CITY OF CHICAGO
2018 STATEMENT OF FINANCIAL INTERESTS

To avoid a violation of the Governmental Ethics Ordinance, you must disclose all income and assets, and submit your form to the Board of Ethics, 740 N. Sedgwick, Ste. 500, Chicago, IL 60654-8488 by May 31, 2018.

Last Name: ERICKSON
First Name: CARL
Middle Initial: C

Mailing Address:  

City:  
State:  
Zip:  

Title:  

1. In 2017, were you employed by any governmental unit other than the City of Chicago?  
   Yes  No

   If YES, list the name of each governmental unit:

2. In 2017, did you serve as an employee, officer, director, associate, partner, or proprietor or in any advisory capacity for any professional, business or other organization (other than your City employment or appointment) from which you received or derived income of more than $2,000?  
   Yes  No

   If YES, for each organization provide the following information (see note above):

   Name & Address:  
   Type of Organization:  
   Your Position:  
   + Amount of Income, By Category:  

3. In 2017, did you receive compensation in excess of $5,000.00 for professional*, business or other services rendered to a person* or entity doing business* with the City of Chicago, the Chicago Transit Authority, Chicago Board of Education, Chicago Park District, Chicago City Colleges, or Metropolitan Pier and Exposition Authority?  
   Yes  No

   If YES, provide the following for each person or entity to which you provided services:

   Name:  
   Nature of Service:  
   Government Unit With Which Person Or Entity Did Business:  
   + Amount of Income, By Category:  

4. In 2017, did your spouse or domestic partner* receive compensation or payment in excess of $5,000.00 for professional*, business, employment, work or other services rendered to a person* or entity doing business* with the City of Chicago, the Chicago Transit Authority, Chicago Board of Education, Chicago Park District, Chicago City Colleges, or Metropolitan Pier and Exposition Authority?  
   Yes  No

   If YES, provide the following for each person or entity to which your spouse/domestic partner provided services:

   Name:  
   Nature of Services:  
   Government Unit With Which Person Or Entity Did Business:  
   + Amount of Income, By Category:  

5. In 2017, did any entity in which you or your spouse or domestic partner* have a financial interest* receive compensation in excess of $5,000 for professional*, business or other services rendered to any person* or entity doing business* with the City of Chicago, the Chicago Transit Authority, Chicago Board of Education, Chicago Park District, Chicago City Colleges, or Metropolitan Pier and Exposition Authority?  
   Yes  No

   If YES, provide the following information about the entity in which you/spouse/domestic partner have a financial interest:

   Name:  
   Name of Person Or Entity To Which Services were provided:  
   Nature of Services:  
   Government Unit With Which Person Did Business:  
   + Amount of Income, By Category:  

6. In 2017, did you have a financial interest* in any person* doing business* with the City? (Note: common stock interests in publicly held companies that represent less than 1/2 of 1% (0.5%) of the company's outstanding common stock, or time or demand deposits in financial institutions, or endowments, policies or annuities purchased from insurance companies, need not be disclosed.)  
   Yes  No

   If YES, provide the following for each person:

   Name:  
   Title Or Description Of Position You Held In This Person:  

Note: For security reasons, filers in the Chicago Fire and Police Departments, Inspector General's Office, Civilian Office of Police Accountability, and Office of Emergency Communications and building and health inspectors need not disclose the address of businesses, organizations, or property in questions 2 or 3; for question 9, however, they must list the number and types of properties owned, for example: two 6-flats, etc.
7. In 2017, did you have a financial interest* in any person* conducting business in Chicago? (Note: common stock interests in publicly held companies that represent less than 1/2 of 1% (.05%) of the company's outstanding common stock, or time or demand deposits in financial institutions, or endowments, policies or annuities purchased from insurance companies, need not be disclosed.)

☐ Yes ☐ No

If YES, provide the following for each person:

Name ___________________________ Type / Instrument of Ownership ___________________________

8. In 2017, did you realize a capital gain of $5,000.00 or more from the sale of any capital asset other than your principal place of residence? ☐ Yes ☐ No

If YES, identify the asset(s) sold (including the address or legal description of the real estate and the appropriate Category of the amount of gain realized for each identified asset (see note at top of form).)

+ Amount of gain, By Category

9. Do you currently have a financial interest* in real estate-located in the City of Chicago, other than your principal place of residence? Include all forms of direct or indirect ownership, such as partnerships or trusts whose corpus consists primarily of real estate. (If your principal place of residence is in a multiple-unit or mixed-use building in which you have a financial interest*, answer "yes" to this question.) ☐ Yes ☐ No

If YES, identify the real estate by address (see note at top of form for filers from certain departments), including zip code, or, if there is no address, by legal description:

10. In 2017, did you receive from any person* (other than relatives* or a domestic partner*) one or more gifts having an aggregate value in excess of $250.00? ☐ Yes ☐ No

If YES, identify the person or persons from whom you received such gifts:

11. In 2017, did you receive any improper gift* that you disposed of in accordance with Section 2-136-144 of the Governmental Ethics Ordinance? ☐ Yes ☐ No

If YES, identify the improper gift(s), the donor(s) if known, and method of disposal:

12. Do you currently have a financial interest* in any person* or entity who in 2017 applied to the City of Chicago for a license or franchise, or any permit for annexation, zoning or rezoning of real estate? ☐ Yes ☐ No

If YES, list the name of the person(s) in which you have the financial interest and describe the City action requested (including the nature of the application sought or the action requested):

Name ___________________________ Action Requested ___________________________

13. If you currently own or anyone owes you more than $5,000.00, did the debtor, creditor or guarantor of the debt do business* with or do work for the City of Chicago in 2017? (Do not include: (1) debt instruments issued by financial institutions whose normal business includes the making of loans of the kind you received in accordance with other terms and conditions standard for such loans at the time the debt was contracted, if the loans are made at the prevailing rate of interest; or (2) debt instruments issued by publicly held corporations and purchased by you on the open market at the price available to the public.) ☐ Yes ☐ No

If YES, provide the following information:

Name of Debtor, Creditor or Guarantor ___________________________ Is the Person a Debtor, Creditor or Guarantor ☐ Yes ☐ No

Type of Debt Instrument ___________________________

14. Do you now serve on any board or commission either as a volunteer or for compensation (including non-City boards or commissions)? ☐ Yes ☐ No

If YES, provide the name(s) of board(s) and your position(s) on the board(s):

15. Do you currently have a relative* or domestic partner* who is registered as a lobbyist with the City's Board of Ethics? ☐ Yes ☐ No

If YES, list the lobbyist(s) and the lobbyist's relationship to you:

Name(s) ___________________________ Relationship ___________________________

16. Do you currently have a relative* or domestic partner* who is an employee or full- or part-owner of a City contractor? ☐ Yes ☐ No

If YES, list the relative(s) or domestic partner(s), his/her relationship to you, the City contractor(s), and his/her relationship with the contractor(s):

Name(s) ___________________________ Contractor(s) ___________________________

Relationship(s) ___________________________ Position(s) ___________________________

VERIFICATION: I declare that I have examined this Statement of Financial Interests form, including any accompanying documents, and to the best of my knowledge and belief it is true and complete. I understand that knowingly filing a Statement containing false or misleading information, or failing to file by the deadline, can result in fines, removal from office, or disbarment from function, including discharge, in accordance with applicable rules, regulations, and ordinances of the City of Chicago.

Signature and Date ___________________________ 3/1/2018