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740 N. Sedawick, Stc. 500 Chicago, IL 60654-8488 (312) 744-9660

CITY OF CHICAGO 2022 STATEMENT OF FINANCIAL INTERESTS

To avoid a violation of the Governmental Effice Croinstoce and senctions, 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.

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 Please complete this form, signifiend then melt/ deliver it to the Board of Ethlos. We cannot accept Statements via e-melt 16 questions and sign your form before returning it. 									mail or fax. Ple	ase answer		
	- If you need more room, please situch and label extra sheets Torms with an asterisk (*) are defined on the instruction sheet.											
	theaupal + ≪A	* In questions 2-5 & 8, indicate the appropriate income, comparisation or capital gain by writing in the appropriate category letter: A=\$25,000 or more 8=\$5,000 - \$24,099 C* less than \$5,000										
	Office of E	NOTE: for sacurity reasons, filers in the Chicago Fire and Police Departments, OPSA, Inspector General's Office, Civillan Office 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 proporties owned, e.g.: "I single-tently house, 2 6-flats."										
	Last Name:	Armenda		Fit	st Nar	ne: Kr	stia	U	Middle Initial:	R		
	Address:					<u>ch</u>	icago	State: TL	Zip Code:	60		
	City Departm	ent/Agency:		***		···········	Title:			· · · · · · · · · · · · · · · · · · ·		
1.	In 2021, were	you employed by any govern	mental unit o	therthan the Cit	ly of Ch		17270 National Ballonia (4)		Yes 2	√ No		
	If YES, list the	ristne of each governmental i	inif:				**************************************	***************************************				
2.	or organiz a ti	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 X No										
If YES, for each <u>organization pr</u> ovide the following information: (see note <u>above)</u>								*****	1			
	Name & Address	**************************************	Type Orga	of nization		······································	Your Position	······································	+Amount of By Category			
3.	- pusiness wi	n 2021, did you receive compensation in excess of \$5,000.00 for professional*, business or other services rendered to a person* or entity doing austress* with the City of Chicago, the Chicago Transit Authority, Chicago Board of Education, Chicago Park District, Chicago City Colleges, or Metropolitan Picr and Exposition Authority?										
	If YES, provide	the following for each person to	which you pr	vided services:			,			- Landellian Maria		
	Name		Nature of Service	<u></u>		Governmental t Which Person b			+Amount of By Category			
4.	person or en	our spouse or domestic par tity doing business" with the or Metropolitan Pier and Expo	City of Chicae	o. (he Chicego T	ransit.	Authority, C.h.l.o	sado Boardi	of Education C	hinana Barir Nic	triot, Chicago		
	If YES, provid	e the following for each perso	n to which Sp	ouse/ Domostic	Partne	r provided sen	vices:	***************************************		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Name		Nature of Service			Governments Which Perso	ál Unit With In Did Busines	5	+Amount of By Calegory			
5	Transit Author	any entity in which you Of professional*, business or crity, Chicago Goard of Edu	other services cation, Chica	s rendered to a go Park Distric	ny per st, Chir	son" or entity o cago City Coll	doing busine: leges, or Mai	se* with the Ci impolitan Pier	ty of Chicago, and Exposition	the Chicago n Authority?		
	If YES, provid	f YES, provide the following information about the entity in which you/spouse/domostic partner have a financial interest:										
	Name of Person to which Services were provided									Mark State Mark State Company of Market State Company of Market State Company of Market State Company of Market		
	Nature of Service		TR & Kinn Mirror and an	Governmer Which Pers					+Amount of f By Category			

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 domand 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

Title or Description of Position Your held in This Person

7.	 In 2021, did you have a financial interest* in any person* conducting business* in Chicago? (Note: stock interests in publicly held that represent less than ¼ of 1% (.5%) of the company's outstanding stock, or demand deposits in financial institutions, or endown or annuities purchased from insurance companies, need not be disclosed) 	<u>non</u> te, policies								
	If YES, provide the following for each person:									
	Name Type/Instrumont of Ownership									
5.	In 2021, 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?								
	If YES, identify the asset(s) sold (including the address or legal description of the real estate) and the appropriate Cutegory of the emount of gain identified asset (see note at top of form).	realized for each								
	#Amount of By Categor	У []								
9.	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 forms of direct or indirect ownership, such as partnerships or trusts whose corpus consists primarily of real estate. (If your principal direct is in a multiple-unit or inixed-use building in which you have a financial interest*, answer "yes" to this question.) Yes	cipal place of								
	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 legal description:	no address, hy								
10	0. In 2021, did you receive from any person* (other than relatives* or a domestic partner*) one or more gifts having an aggregate value of \$250,00?	lue in excess Sl No								
	If YES, identify the person or persons from whom you received such gifts:									
11.	1. In 2021, did you receive any improper gifts* that you disposed of in accordance with Section 2-156-144 of the Governmental Ethics	Ordinance?								
	If YCS, identify the improper yill(s), the donor's) if known, and method of disposel as specified in the ordinance									
19	2 Pid your operation have a financial instance to									
16.1	Do you <u>currently</u> have a financial interest* in any person* who in 2021 applied to the City of Chicago for a license or franchise, or any permit for annexation, zonling or rezoning of real estate? No									
	if YES, list the name of the person(s) in which you have financial interest and describe the City action requested (including the nature of a sought or the action requested):	the application								
	Name Aution Requested									
13.	f 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 or the City of Chicago in 2021? (Do not include: (1) debt instruments issued by financial institutions whose normal business includes the naking of loans of the kind received by you in accordance with other terms and conditions standard for such loans at the time the dobt 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 Yes	SLNo								
	If YES, provide the following information: Name of Debtor, Is the Person a Debtor, Type of Debt	***************************************								
14.	Creditor or Guarantor Creditor or Guarantor Instrument Instrument Creditor or Guarantor Instrument Instrument									
	YES, provide the Namo(s) of board(s) and your position(s) on the board(s):									
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 County Clerk, or any other unit of local government in the State of Illinois?	e, the Cook j No								
	If YES, name the lobby(st(s) and the lobby(st'a relations()) to you:	`								
	Name(s) Relationship									
	Do you now have any relative* or domestic partner* who is an employee or full- or part-owner of a City contractor?	•								
li	If YES, name the retative(s) or domestic partner(s), his/her/their relationship to you, the city contractor(s), and his/her Abeir position with the contract Name(s) of Relationships Contractor(s) Position	(nr(s);								
/#p:	2 STEPPOS TOUR PARTY.									
30116.	RECATION: I declare that I have examined this Statement of Financial Interests, including any accompanying documents, and to the best of my known of it is true and complete. I understand that knowingly filling a Statement containing false or misleading information or failing to file by deadline, loval from office or in employment sanctions, including discharge, in accordance with applicable rules, regulations and ordinances of the City of Chical	con recult in								
	10-6-17									