See Expanded Statement Attachment US FOUITY FAIR MARKET VALUE Statement Type S10,001 - \$100,000 X \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000 I have used all reasonable diligence in preparing this statement. I have NATURE OF INVESTMENT reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. X Stock Other _ I certify under penalty of perjury under the laws of the State of Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) California that the foregoing is true and correct. IF APPLICABLE, LIST DATE: Date Signed 03/15/2024 (month, day, year) / /23 / 23
ACQUIRED DISPOSED Filer's Signature Irene Riley

Comments:

SCHEDULE A-1 Investments

CALIFORNIA FORM / UU
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

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 ▶ NAME OF BUSINESS ENTITY SHERWIN-WILLIAMS CO. CMN PENSKE AUTOMOTIVE GROUP INC. CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY US EOUOTY FAIR MARKET VALUE FAIR MARKET VALUE \$10,001 - \$100,000 S10,001 - \$100,000 \$2,000 - \$10,000 X \$2,000 - \$10,000 Over \$1,000,000 X \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other = X Stock Other _ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY PFIZER INC. CMN CBRE GROUP INC CMN CLASS A GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY US FOUITY FAIR MARKET VALUE FAIR MARKET VALUE X \$10,001 - \$100,000 S10,001 - \$100,000 \$2,000 - \$10,000 X \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other X Stack Other _ (Describe) Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: ACQUIRED ACQUIRED NAME OF BUSINESS ENTITY Filer's Verification BERKSHIRE HATHAWAY INC CMN Print Name Riley, Irene GENERAL DESCRIPTION OF THIS BUSINESS Office, Agency
or Court See Expanded Statement Attachment US EQUITY FAIR MARKET VALUE X 2023/2024 Annual Assuming Leaving Annual Candidate Statement Type X \$10,001 - \$100,000 \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information NATURE OF INVESTMENT X Stock Other contained herein and in any attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of Partnership O Income Received of \$0 - \$499 California that the foregoing is true and correct. O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: Date Signed _____03/15/2024 (month, day, year) /___/23 ____/____/_23
ACQUIRED DISPOSED Filer's Signature Irene Riley

Comments: _____

SCHEDULE A-1 Investments

CALIFORNIA FORM / UU
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

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 ▶ NAME OF BUSINESS ENTITY LEIDOS HLDS INC. CMN gap inc. can GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS us equity US EQUITY FAIR MARKET VALUE FAIR MARKET VALUE \$10,001 - \$100,000 X S10,001 - \$100,000 X \$2,000 - \$10,000 \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other _ X Stock Other __ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More(Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: ACQUIRED NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY ONEMAN HOLDINGS INC. CMN JP MORGAN CHASE & CO. CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY US EOUITY FAIR MARKET VALUE FAIR MARKET VALUE 10,001 - \$100,000 S10,001 - \$100,000
Over \$1,000,000 X \$2,000 - \$10,000 \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 X \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other X Stock Other _ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More(Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: / /23 / /23 ACQUIRED DISPOSED /___/**23** ACQUIRED NAME OF BUSINESS ENTITY Filer's Verification SENSATA TECHNOLOGY HOLDINGS CMN Print Name Riley, Irene GENERAL DESCRIPTION OF THIS BUSINESS Office, Agency
See Expanded Statement Attachment US EQUITY FAIR MARKET VALUE X 2023/2024 Annual Assuming Leaving Candidate Statement Type S10,001 - \$100,000 X \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000 I have used all reasonable diligence in preparing this statement. I have NATURE OF INVESTMENT reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. X Stock Other = I certify under penalty of perjury under the laws of the State of Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C) California that the foregoing is true and correct. IF APPLICABLE, LIST DATE: Date Signed _____03/15/2024 (month, day, year) / /23 / /23
ACQUIRED DISPOSED Filer's Signature Irene Riley

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
PEPSICO INC. CMN	EQT CI\ORP. CMN
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
US EQUITY	USEQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	X Stock Other (Describe)
(Describe) ☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More(Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, , 23, 23	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
META PLATFORMS INC. CMN CLASS A	LINCOLN NATL CORP INC. CMN
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 S10,001 - \$100,000	X \$2,000 - \$10,000
X \$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
_	
NATURE OF INVESTMENT	NATURE OF INVESTMENT X Stock Other
X Stock Other (Describe)	(Describe)
☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More(Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, ,23 , ,23	/ /23//23
	ACQUIRED DISPOSED
,100011125	
► NAME OF BUSINESS ENTITY	Filer's Verification
ALRIA GROUPINC CMN	Print Name Riley, Irene
GENERAL DESCRIPTION OF THIS BUSINESS	Fint Name
US EQUITY	Office, Agency or Court See Expanded Statement Attachment
FAIR MARKET VALUE	Statement Type X 2023/2024 Annual Assuming Leaving
\$2,000 - \$10,000 <u>X</u> \$10,001 - \$100,000	Statement Type S2023/2024 Annual Candidate
\$100,001 - \$1,000,000 Over \$1,000,000	
NATURE OF INVESTMENT	I have used all reasonable diligence in preparing this statement. I have
X Stock Other	reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.
(Describe)	I certify under penalty of perjury under the laws of the State of
Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More(Report on Schedule C)	California that the foregoing is true and correct.
IF APPLICABLE, LIST DATE:	Date Signed03/15/2024
, ,23 , ,23	(month. day. year)
ACQUIRED DISPOSED	Trene Riley
	Filer's Signature Irene Riley

SCHEDULE A-1 Investments

CALIFORNIA FORM / UU
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

•	NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
	LAMB WESTON HOLDINGS INC. CMN	PG7E CORP. CMN
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	US EQUITY	US EQUITY
	FAIR MARKET VALUE	FAIR MARKET VALUE
	X \$2,000 - \$10,000 S10,001 - \$100,000	X \$2,000 - \$10,000
	\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT X Stock Other	NATURE OF INVESTMENT X Stock Other (Describe)
	(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED	
▶	NAME OF BUSINESS ENTITY HCA HEALTHCARE INC. CMN	► NAME OF BUSINESS ENTITY MASTERCARD INCORPORATION. CMN CLASS A
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	US EQUITY	US EQUITY
	FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000 X S10,001 - \$100,000	☐ \$2,000 - \$10,000 X \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000.000 Over \$1,000,000
	NATURE OF INVESTMENT	NATURE OF INVESTMENT
	X Stock Other (Describe)	X Stock Other (Describe)
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
•	NAME OF BUSINESS ENTITY	Filer's Verification
	LAMAR ADVERTISING COMPANY CMN CLASS A	9/1
	GENERAL DESCRIPTION OF THIS BUSINESS	Print Name Riley, Irene
	US EQUITY	Office, Agency or Court See Expanded Statement Attachment
	FAIR MARKET VALUE	Statement Type 2023/2024 Annual Assuming Leaving
	X \$2,000 - \$10,000 S10,001 - \$100,000	Statement Type
	\$100,001 - \$1,000,000 Over \$1,000,000	I have used all reasonable diligence in preparing this statement. I have
	NATURE OF INVESTMENT X Stock	I reviewed this statement and to the best of my knowledge the information
	(Describe)	contained herein and in any attached schedules is true and complete.
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
	IF APPLICABLE, LIST DATE:	Date Signed03/15/2024 (month, day, year)
	/ /23/	(monin, day, year)
	ACQUIRED DISPOSED	Filer's Signature Irene Riley

SCHEDULE A-1 Investments

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

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	► NAME OF BUSINESS ENTITY
	ARISTA NETWORKS INC. CMN	TE CONNECTIVITY LTD. CMN
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	USEQUITY	US EQUITY
	FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000 X \$10,000 - \$100,000	X \$2,000 - \$10,000
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	NATURE OF INVESTMENT
	X Stock Other (Describe)	X Stock Other (Describe)
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership () Income Received of \$0 - \$499 () Income Received of \$500 or More(Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	, , <u>23</u> , <u>23</u>	
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
•	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	UNITED HEALTH GROUP INC. CMN	MARATHON OIL CORPORATION. CMN
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	US EQUITY	US EQUITY
	FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000 S10,001 - \$100,000	X \$10,000 - \$100,000 X \$10,000
	X \$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	NATURE OF INVESTMENT X Stock Other
	X Stock Other (Describe)	(Describe)
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	/ /23/	
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
•	NAME OF BUSINESS ENTITY	Filer's Verification
	AVERY DENNISON CORPORATION INC. CMN GENERAL DESCRIPTION OF THIS BUSINESS	Print Name Riley, Irene
	US EQUITY	Office, Agency or Court See Expanded Statement Attachment
	FAIR MARKET VALUE	Statement Type X 2023/2024 Annual Assuming Leaving
	S2,000 - \$10.000 X \$10,001 - \$100,000	Annual Candidate
	S100,001 - \$1,000,000 Over \$1,000,000	55.04
	NATURE OF INVESTMENT	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information
	X Stock Other	contained herein and in any attached schedules is true and complete.
	(Describe)	I certify under penalty of perjury under the laws of the State of
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	California that the foregoing is true and correct.
	IF APPLICABLE, LIST DATE:	Date Signed 03/15/2024 (month. day. year)
	ACQUIRED DISPOSED	Filer's Signature Irene Riley

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

┢	NAME OF BUSINESS ENTITY	•	NAME OF BUSINESS ENTITY
	APPLE INC.CMN		RANGE RESOURCESCORPORATION CMN
	GENERAL DESCRIPTION OF THIS BUSINESS		GENERAL DESCRIPTION OF THIS BUSINESS
	GENERAL BESSEAL HON OF THIS SOURCES		
	US EQUITY		US EQUITY
	FAIR MARKET VALUE		FAIR MARKET VALUE \$\int \\$2,000 - \\$10,000
	\$2,000 - \$10,000		
	X \$100,001 - \$1,000,000		\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	1	NATURE OF INVESTMENT
	NATURE OF INVESTMENT X Stock		Stock Other
	X Stock (Describe)	l	(Describe)
	Partnership O Income Received of \$0 - \$499	1	Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
	O Income Received of \$500 or More (Report on Schedule C)	ı	O Income Received of \$300 or More (Nepon on Sancasic Sy
	IF APPLICABLE, LIST DATE:	l	IF APPLICABLE, LIST DATE:
		1	00 00
		l	
	ACQUIRED DISPOSED	l	ACQUIRED DISPOSED
_	NAME OF BUSINESS ENTITY		NAME OF BUSINESS ENTITY
	ALPHABET INC CMN CLASS A	`	BERRY GLOBAL GROUP INC CMN
		1	GENERAL DESCRIPTION OF THIS BUSINESS
	GENERAL DESCRIPTION OF THIS BUSINESS	1	GENERAL DESCRIPTION OF THIS BOOMESO
	US EQUITY	1	US EQUITY
	US EQUIII	1	
	FAIR MARKET VALUE	1	FAIR MARKET VALUE
	\$2,000 - \$10,000 S10,001 - \$100,000	1	X \$2,000 - \$10,000
	X \$100,001 - \$1,000,000 Over \$1,000,000	1	S100,001 - \$1,000,000 Over \$1,000,000
		1	
	NATURE OF INVESTMENT	1	NATURE OF INVESTMENT
	X Stock Other(Describe)	1	X Stock Other (Describe)
	Partnership () Income Received of \$0 - \$499	1	Partnership O Income Received of \$0 - \$499
	O Income Received of \$500 or More (Report on Schedule C)	1	O Income Received of \$500 or More (Report on Schedule C)
			IF APPLICABLE, LIST DATE:
	IF APPLICABLE, LIST DATE:		
	, , <u>23</u>	1	
	ACQUIRED DISPOSED	1	ACQUIRED DISPOSED
		_	
\blacktriangleright	NAME OF BUSINESS ENTITY		ler's Verification
	PALO ALTO NETWORK INC. CMN		Diley Trene
	GENERAL DESCRIPTION OF THIS BUSINESS	Pri	int Name Riley, Irene
		١٠	fice, Agency
	US EQUITY		Court See Expanded Statement Attachment
	FAIR MARKET VALUE	1	Decorporate Date and the second of the secon
	X \$2,000 - \$10,000 S10,001 - \$100,000	Sta	atement Type X 2023/2024 Annual Assuming Leaving
	\$1,000,001 - \$1,000,000 Over \$1,000,000	1	Annual Candidate
		Lb	ave used all reasonable diligence in preparing this statement. I have
	NATURE OF INVESTMENT	rev	viewed this statement and to the best of my knowledge the information
	X Stock Other(Describe)	co	ntained herein and in any attached schedules is true and complete.
	Partnership	1,,	certify under penalty of perjury under the laws of the State of
	O Income Received of \$500 or More (Report on Schedule C)	Ca	alifornia that the foregoing is true and correct.
		1	
	IF APPLICABLE, LIST DATE:	Da	ate Signed03/15/2024 (month, day, year)
	/ /23 / /23		(month, day, year)
	ACQUIRED DISPOSED		Irene Rilev
	,	Fil	ler's Signature Irene Riley
		-	

SCHEDULE A-1 Investments

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

•	NAME OF BUSINESS ENTITY	NAIVIE OF BUSINESS ENTITY
	ANCOA CORPORATION CMN	SSALESFORCE INC. CMN
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	US EQUITY	US EQUITY
	FAIR MARKET VALUE	FAIR MARKET VALUE
		\$2,000 - \$10,000 X \$10,001 - \$100,000
	X \$2,000 - \$10,000	\$100,001 - \$1,000,000 Over \$1,000,000
		_
	NATURE OF INVESTMENT	NATURE OF INVESTMENT
	X Stock Other (Describe)	X Stock Other(Describe)
	Partnership Income Received of \$0 - \$499 Income Received of \$500 or More(Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	, , 23, 23	
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
_	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	STARBUCKSCORP. CMN	MONDELEZ INTERNATIONAL INC. CMN
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	US EQUITY	US EQUITY
	FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000 \$10,001 - \$100,000	X \$2,000 - \$10,000
	\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
	[]	
	NATURE OF INVESTMENT	NATURE OF INVESTMENT
	X Stock (Describe)	X Stock (Describe)
	Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
	O Income Received of \$500 or More (Report on Schedule C)	○ Income Received of \$500 or More(Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	/ / 23 / <u>/23</u>	<u></u>
	ACQUIRED DISPOSED '	ACQUIRED DISPOSED
_	NAME OF BUSINESS ENTITY	Filer's Verification
		Filer's Verification
	APPLIED MATERIALS INC.CMN GENERAL DESCRIPTION OF THIS BUSINESS	Print Name Riley, Irene
	US EAUITY	Office, Agency or Court See Expanded Statement Attachment
	FAIR MARKET VALUE \$\int\\$ \\$2,000 - \\$10,000 \text{X} \\$10,001 - \\$100,000	Statement Type X 2023/2024 Annual Assuming Leaving
	\$100,001 - \$1,000,000 Over \$1,000,000	Annual Candidate
		I have used all reasonable diligence in preparing this statement. I have
	NATURE OF INVESTMENT	reviewed this statement and to the best of my knowledge the information
	X Stock Other (Describe)	contained herein and in any attached schedules is true and complete.
	Partnership Income Received of \$0 - \$499	I certify under penalty of perjury under the laws of the State of
	O Income Received of \$500 or More (Report on Schedule C)	California that the foregoing is true and correct.
	IF APPLICABLE, LIST DATE:	Date Signed03/15/2024
		(month, day, year)
	ACQUIRED DISPOSED	Trene Pilev
		Filer's Signature Irene Riley

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

(Ownership Interest is Less Than 10%)
Investments must be itemized.

Do not attach brokerage or financial statements. ▶ NAME OF BUSINESS ENTITY ▶ NAME OF BUSINESS ENTITY INTUIT INC. CMN MICRCHIP TECHNOLOGYING. CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US FOUITY US EQUITY FAIR MARKET VALUE FAIR MARKET VALUE \$10,001 - \$100,000 X \$2,000 - \$10,000 X \$10,001 - \$100,000 \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other X Stock Other _ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY SEI INVESTMENTSCOMPANY. CMN MANPOWER GROUP GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY US FOUITY FAIR MARKET VALUE FAIR MARKET VALUE X \$10,001 - \$100,000 \$10,001 - \$100,000 \$2,000 - \$10,000 X \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other __ X Stock Other _ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: _/__/**23**__ACQUIRED NAME OF BUSINESS ENTITY Filer's Verification COSTCO WHOLESALE CORPORATION CMN Print Name Riley, Irene GENERAL DESCRIPTION OF THIS BUSINESS Office, Agency
or Court ____ See Expanded Statement Attachment US EQUITY FAIR MARKET VALUE X 2023/2024 Annual Assuming Leaving Candidate Statement Type X \$10,001 - \$100,000 \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 I have used all reasonable diligence in preparing this statement. I have NATURE OF INVESTMENT reviewed this statement and to the best of my knowledge the information Other ___ contained herein and in any attached schedules is true and complete. X Stock I certify under penalty of perjury under the laws of the State of Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) California that the foregoing is true and correct. IF APPLICABLE, LIST DATE: Date Signed _____03/15/2024 (month, day, year) / / 23 / / 23 ACQUIRED DISPOSED Filer's Signature Irene Riley

Comments: ___

SCHEDULE A-1 Investments

CALIFORNIA FORM / UU FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

▶	NAME OF BUSINESS ENTITY	P TANAL OF BOOKEDS EATTH
	MARTIN MARIETTAMATERIAL INC. CMN	BOEING COMPANY INC CMN
		GENERAL DESCRIPTION OF THIS BUSINESS
	GENERAL DESCRIPTION OF THIS BUSINESS	CENTER DESCRIPTION OF THIS DESCRIPTION
	11	
	US EQUITY	US EQUITY
	EAID MADIET VALUE	FAIR MARKET VALUE
	FAIR MARKET VALUE	\$10,001 - \$100,000 \$10,001 - \$100,000
	<u>x</u> \$10,000 - \$100,000	
	S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	NATURE OF INVESTMENT
	X Stock Other	X Stock Other
	(Describe)	(Describe)
	Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
	○ Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
		00 00
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
•	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	BOOKING HOLDINGS INC CMN	MARATHON PETROLEUM CORPORATION
		GENERAL DESCRIPTION OF THIS BUSINESS
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BOSINESS
	US EQUITY	US EQUITY
		FAIR MARKET VALUE
	FAIR MARKET VALUE	
	X \$10,000 - \$100,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	ALATHUR OF BUILDING	NATURE OF INVESTMENT
	NATURE OF INVESTMENT	X Stock Other
	X Stock (Describe)	(Describe)
		Partnership O Income Received of \$0 - \$499
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
	O Income Received of Wada of Worle (Report on Schedule of	
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	IF AFFEIGABLE, CIGT DATE.	
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
	ACQUINED	
	NAME OF BUSINESS ENTITY	Filer's Verification
	NAME OF BOOMEOU ENTITY	Filer 5 Verification
	AMGEN INC CMN	Pilou Tropo
	GENERAL DESCRIPTION OF THIS BUSINESS	Print Name Riley, Irene
	TIC POLITEY	Office, Agency or Court See Expanded Statement Attachment
	US EQUITY	or Court See Expanded Statement Attachment
	FAIR MARKET VALUE	
	\$2,000 - \$10,000 X \$10,001 - \$100,000	Statement Type X 2023/2024 Annual Assuming Leaving
	\$100,001 - \$1,000,000 Over \$1,000,000	Annual Candidate
		I have used all reasonable diligence in preparing this statement. I have
	NATURE OF INVESTMENT	reviewed this statement and to the best of my knowledge the information
	X Stock (Describe)	contained herein and in any attached schedules is true and complete.
		I certify under penalty of perjury under the laws of the State of
	Partnership Income Received of \$0 - \$499	Certify under penalty of perjury under the laws of the State of
	○ Income Received of \$500 or More(Report on Schedule C)	California that the foregoing is true and correct.
	IF APPLICABLE, LIST DATE:	10.710.7000
	IF AFFLIOADLE, LIST DATE.	Date Signed03/15/2024
	/ /23 / /23	(month, day, year)
	ACQUIRED DISPOSED	
	ACQUIRED DISPOSED	Filer's Signature Irene Riley
		3

Comments: ___

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

(Ownership Interest is Less Than 10%)
Investments must be itemized.
Do not attach brokerage or financial statements.

▶ NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY WESTLAKE CORO\P CHARTER COMMUNICCATION INC CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY US EQUITY FAIR MARKET VALUE FAIR MARKET VALUE X \$10,001 - \$100,000 \$2,000 - \$10,000 X \$10,001 - \$100,000 \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Slock Other _ X Stock Other_ (Describe) Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: / / 23 ACQUIRED ACQUIRED NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY HUMANA INC. CMN CHEVRON CORPORATION CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EOUITY US EQUITY FAIR MARKET VALUE FAIR MARKET VALUE X \$10,001 - \$100,000 S10,001 - \$100,000
Over \$1,000,000 \$2,000 - \$10,000 X \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other _ X Stock Other _ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: /___/**23** ACQUIRED / /**23** ACQUIRED NAME OF BUSINESS ENTITY Filer's Verification PUBLIC ENTERPRISE GROUP HOLDINGS CO. CMN Print Name Riley, Irene GENERAL DESCRIPTION OF THIS BUSINESS Office, Agency
See Expanded Statement Attachment US EQUITY FAIR MARKET VALUE Statement Type X \$10,001 - \$100,000 \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000 I have used all reasonable diligence in preparing this statement. I have NATURE OF INVESTMENT reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. X Stock Other _ I certify under penalty of perjury under the laws of the State of Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) California that the foregoing is true and correct. IF APPLICABLE, LIST DATE: Date Signed _____03/15/2024 (month, day, year) / /23 / 23 ACQUIRED DISPOSED Filer's Signature Irene Riley

SCHEDULE A-1 Investments

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
EXECLON CORPORATION. CMN	NVIDIA CORP. CMN
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
S2,000 - \$10,000 X \$10,001 - \$100,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	X \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
V Stock Other	X Stock Other(Describe)
(Describe) Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More(Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	/ / 23//23
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
THERMO FISHER SCIENTFIC INC. CMN	VERIZON COMMUNICATIONS INC. CMN
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS	
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
∑ \$2,000 - \$10,000 ∑ \$10,001 - \$100,000	X \$2,000 - \$10,000 \$10,001 - \$100,000 S \$1,000,001 - \$1,000,000 Over \$1,000,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	X Stock Other (Describe)
(Describe) Partnership () Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More(Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ /23 // /23	// <u>23</u> / <u>23</u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	Filer's Verification
REGIONS FINANCIAL CORPORATION. CMN	
GENERAL DESCRIPTION OF THIS BUSINESS	Print Name_Riley, Irene
	Office, Agency
US EQUITY	or Court See Expanded Statement Attachment
FAIR MARKET VALUE	Statement Type 🗵 2023/2024 Annual 🗌 Assuming 🔲 Leaving
X \$2,000 - \$10,000 ☐ \$10,001 - \$100,000	Annual Candidate
S100,001 - \$1,000,000 Over \$1,000,000	99
NATURE OF INVESTMENT	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information
X Stock Other (Describe)	contained herein and in any attached schedules is true and complete.
Partnership O Income Received of \$0 - \$499	I certify under penalty of perjury under the laws of the State of
O Income Received of \$500 or More(Report on Schedule C)	California that the foregoing is true and correct.
IF APPLICABLE, LIST DATE:	Date Signed03/15/2024
/ /23 / /23	(month, day, year)
ACQUIRED DISPOSED	Irene Rilev
	Filer's SignatureIrene Riley

SCHEDULE A-1 Investments

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)
Investments must be itemized.
Do not attach brokerage or financial statements.

SCHIUMBREGERITD. CHN GENERAL DESCRIPTION OF THIS BUSINESS US SQUITY FARR MARKET VALUE \$2.00 - \$10.000 \$310.001 - \$100.000 \$100.001 - \$1.000.000 \$310.001 - \$100.000 \$100.001 - \$1.000.000 \$2.00.01 - \$1.000.000 \$100.001 - \$1.000.000 \$2.00.01 - \$1.000.000 \$100.001 - \$1.000.000 \$2.00.01 - \$1.000.000 \$100.001 - \$1.000.000 \$2.00.01 - \$1.000.000 \$100.001 - \$1.000.000 \$1.00.000 \$1.00.000 \$100.001 - \$1.000.000 \$1.00.000 \$100.001 - \$1.000.000 \$1.00.000 \$1.00.000 \$1.00.001 - \$1.000.000 \$1.00.000 \$1.00.001 - \$1.000.000 \$1.00.000 \$1.00.010 \$1.00.001 - \$1.000.000 \$1.00.010 \$1.000.001 - \$1.000.000 \$1.00.010 \$1.00.001 - \$1.000.000 \$1.00.010 \$1.00.001 - \$1.000.000 \$1.00.010 \$1.00.001 - \$1.000.000 \$1.00.010 \$1.00.001 - \$1.000.000 \$1.00.010 \$1.00.001 - \$1.000.000 \$1.00.010 \$1.00.001 - \$1.000.000 \$1.00.010 \$1.00.001 - \$1.000.000 \$1.00.010 \$1.00.001 - \$1.000.000 \$1.00.010 \$1.00.001 - \$1.000.000 \$1.00.010 \$1.00.001 - \$1.00	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS		AUTOMATIC DATA PROCESSING INC. CMN
US EQUITY FAR MARKET VALUE		GENERAL DESCRIPTION OF THIS BUSINESS
FAR MARKET VALUE		
S2.000 - \$10,000	US EQUITY	US EQUITY
\$2,00 - \$10,000	FAIR MARKET VALUE	FAIR MARKET VALUE
\$100,001 - \$1,000,000		☐ \$2,000 - \$10,000
Slock		S100,001 - \$1,000,000 Over \$1,000,000
Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: 23	X Stock (Describe)	X Stock Other (Describe) Partnership () Income Received of \$0 - \$499
123	○ Income Received of \$500 or More(Report on Schedule C)	○ Income Received of \$500 or More (Report on Schedule C)
ACQUIRED DISPOSED ACQUIRED DISP	IF APPLICABLE, LIST DATE:	
COCA COLA COMPANY (THE) CMN GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY FAR MARKET VALUE \$2,000 - \$10,000		
GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY FAIR MARKET VALUE \$2,000 - \$10,000	NAME OF BUSINESS ENTITY	
US EQUITY FAIR MARKET VALUE \$2,000 - \$10,000	ZOETIS INC CMN CLASS A	
FAIR MARKET VALUE \$ 2,000 - \$10,000	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
\$2,000 - \$10,000	US EQUITY	US EQUITY
St.000 - \$1,000,000 Over \$1,	FAIR MARKET VALUE	
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:	☐ \$2,000 - \$10,000 X S10,001 - \$100,000	
Stock Other (Describe) Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C) Partnership Income Received of \$500 or More (Report on Schedule C) Partnership Income Received of \$500 or More (Report on Schedule C) Partnership Income Received of \$500 or More (Report on Schedule C)	S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000
Partnership Income Received of \$0 - \$499 Income Received of \$0 - \$499 Income Received of \$500 or More(Report on Schedule C) IF APPLICABLE, LIST DATE: Partnership Income Received of \$500 or More(Report on Schedule C) IF APPLICABLE, LIST DATE: Partnership Income Received of \$500 or More(Report on Schedule C) IF APPLICABLE, LIST DATE: Partnership Income Received of \$500 or More(Report on Schedule C) IF APPLICABLE, LIST DATE: Partnership Income Received of \$500 or More(Report on Schedule C) IF APPLICABLE, LIST DATE: Partnership Income Received of \$500 or More(Report on Schedule C) IF APPLICABLE, LIST DATE: Partnership Income Received of \$0 - \$499 Income Received		X Stock Other
ACQUIRED DISPOSED	(Describe) Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
ACQUIRED DISPOSED Filer's Verification Print Name Riley, Irene Office, Agency or Court See Expanded Statement Attachment Statement Type X 2023/2024 Annual Assuming Leaving Annual Candidate NATURE OF INVESTMENT Stock Other (Describe) Partnership Oncome Received of \$0 - \$499 Oncome Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: 1 23	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED Filer's Verification Print Name Riley, Irene Office, Agency or Court See Expanded Statement Attachment Statement Type X 2023/2024 Annual Assuming Leaving Annual Candidate NATURE OF INVESTMENT Stock Other (Describe) Partnership Oncome Received of \$0 - \$499 Oncome Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: 1 23		
Filer's Verification GOLDMAN SACHS BANK USA DEPOSIT (BDA) GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY FAIR MARKET VALUE \$2,000 - \$10,000		
GOLDMAN SACHS BANK USA DEPOSIT (BDA) GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY FAIR MARKET VALUE \$2,000 - \$10,000		
## Print Name Riley, Trene Describe Print Name Pr		Filer's Verification
Office, Agency or Court See Expanded Statement Attachment See Expanded Statement Attachment Statement Type Statement T		Print Name Riley, Irene
FAIR MARKET VALUE \$2,000 - \$10,000	GENERAL DESCRIPTION OF THIS BUSINESS	Time Name
\$2,000 - \$10,000		Office, Agency or Court See Expanded Statement Attachment
Stock Other (Describe) Partnership O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: Annual Candidate		Statement Type X 2023/2024 Annual Assuming Leaving
NATURE OF INVESTMENT Stock		Annual Candidate
NATURE OF INVESTMENT X Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C) IF APPLICABLE, LIST DATE: 1 23		Mer.
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE:		reviewed this statement and to the best of my knowledge the information
Date Signed03/15/2024	(Describe) Partnership O Income Received of \$0 - \$499	I certify under penalty of perjury under the laws of the State of
	IF APPLICABLE, LIST DATE:	Date Signed03/15/2024 month day years
ACQUIRED DISPOSED Filer's Signature		(month, vo), poet
	ACQUIRED DISPOSED	Filer's Signature

SCHEDULE A-1 Investments

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
MAKEL GROUP CMN	NEXTERA ENERGE INC.
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	☐ \$2,000 - \$10,000 <u>X</u> \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT X Stock Other	NATURE OF INVESTMENT X Stock Other (Describe)
(Describe) ☐ Partnership	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
W.W. GRAINGER INC. CMN	CONSTELLATION ENERGY CORP. CMN
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
	□ \$2,000 - \$10,000 □ \$\times \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT X Stock Other	NATURE OF INVESTMENT
(Describe)	(Describe) Partnership Income Received of \$0 - \$499
Partnership Oncome Received of \$0 - \$499 Oncome Received of \$500 or More(Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, <u>, , 23</u> , <u>, , 23</u>	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	Filer's Verification
BROADRIDGE FINANCIAL SOLUTIONS INC. CMN	Deint Nama Riley, Irene
GENERAL DESCRIPTION OF THIS BUSINESS	Print Name Riley, Irene
US EQUITY	Office, Agency or Court See Expanded Statement Attachment
FAIR MARKET VALUE	Statement Type 🗵 2023/2024 Annual 🔲 Assuming 🔲 Leaving
☐ \$2,000 - \$10,000 ☐ \$100,001 - \$1,000,000 ☐ \$100,001 - \$1,000,000	Annual Candidate
S100,001 - \$1,000,000 U Over \$1,000,000	I have used all reasonable diligence in preparing this statement. I have
NATURE OF INVESTMENT	reviewed this statement and to the best of my knowledge the information
X Stock Other (Describe)	contained herein and in any attached schedules is true and complete.
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
IF APPLICABLE, LIST DATE:	Date Signed03/15/2024 (month, day, year)
	(munin, day, year)
ACQUIRED DISPOSED	Filer's Signature Irene Riley

Comments: ____

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

(Ownership Interest is Less Than 10%)
Investments must be itemized.
Do not attach brokerage or financial statements.

► NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY BRISTOL MYERS SQUIBB CO. CMN COTERRA ENERGY INC CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EOUITY US EQUITY FAIR MARKET VALUE FAIR MARKET VALUE X \$10,001 - \$100,000 \$2,000 - \$10,000 X S10,001 - \$100,000 \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other X Stock Other _ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More(Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: J J 23 J 23
ACQUIRED DISPOSED ACQUIRED NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY ALPHABET INC CMN CLASS C WALMART INC. CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY US EQUITY FAIR MARKET VALUE FAIR MARKET VALUE \$10,001 - \$100,000 \$2,000 - \$10,000 \$2,000 - \$10,000 X \$10,001 - \$100,000 Over \$1,000,000 X \$100,001 - \$1,000.000 Over \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other __ Other __ X Stock Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: / /23 / /23 ACQUIRED DISPOSED ACQUIRED NAME OF BUSINESS ENTITY Filer's Verification HP INC. CMN Print Name Riley, Irene GENERAL DESCRIPTION OF THIS BUSINESS Office, Agency
See Expanded Statement Attachment US EQUITY ∑ 2023/2024 Annual Assuming Leaving Candidate FAIR MARKET VALUE Statement Type X \$10,001 - \$100,000 \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000 I have used all reasonable diligence in preparing this statement. I have NATURE OF INVESTMENT reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. X Stock Other _ I certify under penalty of perjury under the laws of the State of Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C) California that the foregoing is true and correct. IF APPLICABLE, LIST DATE: Date Signed _____03/15/2024 (month, day, year) Filer's Signature Irene Riley

Comments: _

SCHEDULE A-1 Investments

CALIFORNIA FORM / UU FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	CAPITAL ONE FINANCIAL CORP CMN
YUM CHINA HOLDINGS INC, CMN GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BOSINESS	
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
X \$2,000 - \$10,000 S10,000	S2,000 - \$10,000 X \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT
NATURE OF INVESTMENT	NATURE OF INVESTMENT X Stock Other
X Stock Other (Describe)	(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
O Income Received of \$500 or More(Report on Schedule C)	O lilicome Received of \$500 or Miore/Report on contaggio of
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, <u>, 23</u> , <u>23</u>	/ / 23/ <u></u>
	ACQUIRED DISPOSED
//ogonites	NAME OF PHONESS ENTITY
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY PARKER HANNIFIN CORP. CMN
BOSTON SCIENTIFIC CORP. CMN	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	☐ \$2,000 - \$10,000 X \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Describe (Describe)	X Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
○ Income Received of \$500 or More(Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ /23//23	/ / 23 / 23
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	Filer's Verification
INTL BUSINESS MACHINES CORP. CMN	Print Name Riley, Irene
GENERAL DESCRIPTION OF THIS BUSINESS	
US EQUITY	Office, Agency or Court See Expanded Statement Attachment
FAIR MARKET VALUE	
\$2,000 - \$10,000	Statement Type 2023/2024 Annual Assuming Leaving Candidate
\$100,001 - \$1,000,000 Over \$1,000,000	(yr)
NATURE OF INVESTMENT	I have used all reasonable diligence in preparing this statement. I have
NATURE OF INVESTMENT X Stock Other	reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.
(Describe)	
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
IF APPLICABLE, LIST DATE:	20 (25 (2024
00	Date Signed03/15/2024 (month, day. year)
ACQUIRED DISPOSED	Filer's Signature Irene Riley

Comments: =

SCHEDULE A-1 Investments

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

	► NAME OF BUSINESS ENTITY
NAME OF BUSINESS ENTITY	
O-1 GLASS INC. CMN	MACY'S INC. CMN
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
X \$2,000 - \$10,000 S10,001 - \$100,000	x \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT X Stock Other
X Stock Other(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
	► NAME OF BUSINESS ENTITY
NAME OF BUSINESS ENTITY	
BLACKROCK INC CMN	ABBOTTLABORATORIES CMN
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	□ \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	X Stock Other
(Describe)	(Describe) Partnership () Income Received of \$0 - \$499
Partnership Oncome Received of \$0 - \$499 Income Received of \$500 or More(Report on Schedule C)	☐ Partnership ☐ Income Received of \$500 or More(Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ /23 <u>/ / 23</u>	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	Filer's Verification
COMCAST CORPORATION CMN CLASS A VOTING	Political State Control of the Entrol of the Control of the Contro
GENERAL DESCRIPTION OF THIS BUSINESS	Print Name Riley, Irene
US EQUITY	Office, Agency or Court See Expanded Statement Attachment
FAIR MARKET VALUE	Statement Type X 2023/2024 Annual Assuming Leaving
	Statement Type
\$100,001 - \$1,000,000 Over \$1,000,000	
	I have used all reasonable diligence in preparing this statement. I have
NATURE OF INVESTMENT	reviewed this statement and to the best of my knowledge the information
X Stock (Describe)	contained herein and in any attached schedules is true and complete.
Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More(Report on Schedule C)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
IF APPLICABLE, LIST DATE:	Date Signed03/15/2024
	(month, day, year)
	H
ACQUIRED DISPOSED	Filer's Signature Irene Riley

Comments: __

SCHEDULE A-1 Investments

CALIFORNIA FORM / UU
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

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

	NAME OF BUSINESS ENTITY	TANKE OF BOOKERS IN THE
	INTEL CORPRATION CMN	AMAZON COM CMN
		GENERAL DESCRIPTION OF THIS BUSINESS
	GENERAL DESCRIPTION OF THIS BUSINESS	OLIVEI DECOMMENDED
	11	The Polytonia
	US EQUITY	US EQUITY
	FAIR MARKET VALUE	FAIR MARKET VALUE
		\$2,000 - \$10,000 \$10,001 - \$100,000
		X \$100,001 - \$1,000,000 Over \$1,000,000
	\$100,001 - \$1,000,000 Over \$1,000,000	[X] \$100,001 - \$1,000,000 [_] Over \$1,000,000
		NATURE OF INVESTMENT
	NATURE OF INVESTMENT	_
	X Stock (Describe)	X Stock Other(Describe)
	,	Partnership O Income Received of \$0 - \$499
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
	O Income Received of \$300 of More(Report of Scheoolic of	
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	IF APPLICABLE, LIST DATE.	
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
	ACQUIRED BIOI GGES	
<u> </u>	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
-	RTX CORP. CMN	D.R.HORTON INC. CMN
	,	OFFICE ALL DESCRIPTION OF THIS BLISINESS
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	US EQUITY	US EQUITY
	TAID MADIET MALLE	FAIR MARKET VALUE
	FAIR MARKET VALUE	[X] \$2,000 - \$10,000
	<u>X</u> \$10,000 <u>X</u> \$10,000	
	\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	NATURE OF INVESTMENT
	X Stock Other	X Stock Other
	(Describe)	(Describe)
	Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
	O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
		IF APPLICABLE, LIST DATE:
	IF APPLICABLE, LIST DATE:	
		ACQUIRED DISPOSED
	ACQUIRED DISPOSED	//ogonies
	NAME OF BUSINESS ENTITY	Filer's Verification
		File 5 Verification
	A.O.Smith Corp. (Del) CMN	Print Name Riley, Irene
	GENERAL DESCRIPTION OF THIS BUSINESS	Print Name Alley, Items
		arr. A
	US Equity	Office, Agency or Court See Expanded Statement Attachment
		or Court
	FAIR MARKET VALUE	Statement Type X 2023/2024 Annual Assuming Leaving
	X \$2,000 - \$10,000 S10,001 - \$100,000	Annual Candidate
	\$100,001 - \$1,000,000 Over \$1,000,000	(//)
	_	I have used all reasonable diligence in preparing this statement. I have
	NATURE OF INVESTMENT	reviewed this statement and to the best of my knowledge the information
	X Stock Other	contained herein and in any attached schedules is true and complete.
	(Describe)	1
	Partnership O Income Received of \$0 - \$499	I certify under penalty of perjury under the laws of the State of
	○ Income Received of \$500 or More(Report on Schedule C)	California that the foregoing is true and correct.
	IE ADDITION DE LIST DATE:	oren uraz adlerena
	IF APPLICABLE, LIST DATE:	Date Signed03/15/2024
		(month, day, year)
	ACQUIRED DISPOSED	Tuesda Dillov
	AOGOINED BIOLOGED	Filer's Signature Irene Riley

Comments: _____

SCHEDULE A-1 Investments

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

▶	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	PHILIP MORRIS INTL INC. CMN	HALLIBURTON COMPANY CMN
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	GENERAL DESCRIPTION OF THIS SCORES	
	US EQUITY	US EQUITY
		FAIR MARKET VALUE
	FAIR MARKET VALUE	
	<u>x</u> \$10,000 - \$10,000 <u>x</u> \$100,000	<u> </u>
	S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000
		NATURE OF INVESTMENT
	NATURE OF INVESTMENT	Stock Other
	X Stock (Describe)	(Describe)
	Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)
	O Income Received of \$500 or More (Report on Schedule C)	() Income Received of \$500 or Wore (Kepon on Schedule C)
	TO A STATE OF THE	IF APPLICABLE, LIST DATE:
	IF APPLICABLE, LIST DATE:	
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
_		► NAME OF BUSINESS ENTITY
ightharpoons	NAME OF BUSINESS ENTITY	CROWN CASTLE INTL CORP. CMN
	Freeport mcmoran inc. can	· · · · · · · · · · · · · · · · · · ·
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
		NO DOLLINA
	us equity	US EQUITY
	FAIR MARKET VALUE	FAIR MARKET VALUE
	X \$2,000 - \$10,000 S10,001 - \$100,000	X \$2,000 - \$10,000
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000.000 Over \$1,000,000
	NATURE OF INVESTMENT	NATURE OF INVESTMENT
	X Stock Other	X Stock Other
	(Describe)	(Describe)
	Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)
	O Income Received of \$500 or More (Report on Schedule C)	C income nocation of the contract of
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
		/ /23 //23
		ACQUIRED DISPOSED
	ACQUIRED DISPOSED	ACQUIRED BISI OSES
	NAME OF BUSINESS ENTITY	Filer's Verification
	VERTEX PHARMACEUITICALS INC. CMN	Print Name Riley, Irene
	GENERAL DESCRIPTION OF THIS BUSINESS	1 11111 111111
		Office, Agency
	US EQUITY	or Court See Expanded Statement Attachment
	FAIR MARKET VALUE	Statement Type X 2023/2024 Annual Assuming Leaving
	\$2,000 - \$10,000 X \$10,001 - \$100,000	Statement Type X 2023/2024 Annual Assuming Leaving Annual Candidate
	\$100,001 - \$1,000,000 Over \$1,000,000	ATTACA AT
		I have used all reasonable diligence in preparing this statement. I have
	NATURE OF INVESTMENT	laction reviewed this statement and to the best of my knowledge the information
	X Stock (Describe)	contained herein and in any attached schedules is true and complete.
	Partnership O Income Received of \$0 - \$499	I certify under penalty of perjury under the laws of the State of
	O Income Received of \$500 or More (Report on Schedule C)	California that the foregoing is true and correct.
		l'I
	IF APPLICABLE, LIST DATE:	Date Signed 03/15/2024 (month, day, year)
	/ /23 / /23	(month, day. year)
	ACQUIRED DISPOSED	Trene Pilev
	1 Sound I Made	Filer's Signature Irene Riley

Comments: _

SCHEDULE A-1 Investments

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
AES CORP CMN	MONSTER BEVERGE CORP. CMN
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
X \$2,000 - \$10,000 S10,001 - \$100,000	X \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT X Slock Other
X Stock Other(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE	IF APPLICABLE, LIST DATE:
/ / 23 / / 23	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY THE SOUTHERN INC. CMN
LOWES COMPANY INC. CMN	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
USEQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT X Stock Other
X Stock Other (Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)	Partnership Oncome Received of \$0 - \$499 Oncome Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ /23 / /23	/ / 23_ / <u>/ / 23</u>
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	Filer's Verification
CORTEVA NC CMN	Dilay Trene
GENERAL DESCRIPTION OF THIS BUSINESS	Print Name Riley, Irene
US EQUITY	office, Agency or Court See Expanded Statement Attachment
FAIR MARKET VALUE	Statement Type X 2023/2024 Annual Assuming Leaving
X \$2,000 - \$10,000	Statement Type 2023/2024 Annual Candidate
S100,001 - \$1,000,000 Over \$1,000,000	11.7.20
NATURE OF INVESTMENT	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information
X Stock Other	contained herein and in any attached schedules is true and complete.
(Describe) Partnership Income Received of \$0 - \$499	I certify under penalty of perjury under the laws of the State of
O Income Received of \$500 or More(Report on Schedule C)	California that the foregoing is true and correct.
IF APPLICABLE, LIST DATE:	Date Signed 03/15/2024 (month, day, year)
ACQUIRED DISPOSED	Filer's Signature Irene Riley

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

(Ownership Interest is Less Than 10%)
Investments must be itemized.

Do not attach brokerage or financial statements. ► NAME OF BUSINESS ENTITY ► NAME OF BUSINESS ENTITY LOCKHEED MARTIN CORPORATION. WEC ENERGY GROUP INC. CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY US EOUITY FAIR MARKET VALUE FAIR MARKET VALUE X \$10,001 - \$100,000 S10,001 - \$100,000 \$2,000 - \$10,000 X \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other _ X Stock Other __ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: ACQUIRED NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY VISA INC. CMN CLASS A METTLER TELEDO INTL. CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY US EOUITY FAIR MARKET VALUE FAIR MARKET VALUE S10,001 - \$100,000
Over \$1,000,000 \$2,000 - \$10,000 X \$10,001 - \$100,000 X \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other __ X Stock Other_ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: /___/**23** ACQUIRED / /23 ACQUIRED NAME OF BUSINESS ENTITY Filer's Verification AGILENT TECHNOLOGIES INC CMN Print Name Riley, Irene GENERAL DESCRIPTION OF THIS BUSINESS Office, Agency
See Expanded Statement Attachment US EQUITY FAIR MARKET VALUE X 2023/2024 Annual Assuming Leaving Annual Candidate Statement Type X \$10,001 - \$100,000 \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000 I have used all reasonable diligence in preparing this statement. I have NATURE OF INVESTMENT reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. X Stock Other = I certify under penalty of perjury under the laws of the State of Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) California that the foregoing is true and correct.

Comments: ___

IF APPLICABLE, LIST DATE:

/___/23 ___/_23 ACQUIRED DISPOSED (month, day, year)

Date Signed _____03/15/2024

Filer's Signature Irene Riley

SCHEDULE A-1 Investments

CALIFORNIA FORM / UU
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

•	NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
	YUM BRANDS, INC. CMN	EXPONENT INC. CMN
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	US EQUITY	US EQUITY
	FAIR MARKET VALUE	FAIR MARKET VALUE
		\$2,000 - \$10,000X \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT X Stock Other (Describe)	NATURE OF INVESTMENT X Stock Other (Describe)
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
		// 23
_	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	CATERPILLA INC (DELAWARE) CMN	DIGITAL BRIDGE GROUP ONC. CMN
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	US EQUITY	US EQUITY
	FAIR MARKET VALUE	FAIR MARKET VALUE
	X 510,001 - \$100,000	X \$2,000 - \$10,000
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	NATURE OF INVESTMENT X Stock Other
	X Stock Other(Describe)	(Describe)
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
	NAME OF BUSINESS ENTITY	Filer's Verification
	CARNIVAL CORPORATION CMN	Print Name Riley, Irene
	GENERAL DESCRIPTION OF THIS BUSINESS	255
	US EQUITY	or Court See Expanded Statement Attachment
	FAIR MARKET VALUE	Statement Type X 2023/2024 Annual Assuming Leaving
	∑ \$2,000 - \$10,000	Statement Type 2225/2024 / Minds Candidate
	\$100,001 - \$1,000,000 Over \$1,000,000	I have used all reasonable diligence in preparing this statement. I have
	NATURE OF INVESTMENT Stock	reviewed this statement and to the best of my knowledge the information
	(Describe)	contained herein and in any attached schedules is true and complete.
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
	IF APPLICABLE, LIST DATE:	Date Signed 03/15/2024 (month, day, year)
		function gas, least
	ACQUIRED DISPOSED	Filer's Signature Irene Riley
		Thor 5 Giginature

Comments: _____

SCHEDULE A-1 Investments

CALIFORNIA FORM / UU
FAIR POLITICAL PRACTICES COMMISSION

Stocks, Bonds, and Other Interests | AMENDMENT

(Ownership Interest is Less Than 10%)
Investments must be itemized.

Do not attach brokerage or financial statements. ▶ NAME OF BUSINESS ENTITY ► NAME OF BUSINESS ENTITY DISCOVER FINANCIAL SERVICES INC. CMN AMERICAN EXPRESS CO. CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EOUITY US EOUITY FAIR MARKET VALUE FAIR MARKET VALUE \$10,001 - \$100,000 X \$2,000 - \$10,000 X \$10,001 - \$100,000 Over \$1,000,000 \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other X Stock Other _ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: / / 23 / / 23 ACQUIRED DISPOSED NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY UNION PACIFIC CORP. CMN VUCAN MATERIALS COMPANY. CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US FOULTY US EOUITY FAIR MARKET VALUE FAIR MARKET VALUE X \$10,001 - \$100,000 \$2,000 - \$10,000 X \$10,001 - \$100,000 \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other X Stock Other Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: / /23 / /23
ACQUIRED DISPOSED NAME OF BUSINESS ENTITY Filer's Verification AUTOAONE INC. CMN Print Name Riley, Irene GENERAL DESCRIPTION OF THIS BUSINESS Office, Agency
See Expanded Statement Attachment US EQUITY X 2023/2024 Annual Assuming Leaving Annual Candidate FAIR MARKET VALUE Statement Type X \$10,001 - \$100,000 \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000,000 I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information NATURE OF INVESTMENT contained herein and in any attached schedules is true and complete. X Stock Other __ I certify under penalty of perjury under the laws of the State of Partnership O Income Received of \$0 - \$499 California that the foregoing is true and correct. O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: Date Signed _____03/15/2024 (month, day, year) / /23 / /23
ACQUIRED DISPOSED Filer's Signature Irene Riley

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

(Ownership Interest is Less Than 10%)
Investments must be itemized.
Do not attach brokerage or financial statements.

► NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY PAYPAL HOLDINGS INC. CMN US FOODS HOLDING CORP. CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EOUITY US EOUITY FAIR MARKET VALUE FAIR MARKET VALUE X \$10,001 - \$100,000 \$2,000 - \$10,000 X \$2,000 - \$10,000 S10,001 - \$100,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other _ X Stock Other _ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: ACQUIRED NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY ELECTRONIC ARTS. CMN UNITED RENTALS INC. CMN GENERAL DESCRIPTION OF THIS BUSINESS GENERAL DESCRIPTION OF THIS BUSINESS US EQUITY US EQUITY FAIR MARKET VALUE FAIR MARKET VALUE \$10,001 - \$100,000 X \$2,000 - \$10,000 X \$10,001 - \$100,000 \$2,000 - \$10,000 Over \$1,000,000 \$100,001 - \$1,000.000 Over \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT X Stock Other _ X Stock Other __ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: /____/**23** / /23 ACQUIRED ACQUIRED NAME OF BUSINESS ENTITY Filer's Verification MOODY'S CORPORATION. CMN Print Name Riley, Irene GENERAL DESCRIPTION OF THIS BUSINESS Office, Agency
See Expanded Statement Attachment US FOULTY FAIR MARKET VALUE \$2,000 - \$10,000 X \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 I have used all reasonable diligence in preparing this statement. I have NATURE OF INVESTMENT reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. Other = X Stock I certify under penalty of perjury under the laws of the State of Partnership O Income Received of \$0 - \$499 California that the foregoing is true and correct. O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: Date Signed _____03/15/2024 (month, day, year) / / 23 / / 23 ACQUIRED DISPOSED Filer's Signature Irene Riley

Comments: __

SCHEDULE A-1 Investments

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

	NAME OF BUSINESS ENTITY
NAME OF BUSINESS ENTITY	
PROLOGISINC. CMN	MORGAN STANLEY. CMN GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BOSINESS
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE \$2,000 - \$10,000 X \$10,001 - \$100,000
\$2,000 - \$10,000 X \$10,001 - \$100,000	<u> </u>
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT X Stock Other (Describe) Partnership O Income Received of \$0 - \$499	NATURE OF INVESTMENT X Stock Other (Describe) Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More(Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
DOW INC. CMN	NETFLIX INC. CMN
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
US EQUITY	US EQUITY
FAIR MARKET VALUE	FAIR MARKET VALUE
	S2,000 - \$10,000 X \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT X Stock Other
X Stock (Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ /23 <u>/ / 23</u>	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	Filer's Verification
ECOLAB INC CMN	
GENERAL DESCRIPTION OF THIS BUSINESS	Print Name Riley, Irene
US EQUITY	Office, Agency or Court See Expanded Statement Attachment
FAIR MARKET VALUE	Statement Type X 2023/2024 Annual Assuming Leaving
	Annual Candidate
\$100,001 - \$1,000,000 Over \$1,000,000	(yr)
NATURE OF INVESTMENT	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information
X Stock Other (Describe)	contained herein and in any attached schedules is true and complete.
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
IF APPLICABLE, LIST DATE:	Date Signed03/15/2024 (month, day. year)
/ /23 / /23_	(monun, day. year)
ACQUIRED DISPOSED	Filer's Signature Irene Riley

Comments: ___

SCHEDULE A-1 Investments

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

Stocks, Bonds, and Other Interests

Do not attach brokerage of	mariour statements.
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
APOLLO GLOBAL MANAGEMENT INC. CMN	A THE PHONE OF
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
US EQUITY	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 X \$10,001 - \$100,000	S2,000 - \$10,000 S10,001 - \$100,000 Over \$1,000,000
S100,001 - \$1,000,000 Over \$1,000,000	
NATURE OF INVESTMENT	NATURE OF INVESTMENT Stock Other
X Stock Other(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More(Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	GENERAL DESCRIPTION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 Over \$1,000,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stack Other(Describe)	Stock Other (Describe)
Partnership () Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
O Income Received of \$500 or More(Report on Schedule C)	
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	Filer's Verification
GENERAL DESCRIPTION OF THIS BUSINESS	Print Name Riley, Irene
	Office, Agency or Court See Expanded Statement Attachment
FAIR MARKET VALUE	El coccesion
\$2,000 - \$10,000 S10,001 - \$100,000	Statement Type Statement Type X 2023/2024 Annual Assuming Leaving
\$100,001 - \$1,000,000 Over \$1,000,000	La 55950
NATURE OF INVESTMENT	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information
Stock Other	contained herein and in any attached schedules is true and complete.
(Describe) Partnership O Income Received of \$0 - \$499	I certify under penalty of perjury under the laws of the State of
○ Income Received of \$500 or More (Report on Schedule C)	California that the foregoing is true and correct.
IF APPLICABLE, LIST DATE:	Date Signed03/15/2024 (month, day, year)
ACQUIRED DISPOSED	Filer's Signature Irene Riley