

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

COVER PAGE

Date Stamp

CALIFORNIA
FORM

460

Statement covers period

from 04/01/2026

through 06/30/2026

Date of election if applicable:
(Month, Day, Year)

Page 1 of 11

For Official Use Only

CITY CLERKS OFC RCVD
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SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- ☐ Officeholder, Candidate Controlled Committee
☐ State Candidate Election Committee
☐ Recall
(Also Complete Part 5)
- ☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee
- ☒ Primarily Formed Ballot Measure Committee
☐ Controlled
☒ Sponsored
(Also Complete Part 6)
- ☐ Primarily Formed Candidate/Officeholder Committee
(Also Complete Part 7)

2. Type of Statement:

- ☐ Preelection Statement
☐ Semi-annual Statement
☐ Termination Statement
(Also file a Form 410 Termination)
☐ Amendment (Explain below)
- ☒ Quarterly Statement
☐ Special Odd-Year Report
☐ Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
1488613

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

INGLEWOOD RESIDENTS FOR STADIUM ACCOUNTABILITY, A COALITION OF SMALL BUSINESSES, CITY RESIDENTS, AND WOW MEDIA, INC.

STREET ADDRESS (NO P.O. BOX)

455 MARKET STREET, SUITE 1400

CITY	STATE	ZIP CODE	AREA CODE/PHONE
SAN FRANCISCO	CA	94105	(415) 732-7700

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS
CAMPAIGN@RUTAN.COM

Treasurer(s)

NAME OF TREASURER

JAMES SUTTON

MAILING ADDRESS

455 MARKET STREET, SUITE 1400

CITY	STATE	ZIP CODE	AREA CODE/PHONE
SAN FRANCISCO	CA	94105	(415) 732-7700

NAME OF ASSISTANT TREASURER, IF ANY

ELI LOVE

MAILING ADDRESS

455 MARKET STREET, SUITE 1400

CITY	STATE	ZIP CODE	AREA CODE/PHONE
SAN FRANCISCO	CA	94105	(415) 732-7700

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the 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.

James Sutton

Digitally signed by James Sutton
Date: 2026.07.30 23:00:47 -07'00'

Executed on _____
Date

By _____
Signature of Treasurer or Assistant Treasurer

Executed on _____
Date

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on _____
Date

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on _____
Date

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016)

FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

Recipient Committee
Campaign Statement
Cover Page — Part 2

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

Page 2 of 11

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Related Committees Not Included in this Statement: *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

See continuation for Part 6a

BALLOT NO. OR LETTER

JURISDICTION

☐ SUPPORT
☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

Attach continuation sheets if necessary

Recipient Committee
Campaign Statement
Part 6a. Primarily Formed Ballot Measure Committee (continued)

CALIFORNIA
FORM **460**

Page 3 of 11

NAME OF BALLOT MEASURE

INGLEWOOD FAIR SHARE ADMISSIONS TAX TIER REFORM AND CAP REMOVAL
INITIATIVE

BALLOT NO. OR LETTER

TBD

JURISDICTION

CITY OF INGLEWOOD

SUPPORT/OPOSE

Support

NAME OF BALLOT MEASURE

INGLEWOOD PARKING PRICE TRANSPARENCY AND ANTI-PRICE GOUGING INITIATIVE

BALLOT NO. OR LETTER

TBD

JURISDICTION

CITY OF INGLEWOOD

SUPPORT/OPOSE

Support

NAME OF BALLOT MEASURE

BILLBOARD BLIGHT ELIMINATION AND NEIGHBORHOOD PRESERVATION INITIATIVE

BALLOT NO. OR LETTER

TBD

JURISDICTION

CITY OF INGLEWOOD

SUPPORT/OPOSE

Oppose

Campaign Disclosure Statement Summary Page

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>04/01/2026</u> through <u>06/30/2026</u>	CALIFORNIA FORM 460 Page <u>4</u> of <u>11</u> I.D. NUMBER <u>1488613</u>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

INGLEWOOD RESIDENTS FOR STADIUM ACCOUNTABILITY, A COALITION OF SMALL BUSINESSES, CITY RESIDENTS, AND WOW MEDIA, INC.

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$ <u>1,132,200.00</u>	\$ <u>1,532,200.00</u>
2. Loans Received	Schedule B, Line 3	<u>0.00</u>	<u>0.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$ <u>1,132,200.00</u>	\$ <u>1,532,200.00</u>
4. Nonmonetary Contributions	Schedule C, Line 3	<u>0.00</u>	<u>0.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$ <u>1,132,200.00</u>	\$ <u>1,532,200.00</u>

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ <u>1,532,200.00</u>	\$ <u>1,532,200.00</u>
21. Expenditures Made	\$ <u>1,292,751.87</u>	\$ <u>1,292,751.87</u>

Expenditures Made

6. Payments Made	Schedule E, Line 4	\$ <u>925,573.69</u>	\$ <u>1,124,178.69</u>
7. Loans Made	Schedule H, Line 3	<u>0.00</u>	<u>0.00</u>
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$ <u>925,573.69</u>	\$ <u>1,124,178.69</u>
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	<u>168,573.18</u>	<u>168,573.18</u>
10. Nonmonetary Adjustment	Schedule C, Line 3	<u>0.00</u>	<u>0.00</u>
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$ <u>1,094,146.87</u>	\$ <u>1,292,751.87</u>

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)	
Date of Election (mm/dd/yy)	Total to Date
<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$ <u>201,395.00</u>
13. Cash Receipts	Column A, Line 3 above	<u>1,132,200.00</u>
14. Miscellaneous Increases to Cash	Schedule I, Line 4	<u>0.00</u>
15. Cash Payments	Column A, Line 8 above	<u>925,573.69</u>
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>408,021.31</u>

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	\$ <u>0.00</u>
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	\$ <u>0.00</u>
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	\$ <u>168,573.18</u>

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

*Amounts in this section may be different from amounts reported in Column B.

Schedule A Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from <u>04/01/2026</u> through <u>06/30/2026</u>		CALIFORNIA FORM 460
		Page <u>5</u> of <u>11</u>
NAME OF FILER INGLEWOOD RESIDENTS FOR STADIUM ACCOUNTABILITY, A COALITION OF SMALL BUSINESSES, CITY RESIDENTS, AND WOW MEDIA, INC.		I.D. NUMBER 1488613

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

INGLEWOOD RESIDENTS FOR STADIUM ACCOUNTABILITY, A COALITION OF SMALL BUSINESSES, CITY RESIDENTS, AND WOW MEDIA, INC.

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
04/24/2026	WOW MEDIA, INC. 6080 CENTER DRIVE, 6TH FLOOR LOS ANGELES, CA 90015	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		93,000.00	1,532,200.00	
04/24/2026	WOW MEDIA, INC. 6080 CENTER DRIVE, 6TH FLOOR LOS ANGELES, CA 90015	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		200,000.00	1,532,200.00	
04/29/2026	WOW MEDIA, INC. 6080 CENTER DRIVE, 6TH FLOOR LOS ANGELES, CA 90015	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		89,700.00	1,532,200.00	
05/19/2026	WOW MEDIA, INC. 6080 CENTER DRIVE, 6TH FLOOR LOS ANGELES, CA 90015	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		89,700.00	1,532,200.00	
05/26/2026	WOW MEDIA, INC. 6080 CENTER DRIVE, 6TH FLOOR LOS ANGELES, CA 90015	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		59,800.00	1,532,200.00	
SUBTOTAL \$				532,200.00		

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 1,132,200.00
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 0.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 1,132,200.00

*Contributor Codes

IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>04/01/2026</u> through <u>06/30/2026</u>		CALIFORNIA FORM 460
		Page <u>6</u> of <u>11</u>
NAME OF FILER INGLEWOOD RESIDENTS FOR STADIUM ACCOUNTABILITY, A COALITION OF SMALL BUSINESSES, CITY RESIDENTS, AND WOW MEDIA, INC.		I.D. NUMBER 1488613

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/04/2026	WOW MEDIA, INC. 6080 CENTER DRIVE, 6TH FLOOR LOS ANGELES, CA 90015	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		600,000.00	1,532,200.00	
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
SUBTOTAL \$				600,000.00		

*Contributor Codes
 IND – Individual
 COM – Recipient Committee
 (other than PTY or SCC)
 OTH – Other (e.g., business entity)
 PTY – Political Party
 SCC – Small Contributor Committee

Schedule E Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	04/01/2026	
through	06/30/2026	Page <u>7</u> of <u>11</u>
NAME OF FILER		ID NUMBER
INGLEWOOD RESIDENTS FOR STADIUM ACCOUNTABILITY, A COALITION OF SMALL BUSINESSES, CITY RESIDENTS, AND WOW MEDIA, INC.		1488613

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
UNITIST, LLC 12731 CASWELL AVENUE, #6 LOS ANGELES, CA 90066		CNS, LIT, WEB, CMP	11,714.99
RUTAN & TUCKER 455 MARKET STREET, SUITE 1400 SAN FRANCISCO, CA 94105	PRO		7,834.50
UNITIST, LLC 12731 CASWELL AVENUE, #6 LOS ANGELES, CA 90066		LIT, CMP, DIGITAL ADS	4,441.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 23,990.49

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	925,573.69
2. Unitemized payments made this period of under \$100	\$	0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$	925,573.69

**Schedule E
(Continuation Sheet)
Payments Made**

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from <u>04/01/2026</u>		
through <u>06/30/2026</u>		Page <u>8</u> of <u>11</u>
NAME OF FILER		I.D. NUMBER
INGLEWOOD RESIDENTS FOR STADIUM ACCOUNTABILITY, A COALITION OF SMALL BUSINESSES, CITY RESIDENTS, AND WOW MEDIA, INC.		1488613

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
UNITIST, LLC 12731 CASWELL AVENUE, #6 LOS ANGELES, CA 90066	PET		31,860.00
UNITIST, LLC 12731 CASWELL AVENUE, #6 LOS ANGELES, CA 90066	PET		47,790.00
UNITIST, LLC 12731 CASWELL AVENUE, #6 LOS ANGELES, CA 90066	PET		93,000.00
RUTAN & TUCKER 455 MARKET STREET, SUITE 1400 SAN FRANCISCO, CA 94105	PRO		89,700.00
UNITIST, LLC 12731 CASWELL AVENUE, #6 LOS ANGELES, CA 90066	PET		163,192.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 425,542.00

**Schedule E
(Continuation Sheet)
Payments Made**

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	04/01/2026	
through	06/30/2026	Page 9 of 11

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

INGLEWOOD RESIDENTS FOR STADIUM ACCOUNTABILITY, A COALITION OF SMALL BUSINESSES, CITY RESIDENTS, AND WOW MEDIA, INC.

I.D. NUMBER

1488613

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
UNITIST, LLC 12731 CASWELL AVENUE, #6 LOS ANGELES, CA 90066		CMP, CNS, LIT, WEB; SEE SCHEDULE G	12,092.06
UNITIST, LLC 12731 CASWELL AVENUE, #6 LOS ANGELES, CA 90066	PET		89,700.00
UNITIST, LLC 12731 CASWELL AVENUE, #6 LOS ANGELES, CA 90066	PET		59,800.00
BANK OF SAN FRANCISCO 345 CALIFORNIA STREET, #1600 SAN FRANCISCO, CA 94104	OFC		30.00
BANK OF SAN FRANCISCO 345 CALIFORNIA STREET, #1600 SAN FRANCISCO, CA 94104	OFC		30.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 161,652.06

**Schedule E
(Continuation Sheet)
Payments Made**

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	04/01/2026	
through	06/30/2026	Page 10 of 11
NAME OF FILER		I.D. NUMBER
INGLEWOOD RESIDENTS FOR STADIUM ACCOUNTABILITY, A COALITION OF SMALL BUSINESSES, CITY RESIDENTS, AND WOW MEDIA, INC.		1488613

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

INGLEWOOD RESIDENTS FOR STADIUM ACCOUNTABILITY, A COALITION OF SMALL BUSINESSES, CITY RESIDENTS, AND WOW MEDIA, INC.

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
UNITIST, LLC 12731 CASWELL AVENUE, #6 LOS ANGELES, CA 90066		CNS & REIMBURSED EXPENSES	10,145.00
UNITIST, LLC 12731 CASWELL AVENUE, #6 LOS ANGELES, CA 90066	PET		108,795.00
BANK OF SAN FRANCISCO 345 CALIFORNIA STREET, #1600 SAN FRANCISCO, CA 94104	OFC		30.00
JCI WORLDWIDE INC. 1513 6TH STREET, SUITE 204 SANTA MONICA, CA 90401		CNS, CMP, POL & DIGITAL ADS	176,000.00
RUTAN & TUCKER 455 MARKET STREET, SUITE 1400 SAN FRANCISCO, CA 94105	PRO		19,419.14

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 314,389.14

Schedule F Accrued Expenses (Unpaid Bills)

Amounts may be rounded
to whole dollars.

SCHEDULE F

Statement covers period from 04/01/2026 through 06/30/2026	CALIFORNIA FORM 460
Page 11 of 11	I.D. NUMBER 1488613

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

INGLEWOOD RESIDENTS FOR STADIUM ACCOUNTABILITY, A COALITION OF SMALL BUSINESSES, CITY RESIDENTS, AND WOW MEDIA, INC.

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
UNITIST, LLC 12731 CASWELL AVENUE, #6 LOS ANGELES, CA 90066	PET	0.00	-310.00	0.00	-310.00
UNITIST, LLC 12731 CASWELL AVENUE, #6 LOS ANGELES, CA 90066	CNS & REIMBURSED EXPENSES	0.00	10,383.18	0.00	10,383.18
JCI WORLDWIDE INC. 1513 6TH STREET, SUITE 204 SANTA MONICA, CA 90401	CNS, CMP, POL & DIGITAL ADS	0.00	158,500.00	0.00	158,500.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.		SUBTOTALS \$	0.00\$	168,573.18\$	0.00\$ 168,573.18

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$** 168,573.18
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$** 0.00
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** 168,573.18
May be a negative number