



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.

Please complete this form, sign it and then mail / deliver it to the Board of Ethics. Please answer all 17 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.

+ 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, CCPSA, Inspector General's Office, Civilian Office of 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; 2 6-flats."

The ast Name:	Salient	Group	P. I	ANDRE	A	Middle Initial:	_
Address:		, Cit	y:	State:		Zip:	
City Departr	ment / Agency: City	Counc	il	Tit	Cons	sultant	/Cont
f YES list th	vere you employed by any governments of immental unit	ental unit other than t	he City of Ci	nicago?	THE STATE OF THE S	Yes	No
l. In 2022, o	did you serve as an employee, office to (other than your City employment)	r, director, associate, p or appointment) from	artner, prop which you	rietor or in any advisory eceived or derived incor	capacity for ar me of more tha	n \$1,000 ?	
f YES, for ea	ch organization provide the followin	g information (see no	te above:			∐ Yes	No
Name & Address:		Type of Organization:		Your Position:		Amount of income by category	ė
ousiness* w Metropolita	did you receive compensation in exc ith the City of Chicago, Chicago Tran n Pier and Exposition Authority?	sit Authority, Chicago	Board of Ec	ucation, Chicago Park D	istrict, Chicago	City Colleges, or	_
I YES, provi	de the following for each person to v	wnich you provided se	rvices				
Name:		Nature of Service:		Governmental Unit with which person did busin		Amount of by category	
Name:	de the following for each person to	Nature of Service:	tic Partner p	Governmental Unit with which person did busin		Amount of by category	
professiona of Education	did any entity in which you OR your It, business or other services render n, Chicago Park District, Chicago City ide the following information about	ed to any person* or e Colleges, or Metropo	ntity doing litan Pier an	ousiness" with the City of d Exposition Authority?.	of Chicago, Chi	cago Transit Autho	f \$5000 for ority, Board No
ii res, piovi	ide the following information about	the entity at which yo	azyour spor	seryour donnessee portin	er riove o mian	Commercia	
Name:				person to which were provided			
Nature of Service:		Governmental Un which person did				Amount of incor	ne
represent le	did you have a financial interest ^a in ess than 1/2 of 1% (.5%) of the comp urchased from insurance companies	any's outstanding sto	ck, or demai	the City? (Note: Stock in ad deposits in financial in	nstitutions, or e	endowments, <u>po</u> lic	ies or
If YES, prov	ride the following for each person:		2				
Name:		1		Title or Description of I You Held in This Person	n		
that repres	did you have a financial interest* in ent less than 1/2 of 1% (.5%) of the courchased from insurance companies	ompany's outstanding	g stock, or d	emand deposits in finan	cial institution:	s, or endowments,	policies or
,	vide the following for each person:					_	
Name:				Type / Instrument o	1		

lace of residence? YES, identify the asset(s) sold (including the increase identified asset (see note at top of for	address or legal description of the real estat			
	2			egory
Do you <u>currently</u> have a financial interest ^e i direct or indirect ownership, such as partne ultiple-unit or mixed-use building in which y YES, identify the real estate by address, (see gal description:	rships or trusts whose corpus consists prim you have a financial interest*, answer "yes" t	erily of real estate. (I to this question.)	f your principal place	of residence is in a Yes No
In 2022, did you receive from any person* 250?	excluding relatives* or a domestic partner	1) one or more gifts	having an aggregate	value in excess of
YES, identify the person or persons from wh		- 4		
In 2022, did you receive any improper gift dinance? YES, identify the improper gift(s), the donor.				
res, isentify the improper grids, the donor	as in known, and method of disposal as spec	anca in the orania	9 +	
2. Do you <u>currently</u> have a financial interest nnexation, zoning or rezoning of real estate:	* in any person* who in 2022 applied to the	City of Chicago for	a license or franchise,	or any permit for
YES, list the name of the person(s) in which yought or the action requested:				
lame:	Action Reque	sted		
YES, provide the following information: iame of Debtor, Creditor or Guarantor:	is the person a Creditor or Gua	Debtor,	Type of Del	
4. Do you now serve on <i>any</i> board or comm (YES, provide the Name(s) of board(s) and you		on, or not for comp	ensation)?	Yes 🗋 No
The Mayor Ho	arold Washington	Legace	Commi	itte
15. Do you <u>currently</u> have a covered relative			,	of State?
f YES, name the lobbyist(s) and the lobbyist	s relationship to you:	you let ne		
Name(s):	Relat	ionship		
16. Do you now have any relative ⁴ or domes fYES, name the relative(s) or domestic partr				Yes No n with the contracto
Name(s) and Relationship(s)	Contractor(s)		Position(s)	
17. Are you <u>currently</u> a City Council employe		i	D. seen for whom u	Yes [
if YES, provide the name(s) of each City	d. Emma Mitts	ee or City Council	bureau for whom y	od work.
O/ HOLD FILE	of pitting 111113			216
VERIFICATION: I declare that I have ex best of my knowledge and belief it is to information or filling to file by deadline with application rules, regulations and o	ue and complete. I understand that kno , can result in removal from office or in	wingly filing a Sta employment sand	tement containing	false or misleadin charge, in accorda

Pant Form