CITY OF CHICAGO

2019 STATEMENT OF FINANCIAL INTERESTS

740 N. Sedgwick, Ste. 50 Chicago, IL 60654-8488 (312) 744-9660

your name and violation being made public, you must return this form, completed and signed, **You Chicago** Board of Ethics later than the close of business Friday, May 31, 2019 to:

Board of Ethics 740 N. Sedgwick, Ste. 500 Chicago, IL - Please complete this form, sign it MA the origin (2010) it to the Board of Ethics. We cannot accept Statements via e-mail, fax or MAY - 3 2019 formats. Please answer all 16 questions and sign and date 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 Received ation or capital gain by writing in the appropriate category letters s than \$5,000 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 business(es), organizations or property in questions 2 or 9; for question 9, however, they must list the number and types of properties owned, for example: two 6-flats, etc. Last Name: Johnson First Name: Jonathan Middle Initial: L Mailing Address: Zip State: City Department/Board Police-057 Title: or Commission: 1. In 2018, were you employed by any governmental unit other than the City of Chicago? X No Yes If YES, list the name of each governmental unit 2. In 2018, 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 X Yes ☐ No derived income of more than \$1,000.00? If YES, for each organization provide the following information: (see note above) TVK Orchestra P.O. 2105 Palatine, IL You + Amount of Income, Name & Type of Lead Vocalist Music Group Position By Category Address: Organization: 3. In 2018, 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? . × No If YES, provide the following for each person or entity to which you provided services: Nature of Government Unit With Which + Amount of Income, Name Person or Entity Did Business Service By Category 4. In 2018, 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 X No If YES, provide the following for each person or entity to which Spouse/ Domestic Partner provided services: Nature of Government Unit With Which + Amount of Income. Name Person or Entity Did Business By Category Services 5. In 2018, did any entity in which you OR your spouse or domestic partner* have a financial interest* receive compensation in excess of \$5,000.00

Chicago Board of Education, Chicago Park District, Chicago City Colleges, or Metropolitan Pier and Exposition Authority? Yes X No If YES, provide the following information about the entity in which you/spouse/domestic partner have a financial interest: Name of Person or Entity to whice Name Services were provided Nature of Government Unit With + Amount of Income. Which Person Did Business By Category Services

for professional*, business or other services rendered to any person* or entity doing business* with the City of Chicago, the Chicago Transit Authority,

6. In 2018, 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% (.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

If Y	ere	7					5	⊠ No
	ES, provide the foll	owing for each person:		-,=/==-, -				
Name	<u> </u>			Type / In Ownersh	strument of			
	7.							
		a capital gain of \$5,000.00 or mo					e of Yes	⊠ No
		(s) sold (including the address or ed asset (see note at top of form		ie real estate) a	nd the appropria	ate Category	of the amou	nt of gain
						+ Amour Category	nt of gain , By	
forms of esidence	f direct or indirect or ce is in a multiple-ures, identify the rea	a financial interest* in real estate ownership, such as partnerships init or mixed-use building in whi I estate by address (see note at t	or trusts whose corpu ch you have a financia	s consists prima Il interest*, ansv	arily of real estate wer "yes" to this	e. (If your pr question.)	incipal place Yes	of No
leg	al description:	HILIDANIA AMARAN MARININA MAR	***************************************			· · · · · · · · · · · · · · · · · · ·		
aggrega	ate value in excess	e from any person* (other than rof \$250.00?son or persons from whom you				aving an	Yes	⊠ No
	cs, identify the per	son or persons from whom you	eceived such glits:					
L								
Governr	mental Ethics Ordir	e any improper gift* that you dis nance? proper gift(s), the donor(s) if kno					Yes	⊠ No
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or franch	hise, or any permit , list the name of th	e a financial interest* in any perso for annexation, zoning or rezoni ne person(s) in which you have the e action requested):	ng of real estate?				Yes	
or franch	hise, or any permit , list the name of the cation sought or th	for annexation, zoning or rezoning person(s) in which you have the	ng of real estate?				Yes	
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