

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

If YES, provide the following for each person.

CITY OF CHICAGO 2022 STATEMENT OF FINANCIAL INTERESTS

To avoid a violation of the Covemmental 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 2, 2022 to: Board of Ethics, 740 N. Sedgwick, Suite 500, Chicago, IL 60654-8488

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- Please complete this form, sign it and then mail / deliver it to the Board of Ethics. We cannot accept Statements via e-mail or fax. 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."

Last Name: ERNIST First Name: SUSANNA Middle Initial: Machine City: CHICAGO State: Last Zip Code: COUL

City: CHICAGO State: Last Zip Code: Could Sta

Address: City Department/Agency: CANDEDATE FOR A 1. In 2021, were you employed by any governmental unit other than the City of Chicago? If YES, list the name of each governmental unit: 2. In 2021, 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 Yes If YES, for each organization provide the following information: (see note about Name & Type of Your +Amount of Income Address Organization Position By Category 3. In 2021, 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 Name +Amount of Income Service Which Person Did Business By Category 4. In 2021, 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 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 5 In 2021, did any entity in which you OR your spouse or domestic partner* have a financial interest* receive compensation in excess of \$5,000.00 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 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 Nature of Governmental Unit with +Amount of Income Service Which Person Did Business By Category 6. In 2021, 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.)

> Title or Description of Position Your held in This Person

| 7. | In 2021, did you have a financial interest* in any person* conducting business that represent less than ½ of 1% (.5%) of the company's outstanding stock, or or annuities purchased from insurance companies, need not be disclosed) | r demand deposits in financial institutions, or endowments, policie | |
|------|---|--|--|
| | | De/Instrument Ownership | |
| 8. | 8. In 2021, did you realize a capital gain of \$5,000.00 or more from the sale of | of any capital asset other than your principal place of residence | |
| | If YES, identify the asset(s) sold (including the address or legal description of the real estidentified asset (see note at top of form). | | |
| 9. | Do you <u>currently</u> have a financial interest* in real estate located in the City of C forms of direct or indirect ownership, such as partnerships or trusts whose coresidence is in a multiple-unit or mixed-use building in which you have a finance. | corpus consists primarily of real estate. (If your principal place of acial interest*, answer "yes" to this question.) | |
| | If YES, identify the real estate by address (see note at top of form for filers from a legal description: | certain departments), including zip code, or, if there is no address, | |
| 10 | 10. In 2021, did you receive from any person* (other than relatives* or a domestic of \$250.00? | ic partner*) one or more gifts having an aggregate value in exces | |
| | If YES, identify the person or persons from whom you received such gifts: | • | |
| 11. | 11. In 2021, did you receive any improper gifts* that you disposed of in accordance | | |
| | If YES, identify the improper gift(s), the donor(s) if known, and method of disposal | al as specified in the ordinance | |
| 12. | Do you <u>currently</u> have a financial interest* in any person* who in 2021 applied for annexation, zoning or rezoning of real estate? | Yes No | |
| | If YES, list the name of the person(s) in which you have financial interest and desc sought or the action requested): Name Action Re | scribe the City action requested (including the nature of the application) 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 2021? (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.) I neither owe nor am owed more than \$5,000.00 | | |
| | If YES, provide the following information: | • | |
| | | con a Debtor. Type of Debt Guarantor Instrument | |
| 14. | 14. Do you now serve on any board or commission (even if not a City board or commission). | ommission, or not for 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 Co 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) Relationsh | ship | |
| 16. | Do you now have any relative* or domestic partner* who is an employee or full- or part-owner of a City contractor? | | |
| | If YES, name the relative(s) or domestic partner(s), his/her/their relationship to you, the contractor(s) Name(s) of Relationships Contractor(s) | city contractor(s), and his/her /their position with the contractor(s): Position | |
| beli | /ERIFICATION: I declare that I have examined this Statement of Financial Interests, includin belief it is true and complete. I understand that knowingly filing a Statement containing fa emoval from office or in employment sanctions, including discharge, in accordance with appl | false or misleading information or failing to file by deadline, can result in | |
| _ | Signature and Date | е | |