

STATEMENT OF ECONOMIC INTERESTS

CG

COVER PAGE

Date Initial Filing Received
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LOS ANGELES COUNTY

Please type or print in ink.

NAME OF FILER (LAST) (FIRST)
GOODMAN ALLAN J

2015 FEB 20 AM 10:48

1. Office, Agency, or Court

CAMPAIGN FINANCE
DISCLOSURE SECTION

Agency Name (Do not use acronyms)
LOS ANGELES SUPERIOR COURT
Division, Board, Department, District, if applicable

Your Position
JUDGE

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2015 FEB 25 PM 2:11

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

- State
- Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County _____
- County of _____
- City of _____
- Other _____

3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2014, through December 31, 2014.
- or-
- The period covered is _____ through December 31, 2014.
- Assuming Office: Date assumed _____
- Leaving Office: Date Left _____ (Check one)
- The period covered is January 1, 2014, through the date of leaving office.
- The period covered is _____ through the date of leaving office.
- Candidate: Election year _____ and office sought, if different than Part 1: _____

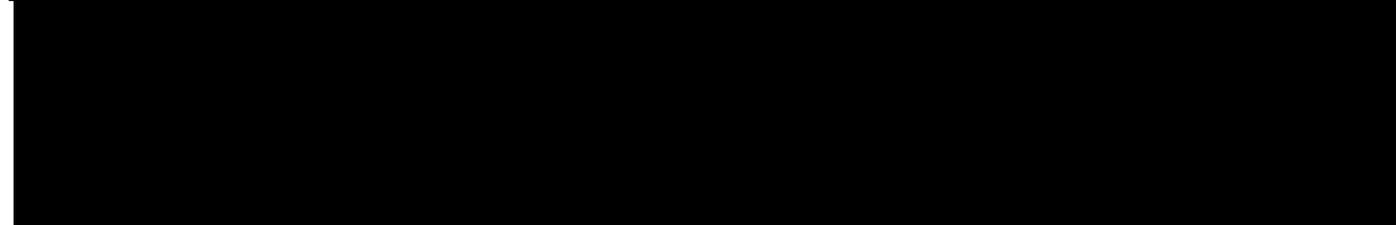
4. Schedule Summary

Check applicable schedules or "None." ► Total number of pages including this cover page: 9

- 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



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

Date Signed 02/17/2015
(month, day, year)

SCHEDULE A-1

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

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION
Name
A Goodman ASK Tr

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NAME OF BUSINESS ENTITY	GENERAL DESCRIPTION OF THIS BUSINESS ACTIVITY	FAIR MARKET VALUE (Select from drop down list)	NATURE OF INVESTMENT (Select from drop down list. If "other," describe)	IF APPLICABLE, LIST DATE (mm/dd/yyyy)	
				ACQUIRED	DISPOSED
Time Warner Inc	Entertainment	\$2,000 - \$10,000	Stock	2/11/2014	
Applied Materials, Inc.	Mfg. equipment for semiconductor industr.	\$2,000 - \$10,000	Stock	4/22/2014	
Helburton	Oil & gas services	\$2,000 - \$10,000	Stock	6/23/2014	
Las Vegas Sands	Entertainment	\$10,001 - \$100,000	Stock	6/23/2014	
Roche Holdings	pharmaceuticals	\$10,001 - \$100,000	Stock	7/23/2014	
Gilead Sciences	biopharmaceutical development and mfg.	\$10,001 - \$100,000	Stock	8/1/2014	
Nestle	food mfg and distrib	\$10,001 - \$100,000	Stock	10/9/2014	
Honeywell	mfg defense and consumer products	\$10,001 - \$100,000	Stock	10/9/2014	
Kimberly Clark	consumer product mfg & distrib	\$2,000 - \$10,000	Stock	10/9/2014	
Marsh & McLennan	insurance	\$10,001 - \$100,000	Stock	10/15/2014	
Intl Flavors & Fragrances	mfg. baking components	\$2,000 - \$10,000	Stock	10/15/2014	
Abbott Labs	pharmaceuticals	\$10,001 - \$100,000	Stock	11/10/2014	
CMEGroup	mercantile exchange	\$2,000 - \$10,000	Stock		1/23/2014
AGL Resources	natural gas distributor	\$2,000 - \$10,000	Stock		1/23/2014
PNC Financial	financial services products	\$2,000 - \$10,000	Stock		1/23/2014
U S Bancorp	financial services products	\$2,000 - \$10,000	Stock		1/23/2014
Mattel	consumer products	\$2,000 - \$10,000	Stock		2/3/2014
Apache Corp	oil & gas exploration	\$2,000 - \$10,000	Stock		2/11/2014
3 M Corp	mfg business & consumer prods	\$2,000 - \$10,000	Stock		3/27/2014
The Travelers	insurance	\$2,000 - \$10,000	Stock		3/27/2014
Franklin Resources	financial services products	\$2,000 - \$10,000	Stock		5/29/2014
Baxter Intl	healthcare services	\$10,001 - \$100,000	Stock		5/23/2014
Intl Flavors & Fragrances	mfg. baking components	\$2,000 - \$10,000	Stock		6/28/2014
Johnson & Johnson	healthcare products	\$2,000 - \$10,000	Stock		6/26/2014
PPG Industries	mfg. diverse products	\$2,000 - \$10,000	Stock		6/28/2014
The TJX Companies	retailer of apparel & home fashions	\$2,000 - \$10,000	Stock		6/28/2014
Union Pacific	transportation	\$2,000 - \$10,000	Stock		6/26/2014
Novartis AG	healthcare product mfg & distrib	\$10,001 - \$100,000	Stock		7/23/2014
AFLAC	insurance	\$10,001 - \$100,000	Stock		8/1/2014
Johnson & Johnson	healthcare products	\$2,000 - \$10,000	Stock		8/21/2014
Lowes Cos	Entertainment	\$2,000 - \$10,000	Stock		9/23/2014
Emerson Electric	tech & engineering services	\$2,000 - \$10,000	Stock		10/9/2014
Franklin Resources	insurance	\$10,001 - \$100,000	Stock		10/9/2014
PNC Financial	financial services products	\$2,000 - \$10,000	Stock		10/9/2014
3 M Corp	mfg business & consumer prods	\$2,000 - \$10,000	Stock		10/15/2014
Apache Corp	oil & gas exploration	\$2,000 - \$10,000	Stock		10/15/2014
Halyard Health	healthcare services	\$2,000 - \$10,000	Stock		11/4/2014
Coca Cola	beverage and food products	\$10,001 - \$100,000	Stock		11/6/2014
Las Vegas Sands	Entertainment	\$10,001 - \$100,000	Stock		11/13/2014
Helburton	Oil & gas services	\$2,000 - \$10,000	Stock		11/18/2014

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
 (Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
 Allan Goodman

1. BUSINESS ENTITY OR TRUST

A Goodman et al., Ttes. NKG Trust
 Name
 P O Box 34577 Los Angeles, CA 90034
 Address (Business Address Acceptable)

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

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$0 - \$1,999 / / 14 / / 14
 \$2,000 - \$10,000 ACQUIRED DISPOSED
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION _____

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

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

None or Names listed below

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

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$2,000 - \$10,000 / / 14 / / 14
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

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

1. BUSINESS ENTITY OR TRUST

A Goodman et al., Ttes., NKG II Trust
 Name
 P O Box 34577 Los Angeles, CA 90034
 Address (Business Address Acceptable)

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

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$0 - \$1,999 / / 14 / / 14
 \$2,000 - \$10,000 ACQUIRED DISPOSED
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION _____

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

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

None or Names listed below

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

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

\$2,000 - \$10,000 / / 14 / / 14
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

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

Comments: _____

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
 (Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
 Allan Goodman

▶ 1. BUSINESS ENTITY OR TRUST

EKG Trust
 Name
 P O Box 34577 Los Angeles, CA 90034
 Address (Business Address Acceptable)

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

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999 / / 14 / / 14
 \$2,000 - \$10,000 ACQUIRED DISPOSED
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION _____

▶ 1. BUSINESS ENTITY OR TRUST

PKG Trust
 Name
 P O Box 34577 Los Angeles, CA 90034
 Address (Business Address Acceptable)

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

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999 / / 14 / / 14
 \$2,000 - \$10,000 ACQUIRED DISPOSED
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION _____

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

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

None or Names listed below

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

None or Names listed below

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

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 / / 14 / / 14
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

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

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

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 / / 14 / / 14
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

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

Comments: _____

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name

Allan Goodman

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
 4023 Skelton LLC

ADDRESS (Business Address Acceptable)
 P O Box 34577 Los Angeles, CA 90034

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 real estate ltd. liability company

YOUR BUSINESS POSITION
 LLC Member - no compensation received

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
 (For self-employed use Schedule A-2.)

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

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

Loan repayment

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

 (Describe)

Other _____
 (Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
 (For self-employed use Schedule A-2.)

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

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

Loan repayment

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

 (Describe)

Other _____
 (Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000
 \$1,001 - \$10,000
 \$10,001 - \$100,000
 OVER \$100,000

INTEREST RATE _____% None

TERM (Months/Years) _____

SECURITY FOR LOAN
 None Personal residence

Real Property _____

 Street address

 City

Guarantor _____

Other _____
 (Describe)

Comments: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

Name
 Allan Goodman

- Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

▶ NAME OF SOURCE (Not an Acronym)
 Judicial Council

ADDRESS (Business Address Acceptable)
 350 McAllister Street

CITY AND STATE
 San Francisco, CA 94102

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
 judicial

DATE(S): ____/____/____ - ____/____/____ AMT: \$_____
 (if gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____
 travel reimbursement for attending judicial education class

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): ____/____/____ - ____/____/____ AMT: \$_____
 (if gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): ____/____/____ - ____/____/____ AMT: \$_____
 (if gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): ____/____/____ - ____/____/____ AMT: \$_____
 (if gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

Comments: _____

Allan J. Goodman

SCHEDULE E
Income - Gifts
Travel Payments, Advances,
and Reimbursements

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PRACTICES COMMISSION
CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

2015 MAR 26 PM 3:29

- Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

GG
2015 MAR 26 PM 2:40
RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION

▶ NAME OF SOURCE (Not an Acronym)
Judicial Council

ADDRESS (Business Address Acceptable)
350 McAllister Street

CITY AND STATE
San Francisco, CA 94102

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
Judicial

DATE(S): ___/___/___ - ___/___/___ AMT: \$ 145.00
(If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description
travel reimbursement for attending judicial education

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): ___/___/___ - ___/___/___ AMT: \$ _____
(If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): ___/___/___ - ___/___/___ AMT: \$ _____
(If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

Filer's Verification

California that the foregoing is true and correct.

Date Signed 3-14-15
(month, day, year)

Comments: _____