

JAN 13 2025



ETHICS DISCLOSURE STATEMENT
CONFLICTS OF INTEREST – DECISIONS AND VOTING

State Form 55860 (R / 10-15)
OFFICE OF THE INSPECTOR GENERAL
IC 4-2-6-9

INDIANA STATE
ETHICS COMMISSION

In accordance with IC 4-2-6-9, you must file your disclosure with the State Ethics Commission no later than seven (7) days after the conduct that gives rise to the conflict. You must also include a copy of the notification provided to your agency appointing authority and ethics officer when filing this disclosure. This disclosure will be posted on the Inspector General's website.

| | | |
|---|--|--------------------|
| Name (last) Schroeder | Name (first) Mark | Name (middle) A |
| Name of office or agency Indiana Department of Financial Institutions | Job title Board Member of DFI. | |
| Address of office (number and street) 30 South Meridian Street, Suite 200 | City Indianapolis | ZIP code IN |
| Office telephone number (317-) 232-3965 | Office e-mail address (required) maschroeder100@gmail.com | |
| Describe the conflict of interest: I serve on the Board of Members of the Indiana Department of Financial Institutions (DFI). I have a financial interest in German American Bank, which is regulated by the DFI. German American Bank has a pending merger application on file with the DFI for the acquisition of Heartland Bank. The DFI plans to consider the merger application at a Member's meeting currently scheduled for January 21, 2025. | | |

Describe the screen established by your ethics officer: (Attach additional pages as needed.)

I will recuse myself from the DFI's consideration of the merger application. Specifically, I will not participate in the discussion, be present for the vote, or vote on the merger application.

AFFIRMATION

Your signature below affirms that your disclosures on this form are true, complete, and correct to the best of your knowledge and belief. In addition to this form, you have attached a copy of your written disclosure to your agency appointing authority and ethics officer.

Signature of state officer, employee or special state appointee

Mark A. Schroeder

Date signed (month, day, year)

1/12/25

Printed full name of state officer, employee or special state appointee

Mark A. Schroeder

FOR ETHICS OFFICER USE ONLY

Your signature below affirms that you have reviewed this disclosure form and that it is true, complete, and correct to the best of your knowledge and belief. You also attest that your agency has implemented the screen described above.

Signature of ethics officer

George A. Dremonas

Date signed (month, day, year)

1/13/25

Printed full name of ethics officer

George A. Dremonas

Notice of Mark Schroeder Conflict

From Dremonas, George A (DFI) <GDremonas1@dfi.IN.gov>

Date Mon 1/13/2025 2:36 PM

To Fite, Tom <tfite@dfi.IN.gov>

 1 attachment (733 KB)

DOC011325-01132025141922.pdf;

Dear Director Fite,

This is to inform you that Mark Schroeder informed us of a conflict at the January 21, 2025, Members meeting. The conflict is disclosed in the attached Conflict of Interest-Decisions and Voting disclosure form. Schroeder will not participate in the discussion, be present for the vote, or vote on the merger application of German American Bank and Heartland Bank that is scheduled to be presented to the Members on January 21.

I will file the Decisions and Voting disclosure form with the Office of the Inspector General.

Let me know if questions.

George Dremonas
General Counsel
Indiana Department of Financial Institutions
30 S. Meridian Street, Suite 200
Indianapolis, IN 46204
(317) 453-2570
gdremonas1@dfi.in.gov

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