LOUISIANA BOARD OF ETHICS
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(ANNUAL) TIER 2 PERSONAL FINANCIAL DISCLOSURE STATEMENT

☒ I currently hold an office that would require me to file a Tier 2.1, or Tier 3 Personal Financial Disclosure Statement. As such, I have completed SCHEDULE D.

Print Form

☒ ORIGINAL REPORT

☐ AMENDED REPORT

☐ FINAL REPORT (WHERE TERM ENDS IN JANUARY [COVERING JANUARY 1 THROUGH JANUARY ☐, 20☐])

A final reports must be filed on or before May 15 of the year in which your service to that office ends.
Refer to the "GENERAL INFORMATION" sheet of this form to determine eligibility.

This Report Covers Calendar Year: 2024

OFFICE/POSITION HELD: Louisiana Senate District 11

NAME OF FILER (print full name): Patrick Moore McMath

Mailing Address : 78 Riverdale Drive

City, State, Zip: Covington, LA 70433

NAME OF SPOUSE(if applicable)(print full name): Jayne Chapmagne McMath

Spouse's Occupation:

Spouse's Principal Business Address:

City, State, Zip:

CHECK ALL THAT APPLY

☒ I have filed my state income tax return for the year listed above.
☐ I have filed for an extension of my state income tax return for the year listed above.
☒ I have filed my federal income tax return for the year listed above.
☐ I have filed for an extension of my federal income tax return for the year listed above.

CERTIFICATE OF ACCURACY

I do hereby certify that the information contained in this personal financial disclosure statement is true and correct to the best of my knowledge, information, and belief.

P. M. Math

Signature of Filer

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Schedule A: Employment Information

☐ Check if not applicable

If you need additional pages, use Adobe or sign up for PFD E-Filing.

☒ Filer ☐ Spouse ☐ Full-Time ☒ Part-Time
Name of Employer: McMath Construction
Job Title: Business Development
Job Description: Prpject development coordination

☐ Filer ☐ Spouse ☐ Full-Time ☐ Part-Time
Name of Employer:
Job Title:
Job Description:

☐ Filer ☐ Spouse ☐ Full-Time ☐ Part-Time
Name of Employer:
Job Title:
Job Description:

☐ Filer ☐ Spouse ☐ Full-Time ☐ Part-Time
Name of Employer:
Job Title:
Job Description:

☐ Filer ☐ Spouse ☐ Full-Time ☐ Part-Time
Name of Employer:
Job Title:
Job Description:

* **You are required to disclose employment information related to both you and your spouse (if applicable).**
* **List the name of the employer; the title of the position; a brief description of the job; and disclosure as to whether the position is full-time or part-time.**
* **Self-employment information is reported on Schedule B.**

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Schedule B: Positions - Business

☐ Check if not applicable

If you need additional pages, use Adobe or sign up for PFD E-Filing.

☒ Filer ☐ Spouse ☐ Both

Amount of Interest: 33 %

Name of Business: McMath Family Holdings

Address: 1125 N Causeway Boulevard

City, State, Zip: Mandeville, LA 70448

Business Description: Real estate holdings

Nature of Association: member

☒ Filer ☐ Spouse ☐ Both

Amount of Interest: 100 %

Name of Business: Satin Doll Investments

Address: 404 E Boston Street, Suite 200

City, State, Zip: Covington, LA 70433

Business Description: Consulting and Development

Nature of Association: owner

☒ Filer ☐ Spouse ☐ Both

Amount of Interest: 50 %

Name of Business: Southern Furniture Direct

Address: 404 E Gibson Street, Suite 2

City, State, Zip: Covington, LA 70433

Business Description: commercial furniture

Nature of Association: member

* **You are required to complete SCHEDULE B if you or your spouse is a director, officer, stockholder, owner, partner, member, or trustee of a business AND if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.**
* **"Business" means any corporation, partnership, limited liability company, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.**

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Schedule B: Positions - Business

☐ Check if not applicable

☒ Filer ☐ Spouse ☐ Both

Amount of Interest: 33 %

Name of Business: BGWL

Address: 1125 N Causeway Blvd

City, State, Zip: Mandeville, LA 70448

Business Description: real estate holdings

Nature of Association: member

☒ Filer ☐ Spouse ☐ Both

Amount of Interest: 50 %

Name of Business: Ox Lot Properties

Address: 1125 N Causeway Blvd

City, State, Zip: Mandeville, LA 70448

Business Description: real estate holdings

Nature of Association: member

☒ Filer ☐ Spouse ☐ Both

Amount of Interest: 50 %

Name of Business: Northstar Investment Properties

Address: 404 E Gibson Street, Suite 2

City, State, Zip: Covington, LA 70433

Business Description: development and real estate holdings

Nature of Association: member

* **You are required to complete SCHEDULE B if you or your spouse is a director, officer, stockholder, owner, partner, member, or trustee of a business AND if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.**
* **"Business" means any corporation, partnership, limited liability company, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.**

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Schedule C: Positions - Nonprofit

☐ Check if not applicable

If you need additional pages, use Adobe or sign up for PFD E-Filing.

☒ Filer ☐ Spouse

Name of Organization: Kelly Gibson Foundation

Address: PO Box 2141

City, State, Zip: Mandeville, A 70470

Nature of Association: 501C3 Board Member

Description of Organization: supports first responders and military

☐ Filer ☐ Spouse

Name of Organization:

Address:

City, State, Zip:

Nature of Association:

Description of Organization:

☐ Filer ☐ Spouse

Name of Organization:

Address:

City, State, Zip:

Nature of Association:

Description of Organization:

***You are required to complete SCHEDULE C if you or your spouse is a director or officer of a nonprofit organization.**

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Schedule D: Other Offices/Positions Held

☒ Check if not applicable

If you need additional pages, use Adobe or sign up for PFD E-Filing.

Name of Office/Position: Louisiana Senate District 11
Name of Office/Position:
Name of Office/Position:
Name of Office/Position:
Name of Office/Position:
Name of Office/Position:
Name of Office/Position:
Name of Office/Position:
Name of Office/Position:

* **You are required to complete SCHEDULE D if you hold any other office or position which would require you to file a personal financial disclosure statement under La. R.S. 42:1124.2.1 or 42:1124.3.**

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Schedule E: Immovable Property

☐ Check if not applicable **(where the value of the interest in the parcel exceeds $5,000)**
If you need additional pages, use Adobe or sign up for PFD E-Filing.

☐ Filer ☐ Spouse ☒ Both

Location of Property:

State: LA Parish/County: St. Tammany

Description of Property: personal residence

Value of the Interest in the Parcel:

☐ Category I (less than $5,000) ☐ Category II ($5,000-$24,999)
☐ Category III ($25,000-$100,000) ☒ Category IV (more than $100,000)

☒ Filer ☐ Spouse ☐ Both

Location of Property:

State: LA Parish/County: St Tammany

Description of Property: commercial office space

Value of the Interest in the Parcel:

☐ Category I (less than $5,000) ☐ Category II ($5,000-$24,999)
☐ Category III ($25,000-$100,000) ☒ Category IV (more than $100,000)

☒ Filer ☐ Spouse ☐ Both

Location of Property:

State: LA Parish/County: St Tammany

Description of Property: medical facility, via McMath Family HOldings

Value of the Interest in the Parcel:

☐ Category I (less than $5,000) ☐ Category II ($5,000-$24,999)
☒ Category III ($25,000-$100,000) ☐ Category IV (more than $100,000)

*** You are required to disclose the location by state and parish/county.**
*** You are required to provide a brief description of the immovable property and its fair market value or use value (determined by the assessor for purposes of ad valorem taxes.)**

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Schedule E: Immovable Property

☐ Check if not applicable **(where the value of the interest in the parcel exceeds $5,000)**

☐ Filer ☐ Spouse ☒ Both

Location of Property:

State: LA Parish/County: St Tammany

Description of Property: Family Farm

Value of the Interest in the Parcel:

☐ Category I (less than $5,000) ☐ Category II ($5,000-$24,999)

☐ Category III ($25,000-$100,000) ☒ Category IV (more than $100,000)

☐ Filer ☐ Spouse ☐ Both

Location of Property:

State: _____ Parish/County: _____

Description of Property: _____

Value of the Interest in the Parcel:

☐ Category I (less than $5,000) ☐ Category II ($5,000-$24,999)

☐ Category III ($25,000-$100,000) ☐ Category IV (more than $100,000)

☐ Filer ☐ Spouse ☐ Both

Location of Property:

State: _____ Parish/County: _____

Description of Property: _____

Value of the Interest in the Parcel:

☐ Category I (less than $5,000) ☐ Category II ($5,000-$24,999)

☐ Category III ($25,000-$100,000) ☐ Category IV (more than $100,000)

*** You are required to disclose the location by state and parish/county.**
*** You are required to provide a brief description of the immovable property and its fair market value or use value (determined by the assessor for purposes of ad valorem taxes.)**

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Schedule F: Filer/Spouse Income from the State, Political Subdivisions, and/or Gaming Interests

☐ Check if not applicable

If you need additional pages, use Adobe or sign up for PFD E-Filing.

☒ Filer ☐ Spouse ☐ Business(where amount of interest exceeds 10%)

Type of Income: ☒ State ☐ Political Subdivision ☐ Gaming Interest

Name of Business(if applicable): _____

Name of Income Source: Louisiana Senate

Address: PO Box 94138

City, State, Zip: Baton Rouge, LA 70804

Amount of Income (exact dollar amount): $ 32,586.04

☒ Filer ☐ Spouse ☐ Business(where amount of interest exceeds 10%)

Type of Income: ☐ State ☒ Political Subdivision ☐ Gaming Interest

Name of Business(if applicable): McMath Family Holdings

Name of Income Source: St Tammany Parish Hospital Folsom Clinic

Address: 82525 Highway 25

City, State, Zip: Folsom, LA 70437

Amount of Income (exact dollar amount): $ 62,525

☐ Filer ☐ Spouse ☐ Business(where amount of interest exceeds 10%)

Type of Income: ☐ State ☐ Political Subdivision ☐ Gaming Interest

Name of Business(if applicable): _____

Name of Income Source: _____

Address: _____

City, State, Zip: _____

Amount of Income (exact dollar amount): $ _____

* **You are required to complete SCHEDULE F if you or your spouse received income (includes any income from public source such as employment income, retirement, etc.) from the State, any political subdivision, and/or a gaming interest OR if a business in which you or your spouse owns an interest which exceeds 10% (either individually or collectively) received income from the aforementioned sources.**

* **"Income" (for a business) means gross income less costs of goods sold, and operating expenses.**

* **"Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.**

* **The definitions for (and examples of) *political subdivision, gaming interest, and business* are found in the *Instructions Section* of this form.**

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Schedule G: Income Received from Employment

☐ Check if not applicable

If you need additional pages, use Adobe or sign up for PFD E-Filing.

☒ Filer ☐ Spouse ☐ Full-time ☐ Part-time

Name of Employer: McMath Construction

Address: 1125 N Causeway Blvd

City, State, Zip: Mandeville, LA 70471

Nature of services (pursuant to such employment): commercial general contractor

Amount of Income: ☐ Category I (less than $5,000) ☐ Category II ($5,000-$24,999)
☒ Category III ($25,000-$100,000) ☐ Category IV (more than $100,000)

☐ Filer ☐ Spouse ☐ Full-time ☐ Part-time

Name of Employer: _____

Address: _____

City, State, Zip: _____

Nature of services (pursuant to such employment): _____

Amount of Income: ☐ Category I (less than $5,000) ☐ Category II ($5,000-$24,999)
☐ Category III ($25,000-$100,000) ☐ Category IV (more than $100,000)

☐ Filer ☐ Spouse ☐ Full-time ☐ Part-time

Name of Employer: _____

Address: _____

City, State, Zip: _____

Nature of services (pursuant to such employment): _____

Amount of Income: ☐ Category I (less than $5,000) ☐ Category II ($5,000-$24,999)
☐ Category III ($25,000-$100,000) ☐ Category IV (more than $100,000)

* **You are required to complete SCHEDULE G to disclose the income received by you or your spouse for each full-time or part-time employment position held.**
* **"Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.**
* **Income that is reported on SCHEDULE F does not have to be restated on SCHEDULE G.**
* **Income received through *self-employment* is reported on SCHEDULE H, unless it is reported on Schedule F.**

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Schedule H: Income Received From Business

☐ Check if not applicable

If you need additional pages, use Adobe or sign up for PFD E-Filing.

AGGREGATE AMOUNT OF INCOME RECEIVED FROM BUSINESS:

☐ Category I (less than $5,000) ☐ Category II ($5,000-$24,999)

☐ Category III ($25,000-$100,000) ☒ Category IV (more than $100,000)

☒ Filer ☐ Spouse

Name of Business: Southern Furniture Direct

Address: 404 E Gibson Street, Suite 2

City, State, Zip: Covington, LA 70433

Nature of services rendered or reason income was received: furniture sales

☒ Filer ☐ Spouse

Name of Business: McMath Family Holdings

Address: 1125 N Causeway Blvd

City, State, Zip: Mandeville, LA 70471

Nature of services rendered or reason income was received: real estate holdings

☐ Filer ☐ Spouse

Name of Business:

Address:

City, State, Zip:

Nature of services rendered or reason income was received:

☐ Filer ☐ Spouse

Name of Business:

Address:

City, State, Zip:

Nature of services rendered or reason income was received:

* **You are required to complete SCHEDULE H if you or your spouse received income from a business.**
* **"Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.**
* **Income reported on SCHEDULE F or G does not have to be restated on SCHEDULE H.**
* **Income received through *self-employment* is reported on SCHEDULE H.**
* **"Business" means any corporation, partnership, limited liability company, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.**

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Schedule I: Other Income

☐ Check if not applicable

(any other income that exceeds $1,000)

If you need additional pages, use Adobe or sign up for PFD E-Filing.

☐ Filer ☐ Spouse
Description of Income:

Nature of services rendered or reason income was received:

Amount of Income: ☐ Category I (less than $5,000) ☐ Category II ($5,000-$24,999)
☐ Category III ($25,000-$100,000) ☐ Category IV (more than $100,000)

☐ Filer ☐ Spouse
Description of Income:

Nature of services rendered or reason income was received:

Amount of Income: ☐ Category I (less than $5,000) ☐ Category II ($5,000-$24,999)
☐ Category III ($25,000-$100,000) ☐ Category IV (more than $100,000)

☐ Filer ☐ Spouse
Description of Income:

Nature of services rendered or reason income was received:

Amount of Income: ☐ Category I (less than $5,000) ☐ Category II ($5,000-$24,999)
☐ Category III ($25,000-$100,000) ☐ Category IV (more than $100,000)

* **You are required to complete SCHEDULE I if you or your spouse received any other type of income (includes any income from private source such as rental income, federal retirement, etc.) that exceeded $1,000.**
* **"Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.**
* **You are not required to report income that is derived from child support and alimony payments contained in a court order, or from disability payments from any source.**
* **Income that is reported on SCHEDULE F, G, or H does not have to be restated on SCHEDULE I.**
* **Income from retirement accounts not reported on Schedule F should be included on Schedule I.**

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Schedule J: Investment Holdings

☐ Check if not applicable **(an investment holding that exceeds $5,000)**

If you need additional pages, use Adobe or sign up for PFD E-Filing.

☐ Filer ☐ Spouse ☐ Both
Name of Security:

Description of Security:

☐ Filer ☐ Spouse ☐ Both
Name of Security:

Description of Security:

☐ Filer ☐ Spouse ☐ Both
Name of Security:

Description of Security:

☐ Filer ☐ Spouse ☐ Both
Name of Security:

Description of Security:

* **You are required to complete SCHEDULE J if you or your spouse holds investment securities where each investment security has a value that exceeds $5,000.**
* **You are not required to disclose variable annuities, variable life insurance, variable universal life insurance, whole life insurance, any other life insurance product, mutual funds, exchange-traded funds, education investment accounts, retirement investment accounts, government bonds, and cash/cash equivalent investments.**
* **You are not required to disclose information concerning any property held and administered for any person other than you or your spouse under a trust, tutorship, curatorship, or other custodial instrument.**

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Schedule K: Transactions

☐ Check if not applicable **(a transaction that exceeds $5,000)**

If you need additional pages, use Adobe or sign up for PFD E-Filing.

☐ Filer ☐ Spouse ☐ Both

Transaction Date: _____

Description of Transaction:

_____

Amount of Transaction: ☐ Category I (less than $5,000) ☐ Category II ($5,000-$24,999)
☐ Category III ($25,000-$100,000) ☐ Category IV (more than $100,000)

☐ Filer ☐ Spouse ☐ Both

Transaction Date: _____

Description of Transaction:

_____

Amount of Transaction: ☐ Category I (less than $5,000) ☐ Category II ($5,000-$24,999)
☐ Category III ($25,000-$100,000) ☐ Category IV (more than $100,000)

☐ Filer ☐ Spouse ☐ Both

Transaction Date: _____

Description of Transaction:

_____

Amount of Transaction: ☐ Category I (less than $5,000) ☐ Category II ($5,000-$24,999)
☐ Category III ($25,000-$100,000) ☐ Category IV (more than $100,000)

*** You are required to complete SCHEDULE K if you or your spouse purchased or sold any immovable property, personally owned tax credit certificates, stocks, bonds, or commodities futures including any option to acquire or dispose of any immovable property or of any personally owned tax credit certificates, stocks, bonds, or commodities futures (when the value of the transaction exceeded $5,000 in the previous calendar year).**

*** You are not required to report variable annuities, variable life insurance, variable universal life insurance, whole life insurance, any other life insurance product, mutual funds, exchange-traded funds, education investment accounts, retirement investment accounts, government bonds, cash or cash equivalent investments.**

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