COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

The Cook County Code of Ordinances (§2-610 *et seq.*) requires that any Applicant for any County Action must disclose information concerning ownership interests in the Applicant. This Disclosure of Ownership Interest Statement must be completed with all information current as of the date this Statement is signed. Furthermore, this Statement must be kept current, by filing an amended Statement, until such time as the County Board or County Agency shall take action on the application. The information contained in this Statement will be maintained in a database and made available for public viewing. **County reserves the right to request additional information to verify veracity of information contained in this statement.**

If you are asked to list names, but there are no applicable names to list, you must state NONE. An incomplete Statement will be returned and any action regarding this contract will be delayed. A failure to fully comply with the ordinance may result in the action taken by the County Board or County Agency being voided.

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"County Action" means any action by a County Agency, a County Department, or the County Board regarding an ordinance or ordinance amendment, a County Board approval, or other County agency approval, with respect to contracts, leases, or sale or purchase of real estate.

"Person" "Entity" or *"Legal Entity"* means a sole proprietorship, corporation, partnership, association, business trust, estate, two or more persons having a joint or common interest, trustee of a land trust, other commercial or legal entity or any beneficiary or beneficiaries thereof.

This Disclosure of Ownership Interest Statement must be submitted by :

1. An Applicant for County Action and

2. A Person that holds stock or a beneficial interest in the Applicant and is listed on the Applicant's Statement (a "Holder") must file a Statement and complete #1 only under **Ownership Interest Declaration**.

Please print or type responses clearly and legibly. Add additional pages if needed, being careful to identify each portion of the form to which each additional page refers.

This Statement is being made by the [✓] Applicant or [ ] Stock/Beneficial Interest Holder

This Statement is an: [✓] Original Statement or [ ] Amended Statement

Identifying Information:

Name Benford Protection Group

D/B/A: _____ FEIN # Only: 47-5208946

Street Address: 7545 South Western

City: Chicago State: IL Zip Code: 60620

Phone No.: 773-902-7500 Fax Number: _____ Email: abenford@benfordprotectiongroup.com

Cook County Business Registration Number: _____
(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): _____

Form of Legal Entity:

[ ] Sole Proprietor [ ] Partnership [ ] Corporation [ ] Trustee of Land Trust

[ ] Business Trust [ ] Estate [ ] Association [ ] Joint Venture

[✓] Other (describe) LLC

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
Andre Benford	[redacted]	100%

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address
Not applicable		

3. Is the Applicant constructively controlled by another person or Legal Entity? [ ] Yes [ ] No

If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship
Not applicable			

Corporate Officers, Members and Partners Information:

For all corporations, list the names, addresses, and terms for all corporate officers. For all limited liability companies, list the names, addresses for all members. For all partnerships and joint ventures, list the names, addresses, for each partner or joint venture.

Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
Not applicable			

Declaration (check the applicable box):

☑ I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.

☐ I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Andre Benford
Name of Authorized Applicant/Holder Representative (please print or type)

CEO
Title

Andre Benford
Signature

7/21/2025
Date

abenford@benfordprotectiongroup.com
E-mail address

773-902-7500
Phone Number

Subscribed to and sworn before me
this 21 day of JULY, 2025

My commission expires: 11·04·2025

ANITA S CLAYTON
Official Seal
Notary Public - State of Illinois
My Commission Expires Nov 4, 2025

X
Notary Public Signature

Notary Seal

Docusign Envelope ID: A5E67FE8-F3E7-457D-A000-0B2FCE6E0E1A

CONTRACT #: 2406-04291

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

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This Disclosure of Ownership Interest Statement must be submitted by :

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2. A Person that holds stock or a beneficial interest in the Applicant and is listed on the Applicant's Statement (a "Holder") must file a Statement and complete #1 only under **Ownership Interest Declaration.**

Please print or type responses clearly and legibly. Add additional pages if needed, being careful to identify each portion of the form to which each additional page refers.

This Statement is being made by the [✓] Applicant or [ ] Stock/Beneficial Interest Holder

This Statement is an: [✓] Original Statement or [ ] Amended Statement

Identifying Information:

Name The RAND Corporation

D/B/A: _____ FEIN # Only: 95-1958142

Street Address: 1776 Main Street

City: Santa Monica State: CA Zip Code: 90401

Phone No.: 310-393-0411 Fax Number: 310-260-8011 Email: regrpt@rand.org

Cook County Business Registration Number: _____
(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): N 6964-319-1

Form of Legal Entity:

[ ] Sole Proprietor [ ] Partnership [ ] Corporation [ ] Trustee of Land Trust

[ ] Business Trust [ ] Estate [ ] Association [ ] Joint Venture

[✓] Other (describe) Non Profit Organization 501(c)3

Docusign Envelope ID: A5E67FE8-F3E7-457D-A000-0B2FCE6E0E1A

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
None		

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address
None		

3. Is the Applicant constructively controlled by another person or Legal Entity? [☐] Yes [☑] No

If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship
N/A			

Corporate Officers, Members and Partners Information:

For all corporations, list the names, addresses, and terms for all corporate officers. For all limited liability companies, list the names, addresses for all members. For all partnerships and joint ventures, list the names, addresses, for each partner or joint venture.

Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
See Attachment 1			

Declaration (check the applicable box):

☑ I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.

☐ I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

Docusign Envelope ID: A5E67FE8-F3E7-457D-A000-0B2FCE6E0E1A

CONTRACT #: 2406-04291

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Emily Palumbo
Name of Authorized Applicant/Holder Representative (please print or type)
Emily Louise Palumbo
Signature

Director, Contract and Grant Services
Title

05/16/2025
Date

contractsteam@rand.org
E-mail address

310-393-0411
Phone Number

Subscribed to and sworn before me
this 16th day of May, 2025

My commission expires: 05/31/2025

X Morgan Kirk Holland
Notary Public Signature

Notary Seal



Notarized remotely online using communication technology via Proof.

Docusign Envelope ID: A5E67FE8-F3E7-457D-A000-0B2FCE6E0E1A

Attachment I
Corporate Officers as of September 2024:

Name	Title	Term
Matheny, Jason	President and CEO	7/5/2022 - Present
Januzik, Michael	VP and CFO	1/4/2017 - Present
Hoehn, Andrew R	SVP, Research and Analysis	4/13/2012 - Present
Staudt, Nancy	Dean, Pardee RAND Graduate School	10/13/2021 - Present
Case, Robert M	VP, General Counsel and Corporate Secretary	10/1/2018 - Present
Peltz, Eric	SVP, Finance and Operations	11/11/2020 - Present

Contact information for the individuals listed above:

Address: 1776 Main Street, P.O. Box 2138, Santa Monica, CA 90407-2138
Phone: (310) 393-0411

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This Disclosure of Ownership Interest Statement must be submitted by :

1. An Applicant for County Action and

2. A Person that holds stock or a beneficial interest in the Applicant and is listed on the Applicant's Statement (a "Holder") must file a Statement and complete #1 only under **Ownership Interest Declaration**.

Please print or type responses clearly and legibly. Add additional pages if needed, being careful to identify each portion of the form to which each additional page refers.

This Statement is being made by the [✔] Applicant or [ ] Stock/Beneficial Interest Holder

This Statement is an: [✔] Original Statement or [ ] Amended Statement

Identifying Information:

Name M. Harris & Co.

D/B/A: N/A FEIN # Only: 82-3123607

Street Address: 2109 W. Grace St.

City: Chicago State: IL Zip Code: 60618

Phone No.: 312-401-7326 Fax Number: N/A Email: melissa@mharris.com

Cook County Business Registration Number: _____
(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): _____

Form of Legal Entity:

[ ] Sole Proprietor [ ] Partnership [✔] Corporation [ ] Trustee of Land Trust

[ ] Business Trust [ ] Estate [ ] Association [ ] Joint Venture

[ ] Other (describe) _____

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
Melissa Harris	2109 W Grace St., Chicago, IL 60618	100%

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address

3. Is the Applicant constructively controlled by another person or Legal Entity? [☐] Yes [☑] No

If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship

Corporate Officers, Members and Partners Information:

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Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
Jara Kern	[redacted]	President	2024-Present

Declaration (check the applicable box):

☑ I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.

☐ I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Melissa Harris
Name of Authorized Applicant/Holder Representative (please print or type)

CEO
Title

Melissa Harris
Signature

3/15/2025
Date

melissa@mharris.com
E-mail address

312-401-7326
Phone Number

Subscribed to and sworn before me
this 15th day of March, 2025

My commission expires: 2-21-2028

X Cheryl Gwen Harris
Notary Public Signature

Notary Seal

OFFICIAL SEAL
CHERYL GWEN HARRIS
Notary Public, State of Illinois
Commission No. 987320
My Commission Expires February 21, 2028

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This Statement is being made by the [✓] Applicant or [ ] Stock/Beneficial Interest Holder

This Statement is an: [✓] Original Statement or [ ] Amended Statement

Identifying Information:

Name Rise Strategy Group LLC

D/B/A: _____ FEIN # Only: 83-0844615

Street Address: 400 N. May Street, Suite 306

City: Chicago State: IL Zip Code: 60642

Phone No.: 312-399-4081 Fax Number: NA Email: tarrah@risestrategygroup.com

Cook County Business Registration Number: _____
(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): _____

Form of Legal Entity:

[ ] Sole Proprietor [ ] Partnership [✓] Corporation [ ] Trustee of Land Trust

[ ] Business Trust [ ] Estate [ ] Association [ ] Joint Venture

[ ] Other (describe) _____

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
Tarrah Cooper	[redacted]	100%

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address
NA		

3. Is the Applicant constructively controlled by another person or Legal Entity? [☐] Yes [☑] No

If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship
NA			

Corporate Officers, Members and Partners Information:

For all corporations, list the names, addresses, and terms for all corporate officers. For all limited liability companies, list the names, addresses for all members. For all partnerships and joint ventures, list the names, addresses, for each partner or joint venture.

Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
Tarrah Cooper	[redacted]		NA

Declaration (check the applicable box):

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COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Tarrah Cooper
Name of Authorized Applicant/Holder Representative (please print or type)

Tarrah Cooper
Signature

tarrah@risestrategygroup.com
E-mail address

CEO
Title

3/25/25
Date

312-399-4081
Phone Number

Subscribed to and sworn before me
this 25 day of March 2025

x Elizabeth Pacheco
Notary Public Signature

My commission expires: 12-15-2025

Notary Seal

OFFICIAL SEAL
ELIZABETH PACHECO
NOTARY PUBLIC, STATE OF ILLINOIS
Commission No. 944250
My Commission Expires 12/15/2025

CONTRACT #: 2557-04180

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

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This Statement is an: [✓] Original Statement or [ ] Amended Statement

Identifying Information:

Name Finkbiner Equipment Company

D/B/A: _____ FEIN # Only: 36-3962293

Street Address: 15W400 N Frontage Road

City: Burr Ridge State: IL Zip Code: 60527

Phone No.: 630-654-3700 Fax Number: 630-654-3779 Email: _____

Cook County Business Registration Number: None
(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): None

Form of Legal Entity:

[ ] Sole Proprietor [ ] Partnership [✓] Corporation [ ] Trustee of Land Trust

[ ] Business Trust [ ] Estate [ ] Association [ ] Joint Venture

[ ] Other (describe) _____

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
Timothy J Kraut	2055 S. 108th Street, Milwaukee, WI 53227	34%
Heidi M Johnson	2055 S. 108th Street, Milwaukee, WI 53227	29%
Robert H Kraut	2055 S. 108th Street, Milwaukee, WI 53227	29%
Stephen D Kraut	2055 S. 108th Street, Milwaukee, WI 53227	08%

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address
N/A		

3. Is the Applicant constructively controlled by another person or Legal Entity? [☐] Yes [☑] No

If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship
N/A			

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Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
Timothy Kraut	2055 S. 108th Street, Milwaukee, WI 53227	CEO	2019 Current
Jason Zeibert	15W400 N Frontage Rd. Burr Ridge, IL 60527	President	2017 - Current
Andy Bazan	15W400 N Frontage Rd. Burr Ridge, IL 60527	Vice President	2021 - Current
Clyde Robison	15W400 N Frontage Rd. Burr Ridge, IL 60527	Vice President	2017 - Current

Declaration (check the applicable box):

☑ I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.

☐ I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Timothy J Kraut
Name of Authorized Applicant/Holder Representative (please print or type)

CEO
Title

Timothy J. Kraut
Signature

07/15/2025
Date

tkraut@amstate.com
E-mail address

[redacted]
Phone Number

Subscribed to and sworn before me
this 15 day of July, 2025

My commission expires: 6.10.29

X Susan Satula
Notary Public Signature

Notary Seal

