

# Supplemental Statement of Economic Interest

For officers and employees subject to the jurisdiction of the Illinois Governor per Executive Order 15-09

New \_\_\_\_

Revision \_\_\_\_

Executive Order 15-09, "Executive Order to Ensure Ethical and Responsive Government," requires certain officers and employees to disclose and file the following information with the Executive Ethics Commission on or before May 1 of each year. Your agency has identified you as an employee or officer who is required to complete the Supplemental Statement of Economic Interest.

An electronic filing system is available for most persons filing the Supplemental Statement of Economic Interest. Use of this paper process is necessary where electronic filing is not possible, or where an electronic filing needs correction or to be supplemented. **Please contact your ethics officer if you are uncertain as to whether you should be filing electronically in lieu of paper.**

**Instructions:** Please consult guidance at <https://eec.illinois.gov/executive-order.html>. Thereafter, complete the following disclosures concerning calendar year 2025. Attach additional sheets if necessary. Return the completed, signed form by **May 1, 2026** to the Executive Ethics Commission, 401 S. Spring Street, Wm. Stratton Bldg. Room 516, Springfield, Illinois 62706.

1. During the preceding calendar year, did you, your spouse, or minor child have a financial interest of greater than 5% in any real property for which the State of Illinois is a tenant, lessor or has some other ownership or beneficial interest? If yes, disclose the address and describe the nature of your interest in the real property (Do **not** include a primary personal residence.)

Yes

No

If yes, give the address and describe the nature of your ownership interest: \_\_\_\_\_

\_\_\_\_\_

2. During the preceding calendar year, did you hold any non-governmental position(s) with any business entity, non-profit organization, labor group, educational institution, or other entity of any type?

Yes

No

If yes, disclose the name of entity, the non-governmental position, the nature of compensation, and estimate whether you received no income or value, income or value of less than \$5,000, or income or value equal to or greater than \$5,000: \_\_\_\_\_

\_\_\_\_\_

3. During the preceding calendar year, were you a party to, or have a financial interest in, any litigation involving the State of Illinois or any entity with a relationship with the State of Illinois?

"Entity with a relationship with the State of Illinois" means an entity that has a contract or grant or a direct pecuniary interest in a contract or grant with or from the State of Illinois. Do **not** include litigation where you were named as a plaintiff or defendant in your capacity as an employee or officer of the State of Illinois.

Yes

No

If yes, identify the case name(s) and the court in which such case is or was pending: \_\_\_\_\_

\_\_\_\_\_

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4. Are you an officer, employee, or other individual who receives merit compensation and is exempt from the Personnel Code and from collective bargaining agreements, or are you appointed by the Governor?

Yes

No

If you checked "No," please proceed to the certification and submission of this form.

If you checked "Yes," do you have any relatives who are officers or employees of the Executive, Legislative or Judicial branches of the State of Illinois? "Relatives" include:

Father, mother, son, daughter, grandfather, grandmother, grandson, granddaughter, brother, sister, uncle, aunt, first cousin, nephew, niece, husband, wife, father-in-law, mother-in-law, son-in-law, daughter-in-law, grandson-in-law, granddaughter-in-law, brother-in-law, sister-in-law, stepfather, stepmother, stepson, stepdaughter, stepbrother, stepsister, step-grandson, step-granddaughter, half-brother, or half-sister.

Yes

No

If you checked "No," please proceed to the certification and submission of this form.

If you checked "Yes," please identify the name and position of each Relative:\_\_\_\_\_

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I certify to the best of my knowledge and belief the information that I provided on this Supplemental Statement of Economic Interest is a true, correct and complete statement of my economic interests as required by Executive Order 15-09.

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Office & position of employment for which this Statement is filed)

**NOTE: Return the completed, signed form via mail to the Executive Ethics Commission, 401 S. Spring Street, Wm. Stratton Bldg. Room 516, Springfield, Illinois 62706.**