

LOUISIANA BOARD OF ETHICS

Mail: P.O. Box 4368, Baton Rouge, LA 70821

Fax: 225-381-7271

Upload: <https://eap.ethics.la.gov/FileUpload>**(CANDIDATE) TIER 2 PERSONAL FINANCIAL DISCLOSURE STATEMENT**This Report Covers Calendar Year: 2024☒ ORIGINAL REPORT☐ AMENDED REPORT☐ I currently hold an office that would require me to file a Tier 2.1, or Tier 3 Personal Financial Disclosure Statement. As such, I have completed SCHEDULE D.Office Sought: New Orleans City Council District CIncumbent: ☐ Yes ☒ NoDate of Election: October 11, 2025NAME OF FILER (print full name): Kelsey FosterMailing Address: PO BOX 6170City, State, Zip: New Orleans LA 70174NAME OF SPOUSE(if applicable)(print full name): Paul LangenwalterSpouse's Occupation: Chief Financial OfficerSpouse's Principal Business Address: 3500 N Causeway Blvd, ste 600City, State, Zip: Metairie LA 70002**CHECK ALL THAT APPLY**☐ I have filed my state income tax return for the year listed above.☒ I have filed for an extension of my state income tax return for the year listed above.☐ I have filed my federal income tax return for the year listed above.☒ I have filed for an extension of my federal income tax return for the year listed above.**NOTE:** La. R.S. 18:1495.7 and 42:1124.2 does not provide candidates the opportunity to request an extension in filing their personal financial disclosure statements.☐ I am a candidate in an election to be held prior to April 15 and I have not filed my tax return for the year listed above.**CERTIFICATE OF ACCURACY**

I do hereby certify that the information contained in this personal financial disclosure statement is true and correct to the best of my knowledge, information, and belief.

Kelsey P Foster

Signature of Filer

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<input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input checked="" type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
Name of Employer: <u>Algiers Economic Development Foundation</u>
Job Title: <u>Executive Director</u>
Job Description: <u>Manage the day to day operations of a non-profit that supports small businesses and residents in the Algiers Community</u>
<input type="checkbox"/> Filer <input checked="" type="checkbox"/> Spouse <input checked="" type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
Name of Employer: <u>Property One, Inc.</u>
Job Title: <u>Chief Financial Officer</u>
Job Description: <u>Manage operations of a regional commercial real estate firm</u>
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
Name of Employer: _____
Job Title: _____
Job Description: _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
Name of Employer: _____
Job Title: _____
Job Description: _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
Name of Employer: _____
Job Title: _____
Job Description: _____

- * You are required to disclose employment information related to both you and your spouse (if applicable).
- * List the name of the employer; the title of the position; a brief description of the job; and disclosure as to whether the position is full-time or part-time.
- * Self-employment information is reported on Schedule B.

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Upload: <https://eap.ethics.la.gov/FileUpload>**Schedule B: Positions - Business**☐ Check if not applicable☐ Filer ☒ Spouse ☐ BothAmount of Interest: 33.3 %Name of Business: Property One, Inc.Address: 3500 N Causeway Blvd Ste 600City, State, Zip: Metairie LA 70114Business Description: Commercial real estate firmNature of Association: Shareholder☐ Filer ☐ Spouse ☐ Both

Amount of Interest: _____ %

Name of Business: _____

Address: _____

City, State, Zip: _____

Business Description: _____

Nature of Association: _____

☐ Filer ☐ Spouse ☐ Both

Amount of Interest: _____ %

Name of Business: _____

Address: _____

City, State, Zip: _____

Business Description: _____

Nature of Association: _____

* You are required to complete SCHEDULE B if you or your spouse is a director, officer, stockholder, owner, partner, member, or trustee of a business AND if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.

* "Business" means any corporation, partnership, limited liability company, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.

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*You are required to complete SCHEDULE C if you or your spouse is a director or officer of a nonprofit organization.

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Name of Office/Position:	<u>Southeast Louisiana Flood Protection Authority - West/ Vice President</u>
Name of Office/Position:	<u></u>
Name of Office/Position:	<u></u>
Name of Office/Position:	<u></u>
Name of Office/Position:	<u></u>
Name of Office/Position:	<u></u>
Name of Office/Position:	<u></u>
Name of Office/Position:	<u></u>
Name of Office/Position:	<u></u>

* You are required to complete SCHEDULE D if you hold any other office or position which would require you to file a personal financial disclosure statement under La. R.S. 42:1124.2.1 or 42:1124.3.

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Location of Property:

State: Louisiana Parish/County: OrleansDescription of Property: Residential Property

Value of the Interest in the Parcel:

☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999)
☐ Category III (\$25,000-\$100,000) ☒ Category IV (more than \$100,000)☐ Filer ☒ Spouse ☐ Both

Location of Property:

State: Louisiana Parish/County: OrleansDescription of Property: Residential Property

Value of the Interest in the Parcel:

☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999)
☐ Category III (\$25,000-\$100,000) ☒ Category IV (more than \$100,000)☐ Filer ☒ Spouse ☐ Both

Location of Property:

State: Louisiana Parish/County: OrleansDescription of Property: Residential Property

Value of the Interest in the Parcel:

☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999)
☐ Category III (\$25,000-\$100,000) ☒ Category IV (more than \$100,000)☐ Filer ☐ Spouse ☐ Both

Location of Property:

State: _____ Parish/County: _____

Description of Property: _____

Value of the Interest in the Parcel:

☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999)
☐ Category III (\$25,000-\$100,000) ☐ Category IV (more than \$100,000)

* You are required to disclose the location by state and parish/county.

* You are required to provide a brief description of the immovable property and its fair market value or use value (determined by the assessor for purposes of ad valorem taxes.)

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State, Political Subdivisions, and/or Gaming Interests**☒ Check if not applicable☒ Filer ☐ Spouse ☐ Business(where amount of interest exceeds 10%)Type of Income: ☐ State ☒ Political Subdivision ☐ Gaming Interest

Name of Business(if applicable): _____

Name of Income Source: Southeast Louisiana Flood Protection Authority - West

Address: 7001 River Road

City, State, Zip: Marrero LA 70072

Amount of Income (exact dollar amount): \$ 3,579.00

☐ Filer ☐ Spouse ☐ Business(where amount of interest exceeds 10%)Type of Income: ☐ State ☐ Political Subdivision ☐ Gaming Interest

Name of Business(if applicable): _____

Name of Income Source: _____

Address: _____

City, State, Zip: _____

Amount of Income (exact dollar amount): \$ _____

☐ Filer ☐ Spouse ☐ Business(where amount of interest exceeds 10%)Type of Income: ☐ State ☐ Political Subdivision ☐ Gaming Interest

Name of Business(if applicable): _____

Name of Income Source: _____

Address: _____

City, State, Zip: _____

Amount of Income (exact dollar amount): \$ _____

* You are required to complete SCHEDULE F if you or your spouse received income (includes any income from public source such as employment income, retirement, etc.) from the State, any political subdivision, and/or a gaming interest OR if a business in which you or your spouse owns an interest which exceeds 10% (either individually or collectively) received income from the aforementioned sources.

* "Income" (for a business) means gross income less costs of goods sold, and operating expenses.

* "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.

* The definitions for (and examples of) *political subdivision*, *gaming interest*, and *business* are found in the *Instructions Section* of this form.

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<input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input checked="" type="checkbox"/> Full-time <input type="checkbox"/> Part-time	
Name of Employer: <u>Algiers Economic Development Foundation</u>	
Address: <u>3520 General DeGaulle Dr Ste 3020</u>	
City, State, Zip: <u>New orleans LA 70114</u>	
Nature of services (pursuant to such employment): _____	
Amount of Income: <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999)	
<input checked="" type="checkbox"/> Category III (\$25,000-\$100,000) <input type="checkbox"/> Category IV (more than \$100,000)	

<input type="checkbox"/> Filer <input checked="" type="checkbox"/> Spouse <input checked="" type="checkbox"/> Full-time <input type="checkbox"/> Part-time	
Name of Employer: <u>Property One, Inc.</u>	
Address: <u>3500 N. Causeway Blvd, Ste 600</u>	
City, State, Zip: <u>Metairie LA 70002</u>	
Nature of services (pursuant to such employment): <u>Financial Officer</u>	
Amount of Income: <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999)	
<input type="checkbox"/> Category III (\$25,000-\$100,000) <input checked="" type="checkbox"/> Category IV (more than \$100,000)	

<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	
Name of Employer: _____	
Address: _____	
City, State, Zip: _____	
Nature of services (pursuant to such employment): _____	
Amount of Income: <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999)	
<input type="checkbox"/> Category III (\$25,000-\$100,000) <input type="checkbox"/> Category IV (more than \$100,000)	

* You are required to complete SCHEDULE G to disclose the income received by you or your spouse for each full-time or part-time employment position held.

* "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.

* Income that is reported on SCHEDULE F does not have to be restated on SCHEDULE G.

* Income received through *self-employment* is reported on SCHEDULE H, unless it is reported on Schedule F.

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Name of Business: _____

Address: _____

City, State, Zip: _____

Nature of services rendered or reason income was received: _____

☐ Filer ☐ Spouse

Name of Business: _____

Address: _____

City, State, Zip: _____

Nature of services rendered or reason income was received: _____

☐ Filer ☐ Spouse

Name of Business: _____

Address: _____

City, State, Zip: _____

Nature of services rendered or reason income was received: _____

☐ Filer ☐ Spouse

Name of Business: _____

Address: _____

City, State, Zip: _____

Nature of services rendered or reason income was received: _____

* You are required to complete SCHEDULE H if you or your spouse received income from a business.

* "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.

* Income reported on SCHEDULE F or G does not have to be restated on SCHEDULE H.

* Income received through *self-employment* is reported on SCHEDULE H.

* "Business" means any corporation, partnership, limited liability company, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.

Revised 8/1/2024

Form 416B

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(any other income that exceeds \$1,000)

☐ Check if not applicable☐ Filer ☒ Spouse

Description of Income:

Proceeds from rental properties

Nature of services rendered or reason income was received:

Rental income

Amount of Income: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999)
☒ Category III (\$25,000-\$100,000) ☐ Category IV (more than \$100,000)

☐ Filer ☐ Spouse

Description of Income:

Nature of services rendered or reason income was received:

Amount of Income: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999)
☐ Category III (\$25,000-\$100,000) ☐ Category IV (more than \$100,000)

☐ Filer ☐ Spouse

Description of Income:

Nature of services rendered or reason income was received:

Amount of Income: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999)
☐ Category III (\$25,000-\$100,000) ☐ Category IV (more than \$100,000)

- * You are required to complete SCHEDULE I if you or your spouse received any other type of income (includes any income from private source such as rental income, federal retirement, etc.) that exceeded \$1,000.
- * "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.
- * You are not required to report income that is derived from child support and alimony payments contained in a court order, or from disability payments from any source.
- * Income that is reported on SCHEDULE F, G, or H does not have to be restated on SCHEDULE I.
- * Income from retirement accounts not reported on Schedule F should be included on Schedule I.

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(an investment holding that exceeds \$5,000)

☐ Filer ☒ Spouse ☐ Both

Name of Security:

NVDA

Description of Security:

NVIDIA Corp.

☐ Filer ☐ Spouse ☐ Both

Name of Security:

Description of Security:

☐ Filer ☐ Spouse ☐ Both

Name of Security:

Description of Security:

☐ Filer ☐ Spouse ☐ Both

Name of Security:

Description of Security:

* You are required to complete SCHEDULE J if you or your spouse holds investment securities where each investment security has a value that exceeds \$5,000.

* You are not required to disclose variable annuities, variable life insurance, variable universal life insurance, whole life insurance, any other life insurance product, mutual funds, exchange-traded funds, education investment accounts, retirement investment accounts government bonds, and cash/cash equivalent investments.

* You are not required to disclose information concerning any property held and administered for any person other than you or your spouse under a trust, tutorship, curatorship, or other custodial instrument.

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(a transaction that exceeds \$5,000)

<input type="checkbox"/> Filer <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Both Transaction Date: <u>6/17/2024</u> Description of Transaction: <u>Purchase of residential property</u>
Amount of Transaction: <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$100,000) <input checked="" type="checkbox"/> Category IV (more than \$100,000)
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Transaction Date: _____ Description of Transaction: _____
Amount of Transaction: <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$100,000) <input type="checkbox"/> Category IV (more than \$100,000)
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both Transaction Date: _____ Description of Transaction: _____
Amount of Transaction: <input type="checkbox"/> Category I (less than \$5,000) <input type="checkbox"/> Category II (\$5,000-\$24,999) <input type="checkbox"/> Category III (\$25,000-\$100,000) <input type="checkbox"/> Category IV (more than \$100,000)

* You are required to complete SCHEDULE K if you or your spouse purchased or sold any immovable property, personally owned tax credit certificates, stocks, bonds, or commodities futures including any option to acquire or dispose of any immovable property or of any personally owned tax credit certificates, stocks, bonds, or commodities futures (when the value of the transaction exceeded \$5,000 in the previous calendar year).

* You are not required to report variable annuities, variable life insurance, variable universal life insurance, whole life insurance, any other life insurance product, mutual funds, exchange-traded funds, education investment accounts, retirement investment accounts, government bonds, cash or cash equivalent investments.

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<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Creditor: _____ Address: _____ City, State, Zip: _____ Name of Guarantor (If applicable): _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Creditor: _____ Address: _____ City, State, Zip: _____ Name of Guarantor (If applicable): _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Creditor: _____ Address: _____ City, State, Zip: _____ Name of Guarantor (If applicable): _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Creditor: _____ Address: _____ City, State, Zip: _____ Name of Guarantor (If applicable): _____

*You are required to complete SCHEDULE L if you or your spouse owes any liability which exceeds \$10,000 on the last day of the reporting period.

*You are not required to disclose any loan secured by movable property, if such loan does not exceed the purchase price of the movable property which secures the loan.

*You are not required to disclose any liability, secured or unsecured, which is guaranteed by you or your spouse for a business in which you or your spouse owns any interest, provided that the liability is in the name of the business and, if the liability is a loan, that you or your spouse does not use proceeds from the loan for personal use unrelated to business.

*You are not required to disclose any loan by a licensed financial institution which loans money in the ordinary course of business.

*You are not required to disclose any liability resulting from a consumer credit transaction as defined in R.S. 9:3516(13).

*You are not required to disclose any loan from an immediate family member, unless such family member is a registered lobbyist, or his principal or employer is a registered lobbyist, or he employs or is a principal of a registered lobbyist, or unless such family member has a contract with the State.

*"Consumer Credit Transaction" in R.S. 9:3516(13) means a consumer loan or a consumer credit sale but does not include a motor vehicle credit transaction made pursuant to R.S. 6:969.1 et seq.