

(312) 744-9660

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 2, 2022 to: Board of Ethics, 740 N. Sedgwick, Suite 500, Chicago, IL 60654-8488

CITY OF CHICAGO 2022 STATEMENT OF FINANCIAL INTERESTS

- 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.

ND

+ in questions 2-5 & 8, indicate the appropriate income, compensation or capital gain by writing in the appropriate category letter: B= \$5,000 - \$24,999 C= less than \$5,000 A=\$25,000 or more

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

nouse, 2	to-nais."									
Last Name	BE DASGUPTA			First Name	: <u>D</u>	ENALI		Midd	le Initial:	۷
Address:				c	ity: CHI	CAGO	_ State: _	IL zip	Code: 60	2
City Depar	rtment/Agency:					Title:	CAMBIDA	ATE - 3	9 TH WARD	ALDER
In 2021, we	ere you employed by any government	nental unit other	than the	e City of Chic	ago?				Yes X N	0
If YES, list t	the name of each governmental u	nit:								
or organiz	tid you serve as an employee, o ration (other than your City emp)?	loyment or appo	ointment) from whic	h vou rece	ived or deriv	red income of	of more tha	n	
If YES, for e Name & Address		Type of		Mon PR	OFIT	Your Position	DIRECTO DATA 2LGA		Amount of Incom Category	A
business*	lid you receive compensation in with the City of Chicago, the Ci tan Pier and Exposition Authorit	hicago Transit A	uthority,	, Chicago B	oard of Ed	lucation, Chic	cago Park D			ges, or
If YES, prov	ide the following for each person to	which you provid	led servi		Couernmen	tal Unit with			Amount of Incom	
Name		Service				n Did Busines	is		Category	"
person* or	d your spouse or domestic part rentity doing business* with the t es, or Metropolitan Pier and Expo	City of Chicago, t	he Chica	go Transit A	uthority. C	hicago Boa	ard of Educat	tion. Chicag		Chicago
	ovide the following for each perso	n to which Spous	se/ Dom	estic Partner	ľ	se <i>rvices:</i> ental Unit with			Amount of Incom	.a [
Name		Service				erson Did Busi			y Category	<u>"</u> Ш
\$5,000.00 Transit Au	did any entity in which you OF of or professional*, business or outhority, Chicago Board of Edu	other services re cation, Chicago	endered Park D	to any pers	on* or ent ago City (ity doing bus Colleges, or l	iness* with t Metropolitan	the City of Pier and	Chicago, the C Exposition Au	chicago thority?
	ovide the following information ab	out the entity in v	vhich you	Name	of Person	to which	nancial intere	st:		 -
Name				Service	es were p	rovided [_				
Nature Service			Governmental Uni Which Person Did					+Amount of Income By Category		18
less than	lid you have a financial interest* in 1 % of 1% (.5%) of the compar d from insurance companies, nee	ny's outstanding	stock,	or demand	deposits i	n financial ins	titutions, or			nnuities
If YES, pro	ovide the following for each perso	n:		1		1				
Name				Title or D Your held i		of Position				

7.	that rep	resent less than	a financial interest* in a n ¼ of 1% (.5%) of the o I from insurance compa	company's outstand	ing stock, or demand	deposits in financia	l institutions, o	blicly held corpora or endowments, po Yes No	ations xicles
	If YES, pr	ovide the followin	ng for each person:						
	Name				Type/Instrume of Ownership	ent			
8.			a capital gain of \$5,0						e?
	IFVES IN	entify the asset(s) sold (including the addre	ess or land description	of the real estate) and t	the ennmuriate Color	none of the amo	unt of gain malized t	for each
	identified	asset (see note a	t top of form).		or the real estate, and t	ma appropriate cate		un or yan realized i	C C
								+Amount of Income By Category	
	forms of residence	direct or indire	financial interest* in rect ownership, such as e-unit or mixed-use bui	partnerships or trus ilding in which you h	sts whose corpus cor	nsists primarily of r st*. answer "ves" to	eal estate. (If	your principal pla	
			estate by address (see	note at top of form fo	r filers from certain de	partments), includin	g zip code, or,	if there is no addr	ess, by
	legal de	scription:					1 * · · · · · · · · · · · · · · · · · ·		
10.			e from any person* (ot					gregate value in e	xcess
	If YES, i	identify the perso	on or persons from who	m you received such	gifts:				
11.			e any improper gifts* th						ince?
	***************************************	***************************************		***************************************			L	J Yes ≯⊠ No	
	If YES, I	Identify the impro	oper gift(s), the donor(s)	if known, and metho	d of disposal as specif	led in the ordinance			
12.	Do you for anne	currently have exation, zoning	a financial interest* in or rezoning of real esta	any person* who in	2021 applied to the	City of Chicago for	a license or f	ranchise, or any p	ermit
			the person(s) in which ye		rest and describe the	City action requeste	d (including th	e nature of the app	lication
			uested):	1	7				
	Name			-	Action Requested				
13.	for the making contract	City of Chicago of loans of the ted, if the loans	anyone owes you mon o in 2021? (Do not inc kind received by you is are made at the preva riket at the price availal	clude: (1) debt instra in accordance with alling rate of interest	uments issued by fina other terms and cond ; or (2) debt instrume	andal institutions v litions standard for nts issued by publi	whose normal such loans at	business include the time the deb	s the t was
				N	neither owe nor am o		000.00	Yes Mo	
		provide the follow of Debtor,	wing information:		Is the Person a Debto	or [Time of Dabi	, [
		or or Guarantor			Creditor or Guarantor		Type of Debi Instrument		
14.	Do you	now serve on a	iny board or commission	on (even if not a City	board or commission	n, or not for compe	ensation)?	Yes 🗆 No	
	If YES, p	provide the Nam	e(s) of board(s) and you	ur position(s) on the b		+	<u> </u>		——
		HICAGO	LARMC:	schools f	HICENT LEA	DERSHIP	COUN	CIL	
15.			a covered relative* who					etary of State, the	Cook
	If YES. I	name the lobbyis	st(s) and the lobbyist's re	elationship to you:					
	Name(Relationship				
16.		· L	ative* or domestic partn	er* who is ал employ	ee orfull-orpart-owne	er of a City contracto	n	Yes No	
	If YES, na	nme the relative(s) or domestic partner(s), I	his/her/their relationsh	ip to you, the city contra	ctor(s), and his/her /t	heir position wit	h the contractor(s):	
	Name(/		ctor(s)		sition		
beli	ef it is true	and complete.	I have examined this Stat I understand that knowl syment samptions, including	ngly filing a Statemen	t containing false or mis	leading information	or failing to file	by deadline, can re-	
			1)))		<u> </u>	2/27			