

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

## CITY OF CHICAGO 2023 STATEMENT OF FINANCIAL INTERESTS

To avoid a violation of the Governmental Ethics 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 form no later than the close of business Monday, May 1, 2023 to: Board of Ethics, 740 N. Sedgwick, Suite 500, Chicago, IL 60654-8488.

your form before returning it. If you the instruction sheet.	ou need more room, ple	ase attach ar		an asterisk (*) are defined on
+ In questions 2-5 & 8, indicate the a A= \$25,000 or more	ppropriate income, comp B= \$5,000 - \$2		capital gain by writing in the appr C= less than \$5,000	opriate category letter:
NOTE: for security reasons, filers in of Police Accountability, Office of El disclose the address of business(es and types of properties owned, e.g.:	mergency Communication ), organization(s) or pro-	ons, or who a perty in ques	are building, consumer protection	or health inspectors need not
Last Name: MC BROOM	a First	N †	2011/50	All delle lessels T
Last Name: MCBroon		Name:	Penise State:	Middle Initial:
-			4	- "
City Department / Agency:	c Safety 9	ACCOLL	ntability Title: Dis	trict council
1. In 2022, were you employed by any go	vernmental unit other than	n the City of Ci	hicago?	Yes No
If YES, list the name of each governmental unit	ago Board	of Edi	ucation	
2. In 2022, did you serve as an employee organization (other than your City employee				
If YES, for each organization provide the fi	ollowing information (see	note above:		Yes No
Name & Address:	Type of Organization:		Your Position:	Amount of income by category
3. In 2022, did you receive compensation business* with the City of Chicago, Chicag Metropolitan Pier and Exposition Authori If YES, provide the following for each pers	go Transit Authority, Chica	go Board of Ed		
	Nature of		J	
Name:	Service:		Governmental Unit with which person did business	Amount of income by category
4. In 2022, did your spouse or domestic rendered to a person* or entity doing bus Chicago City Colleges, or Metropolitan Pic If YES, provide the following for each person	siness* with the City of Chie er and Exposition Authority	rago, Chicago y?	Transit Authority, Board of Education I no spouse or domestic partner in 20	n, Chicago Park District,
Nome	Nature of		Governmental Unit with	Amount of income
Name:	Service:		which person did business	by category
<ol> <li>In 2022, did any entity in which you O professional*, business or other services of Education, Chicago Park District, Chicago If YES, provide the following information</li> </ol>	endered to any person* or go City Colleges, or Metrop	entity doing b politan Pier and	business* with the City of Chicago, Cl d Exposition Authority?	hicago Transit Authority, Board Yes No
Name:			person to which were provided	
Nature of Service:	Governmental U			Amount of income by category
6. In 2022, did you have a financial intere represent less than 1/2 of 1% (.5%) of the	company's outstanding st	ock, or deman		r endowments, policies or
annuities purchased from insurance com- If YES, provide the following for each per-		sed)		Yes No
Name:			Title or Description of Position You Held in This Person	
7. In 2022, did you have a financial intere that represent less than 1/2 of 1% (.5%) o annuities purchased from insurance com	f the company's outstandi	ng stock, or de		
If YES, provide the following for each per-				
Name:			Type / Instrument of Ownership	

8. In 2022, did you realize a place of residence?	capital gain of \$5000 or r	more from the sale	of any asset ot	her than your prin	ncipal	Yes No
If YES, Identify the asset(s) sold for each identified asset (see n	(including the address or leg					
					Amoun by cate	t of income gory
9. Do you <u>currently</u> have a fina of direct or indirect ownership multiple-unit or mixed-use bui	such as partnerships or trus	ts whose corpus cor	sists primarily of	real estate. (If your	principal place of	residence is in a
If YES, identify the real estate b	y address, (see note at top o	of form for filers from	certain departm	nents), including zip	code, or, if there	s no address, by
legal description:						
10. In 2022, did you receive fro \$250?	om any person* (excluding re	elatives* or a domes	tic partner*) one	or more gifts having	an aggregate va	lue in excess of
If YES, Identify the person or pe						
11. In 2022, did you receive an						
Ordinance?						Yes 'No
res, identity the improper gr	it(s), the dottor(s) it known, a	na method or alspo.	an as specified in			
12. Do you <u>currently</u> have a fir annexation, zoning or rezoning	nancial interest* in any perso g of real estate?	n* who in 2022 appl	ied to the City of	Chicago for a licens	e or franchise, or	any permit for Yes No
If YES, list the name of the person sought or the action requested	on(s) in which you have a fina	ancial interest and d	escribe the City a	ction requested (inc	luding the nature	of the application
Name:		Acti	on Requested			
made at the prevailing rate of i price available to the public.) If YES, provide the following in Name of Debtor, Creditor			I neither owe no	ons and purchased to	n \$5,000  Type of Debt	Yes No
or Guarantor:			or or Guarantor?		Instrument	
14. Do you now serve on any b			commission, or ne	ot for compensation	)?	Yes No
If YES, provide the Name(s) of I	board(s) and your position(s)	on the board(s):				
				1		
<b>15</b> . Do you <u>currently</u> have a co	overed relative* who is regist	ered as a lobbyist wi	th the City's Boar	d of Ethics or the Illin	nois Secretary of S	State?  Yes No
If YES, name the lobbyist(s) and	d the lobbyist's relationship t	o you:				
Name(s):			Relationship			
16. Do you now have any relati	ive* or domestic partner* wh	o is an employee or	full-or part owne	r of a City contractor	r?	Yes No
If YES, name the relative(s) or d	lomestic partner(s), his/her/tl	heir relationship to y	ou, the city contr	actor(s), and his/her	/their position wi	th the contractor(s)
Name(s) and Relationship(s)		Contractor(s)		Posit	ion(s)	
17. Are you <u>currently</u> a City Co	uncil employee* or City Cour	ncil contractor*?				Yes No
f YES, provide the name(s) of	of each City Council memb	oer, City Council Co	ommittee or Cit	y Council Bureau	for whom you v	vork:
VERIFICATION: I declare th best of my knowledge and b nformation or failing to file with applicable rules, regula	belief it is true and comple by deadline, can result in	te. I understand to removal from office	hat knowingly i e or in employ	filing a Statement	containing false	or misleading
Al	Denise Mi	Brown	w	4	-19-2	3
	1,7	Signature and [	Date			

Print Form