

**DISCLOSURE BY NON-ELECTED STATE EMPLOYEE OF FINANCIAL INTEREST  
AND DETERMINATION BY APPOINTING AUTHORITY  
AS REQUIRED BY G. L. c. 268A, § 6**

| <b>STATE EMPLOYEE INFORMATION</b>   |  |
|---|--|
| Name:   | Christian Kelly  |
| Title or Position:  | Legislative Director   |
| State Agency:   | Massachusetts Senate   |
| Agency Address:   | State House<br>Boston, MA 02133  |
| Office Phone:   | (617) 722-1625   |
| Office E-mail:  | Christian.Kelly@MASenate.gov   |
|   | <p>My duties require me to participate in a particular matter, and I may not participate because of a financial interest that I am disclosing here. I request a determination from my appointing authority about how I should proceed.</p>   |
| <b>PARTICULAR MATTER</b>  |  |
| Particular matter<br><br>E.g., a judicial or other proceeding, application, submission, request for a ruling or other determination, contract, claim, controversy, charge, accusation, arrest, decision, determination, or finding. | <p>Please describe the particular matter.</p> <p>My office is working with the Massachusetts Technology Collaborative to organize a hearing of the Senate Committee on Reimagining Massachusetts and Post-Pandemic Resiliency in which members of that agency may testify before the Committee. Senator Hinds serves as Chair of said Committee.</p>   |
| Your required participation in the particular matter:<br><br>E.g., approval, disapproval, decision, recommendation, rendering advice, investigation, other.   | <p>Please describe the task you are required to perform with respect to the particular matter.</p> <p>I coordinate and organize the logistics for hearings on behalf of Senator Hinds and so I will be working with Massachusetts Technology Collaborative staff over the next few weeks on their panel.</p>   |
| <b>FINANCIAL INTEREST IN THE PARTICULAR MATTER</b>  |  |
| <b>Write an X by all that apply.</b>  | <p><input type="checkbox"/> I have a financial interest in the matter.</p> <p><input type="checkbox"/> My immediate family member has a financial interest in the matter.</p> <p><input type="checkbox"/> My business partner has a financial interest in the matter.</p> <p><input type="checkbox"/> I am an officer, director, trustee, partner or employee of a business organization, and the business organization has a financial interest in the matter.</p> <p><input checked="" type="checkbox"/> I am negotiating or have made an arrangement concerning future employment with a person or organization, and the person or organization has a financial interest in the matter.</p> |
| Financial interest in the matter  | Please explain the financial interest and include a dollar amount if you know it.  |

|                     |  |
|---------------------|--|
|                     | I have applied for a job with the Massachusetts Technology Collaborative and have been asked to interview for the job. |
| Employee signature: |                                       |
| Date:               | April 22, 2021   |

#### DETERMINATION BY APPOINTING OFFICIAL

| <b>APPOINTING AUTHORITY INFORMATION</b>  |  |
|--|--|
| Name of Appointing Authority:  | Adam G. Hinds  |
| Title or Position:   | Senator  |
| Agency/Department:   | Massachusetts Senate   |
| Agency Address:  | State House<br>Boston, MA 02133  |
| Office Phone:  | (617) 722-1625   |
| Office E-mail  | Adam.Hinds@MASenate.gov  |
| <b>DETERMINATION</b>   |  |
| Determination by appointing authority:<br><br><b>Write an X by your selection.</b> | <p>As appointing official, as required by G.L. c. 268A, § 6, I have reviewed the particular matter and the financial interest identified above by a state employee.</p> <p><input type="checkbox"/> I am assigning the particular matter to another employee, or</p> <p><input type="checkbox"/> I am assuming responsibility for the particular matter, or</p> <p><input checked="" type="checkbox"/> I have determined that the financial interest is not so substantial as to be deemed likely to affect the integrity of the services which the Commonwealth may expect from the employee.</p> |
| Appointing Authority signature:  |   |
| Date:  | 4-23-21  |
| Comment:   |  |

Attach additional pages if necessary.

File copy with:

State Ethics Commission, One Ashburton Place, Room 619, Boston, MA 02108