

740 N. Sedgwick, Ste. 500 Chicago, IL 60654-8488 (312) 744-9660

CITY OF CHICAGO City of Chicago

To avoid a violation of the Governmental Etrics Ordinance and sanctions, including a \$250 per day fine until you file and having your name and violation being made public, you must return this corp to later than the close of business Monday, May 3, 2021 to: Board of Ethics, 740 N. Sedgwick, Suite 500, Chicago, IL 60654-8488

By Please complete this form, sign it and then mail / deliver it to the Board of Ethics. We cannot accept Statements via e-mail, fax or PDF formats. Please answer all 16 questions and sign your form before returning it. If you need more room, please attach and label extra sheets Terms with an asterisk (*) are defined on the instruction sheet. + In questions 2-5 & 8, indicate the appropriate income, compensation or capital gain by writing in the appropriate category letter: A= \$25,000 or more B= \$5,000 - \$24,999 C= less than \$5,000 NOTE: for security reasons, filers in the Chicago Fire and Police Departments, OPSA, Inspector General's Office, Civilian Office Police Accountability, Office of Emergency Communications, or who are building, consumer protection or health inspectors need not disclose the address of business(es), organization(s) or property in questions 2 or 9; for question 9, however, they must list the number and types of properties owned, e.g.: "1 single-family house, 26-flats. ANON 0 Last Name: Middle Initial: Address: WARD City Department/Agency: 1. In 2020, were you employed by any governmental unit other than the City of Chicago? .. If YES, list the name of each governmental unit 2. In 2020, did you serve as an employee, officer, director, associate, partner, proprietor or in any advisory capacity for any professional, business or organization (other than your City employment or appointment) from which you received or derived income of more than \$1,000,002 Yes No If YES, for each mation: (see note Name & AWG ROU Type of Your +Amount of Income Address Organization Position By Category 3. In 2020, 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 to which you provided services Nature of Governmental Unit with +Amount of Income Name Service Which Person Did Business By Category 4. In 2020, did your spouse or domestic partner* 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?... had no spouse or domestic partner in 2020 Yes No If YES, provide the following for each person to which Spouse/ Domestic Partner provided services: Nature of Governmental Unit with +Amount of Income Name Service Which Person Did Business By Category In 2020, did any entity in which you OR your spouse or domestic partner* have a financial interest* receive compensation in excess of In 2020, did any entity in which you Ok your spouse or domestic partner have a linearist interest. Itself to see the control of the control o If YES, provide the following information about the entity in which you/spouse/domestic partner have a financial interest Name of Person to which Name Services were provided

In 2020, did you have a financial interest* in any person* doing business* with the City? (Note: stock interests in publicly held corporations that represent less than ½ of 1% (.5%) of the company's outstanding stock, or demand deposits in financial institutions, or endowments, policies or annuities purchased from insurance companies, need not be disclosed.)

Governmental Unit with

Which Person Did Business

+Amount of Income

By Category

If YES, provide the following for each person:

Nature of

Service

Name

Title or Description of Position
Your held in This Person

7.	In 2020, did you have a financial interest* in any person* conducting business* in Chicago? (Note: stock interests in publicly held corporations that represent less than ½ of 1% (.5%) of the company's outstanding stock, or demand deposits in financial institutions, or endowments, policies or annuities purchased from insurance companies, need not be disclosed)	
	If YES, provide the following for each person:	
	Name Type/instrument	All the second of the second o
	of Ownership	
8. In 2020, did you realize a capital gain of \$5,000.00 or more from the sale of any capital asset other than your prin		
	If YES, identify the asset(s) sold (including the address or legal description of the real estate) and the apidentified asset (see note at top of form).	propriate Category of the amount of gain realized for each +Amount of Income By Category
	Do you <u>currently</u> 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 departm legal description:	nents), including zip code, or, if there is no address, by
10.	10. In 2020, did you receive from any person* (other than relatives* or a domestic partner*) one of \$250.00?	or more gifts having an aggregate value in excess Yes No
	If YES, identify the person or persons from whom you received such gifts:	
11.	In 2020, did you receive any improper gifts* that you disposed of in accordance with Section 2-156-144 of the Governmental Ethics Ordinance? Yes X No	
	If YES, identify the improper gift(s), the donor(s) if known, and method of disposal as specified in	the ordinance
12.	Do you <u>currently</u> have a financial interest* in any person* who in 2020 applied to the City of for annexation, zoning or rezoning of real estate?	of Chicago for a license or franchise, or any permit
	If YES, list the name of the person(s) in which you have financial interest and describe the City a sought or the action requested):	action requested (including the nature of the application
	Name Action Requested	
13.	If you <u>currently</u> owe 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 2020? (Do not include: (1) debt instruments issued by financial institutions whose normal business includes the making of loans of the kind received by you 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.)	
	If YES, provide the following information:	more than \$5,000.00
	Name of Debtor, Creditor or Guarantor Is the Person a Debtor, Creditor or Guarantor	Type of Debt Instrument
14. Do you now serve on any board or commission (even if not a City board or commission, or not for compensation)? Yes If YES, provide the Name(s) of board(s) and your position(s) on the board(s):		not for compensation)? 🛱 Yes 🔲 No
	CHICAGO VOTES, A NFP CORPORATION. ON BEARD, NO COMPENSATION	
15.	Do you <u>currently</u> have a covered relative* who is registered as a lobbyist with the City's Board of Ethics, the Illinois Secretary of State, the Cook County Clerk, or any other unit of local government in the State of Illinois?	
	If YES, name the lobbyist(s) and the lobbyist's relationship to you: Name(s) Relationship	
16.	16. Do you now have any relative* or domestic partner* who is an employee or full- or part-owner of a	a City contractor? Yes No
	If YES, name the relative(s) or domestic partner(s), his/her/their relationship to you, the city contractor(s) Name(s) of Relationships Contractor(s)), and his/her /their position with the contractor(s):
pelie	VERIFICATION: I declare that I have examined this Statement of Financial Interests, including any accompa	ng information or failing to file by deadline, can result in
VIII	removal from office or in employment sanctions, including discharge, in accordance with applicable rules, required	5/3/2621

Signature and Date