DISCLOSURE BY STATE EMPLOYEE OF FINANCIAL INTEREST IN A STATE CONTRACT AND CERTIFICATION BY HEAD OF CONTRACTING AGENCY AS REQUIRED BY G. L. c. 268A, § 7(b)

	STATE EMPLOYEE INFORMATION
Name of state employee:	Sean Tamarisk
Title/ Position	**Director of Academics – K-8 Science – KIPP Massachusetts**
Fill in this box if it applies to you.	If you are a state employee because a state agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	**KIPP Massachusetts**
Agency Address	**90 High Rock St.** **Lynn, MA 01902**
Office phone:	**781-598-1609**
Office e-mail:	**info@kippma.org**
	Check one: ____ Elected or _X_ Non-elected
Starting date as a state employee.	07/01/2016
BOX # 1 **Select either STATEMENT #1 or STATEMENT #2.** **Write an X beside your financial interest.**	**ELECTED, COMPENSATED STATE EMPLOYEE** I am an **elected, compensated state employee**, other than a state Senator or a state Representative. ___ **STATEMENT #1**: I had one of the following financial interests in a contract made by a state agency before I was elected to my compensated state employee position. I will continue to have this financial interest in a state contract. **OR** ___ **STATEMENT #2**: I will have a new financial interest in a contract made by a state agency. **My financial interest in a state contract is:** ____ I have a non-elected, compensated state employee position. ____ A state agency has a contract with me. ____ I have a financial benefit or obligation because of a contract that a state agency has with another person or an entity, such as a company or organization. ____ I work for a company or organization that has a contract with a state agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the state has contracted for my services in particular.
BOX # 2 **Select either STATEMENT #1 or STATEMENT #2.**	**NON-ELECTED, COMPENSATED STATE EMPLOYEE** I am a **non-elected, compensated state employee**. ___ **STATEMENT # 1**: I had one of the following financial interests in a contract made by a state agency **before** I took a position as a non-elected state employee. I will continue to have this financial interest in a state contract.

Write an X beside your financial interest.	**My financial interest in a state contract is:** ____ A state agency has a contract with me, but not an employment contract. ___ I have a financial benefit or obligation because of a contract that a state agency has with another person or an entity, such as a company or organization. **-- OR --** ___ **STATEMENT # 2**: I will have a **new** financial interest in a contract made by a state agency. **My financial interest in a state contract is:** ____ I have a non-elected, compensated state employee position. ____ A state agency has a contract with me. _X__I have a financial benefit or obligation because of a contract that a state agency has with another person or an entity, such as a company or organization. ____ I work for a company or organization that has a contract with a state agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the state has contracted for my services in particular.
	FINANCIAL INTEREST IN A STATE CONTRACT
Name and address of state agency that made the contract	**Dept of Elementary & Secondary Education** **135 Santilli Highway** **Everett, MA 02149**
Please put in an X to confirm these facts.	**"My State Agency"** is the state agency that I serve as a **state employee**. The **"contracting agency"** is the **state agency that made the contract.** _X_ My State Agency is not the contracting agency. _X_ My State Agency does not regulate the activities of the contracting agency. __X_ In my work for my State Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency. _X_ The contract was made after public notice or through competitive bidding.
FILL IN THIS BOX OR THE BOX BELOW	**ANSWER THE QUESTION IN THIS BOX** **IF THE CONTRACT IS BETWEEN THE STATE AND YOU.** - Please explain what the contract is for.
FILL IN THIS BOX OR THE BOX ABOVE	**ANSWER THE QUESTIONS IN THIS BOX** **IF THE CONTRACT IS BETWEEN THE STATE AND ANOTHER PERSON OR ENTITY.** - Please identify the person or entity that has the contract with the state agency. - What is your relationship to the person or entity? - What is the contract for? Wade Institute for Science Education For professional development for K-12 science educators. I will be taking a two-day workshop offered by Wade Institute.
What is your financial interest	- Please explain the financial interest and include the dollar amount if you know it.

In the state contract?	The Wade Institute pays a $300 stipend for educators who attend both days of the workshop.
Date when you acquired a financial interest	This will be on June 26th and June 27th of 2024
What is the financial interest of your immediate family?	- Please explain the financial interest and include the dollar amount if you know it. None
Date when your immediate family acquired a financial interest	**n/a**
Write an X to confirm each statement.	**FOR A CONTRACT FOR PERSONAL SERVICES –** **Answer the questions in this box ONLY if you will have a contract for personal services with a state agency (i.e., you will do work directly for the contracting agency).** I will have a contract with a state agency to provide personal services. ___ The services will be provided outside my normal working hours as a state employee. ___ The services are not required as part of my regular duties as a state employee. ___ For these services, I will be compensated for not more than 500 hours during a calendar year.
Employee signature:	
Date:	5/8/24

Attach additional pages if necessary.

NOT A PERSONAL SERVICES CONTRACT -- File disclosure with:

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