

Statement of Financial Interests for 2024



CONTACT INFORMATION

Last Name:

Tarsky

First Name and Middle initial:

Joshua

Work Phone Number:

(617) 722-2800 Ext : 7322

Other Phone:

Redacted

Work Email:

Joshua.Tarsky@mahouse.gov

Other Email:

Redacted

Primary Residence Address:

Redacted

Contact mailing address

Redacted

You indicated that you did have a spouse residing in your household during 2024.

You indicated that you did have dependent child(ren) residing in your household during 2024.

Candidacy and Public Service

1. If you are a candidate for public office, please indicate the public office you are seeking.

Office

Representative in General Court

2. Identify the position you now hold, or have held, which requires you to file a Statement of Financial Interests and provide the required information for that position. If you held more than one public position which requires you to file, identify each position.

Filer reported none.

3. Other than the position(s) identified in Question 2, identify every public position you held, and every public agency to which you provided services, at any time during 2024, whether compensated or not, and whether full- or part-time.

Public Agency	Public Agency Name	Address	Position	Amount of Income	Consultant / Contractor?	Services Provided
Municipal	Holbrook Public Schools	245 South Franklin St, Holbrook, MA, 02343, US	Principal Holbrook Middle-High School	\$100,001 or more	N/A	
State	MA National Guard	2 Randolph Rd, Hanscom AFB, MA, 01731, US	JAG	\$10,001 to 20,000	N/A	

4. Identify every public position your spouse and/or any dependent child(ren) residing in your household held, and every public agency to which your spouse and/or any dependent child(ren) residing in your household provided services, at any time during 2024, whether compensated or not, and whether full- or part-time.

Filer reported none.

Private Employment and Leaves of Absence

5. Identify every Business for which you worked as an employee, manager, consultant, or independent contractor at any time during 2024, whether compensated or not, and whether full- or part-time, and provide the required information for each.

Filer reported none.

6. Identify any Business from which you were on a leave of absence at any time during 2024, and provide its address.

Filer reported none.

7. Identify every Business for which your spouse and/or any dependent child(ren) residing in your household worked as an employee, manager, consultant, or independent contractor at any time during 2024, whether compensated or not, and whether full- or part-time, and provide the required information for each.

Business Name	Self-employed	Address	Position
Harvard Medical Faculty Physicians	N/A	Beth Israel Deaconess Medical Center, 330 Brookline Avenue, Boston , MA, 02215, US	Employee

Business Ownership and Transfers

8. Identify each Business of which you were, in whole or in part, an owner, partner, or proprietor, or in which you owned more than 1% of any class of the outstanding stock or similar ownership interest, at any time during 2024, and provide the required information for each.

Filer reported none.

9. Identify each Business of which your spouse and/or any dependent child(ren) residing in your household was, in whole or in part, an owner, partner, or proprietor, or in which your spouse and/or any dependent child(ren) residing in your household owned more than 1% of any class of the outstanding stock or similar ownership interest, at any time during 2024, and provide the required information for each.

Filer reported none.

10. Identify any stock or similar ownership interest in a Business which you transferred to your spouse and/or any dependent child(ren) residing in your household during 2024, and provide the required information for each.

Filer reported none.

Service as an Officer, Director, or Trustee

11. Identify any Business in which you served as an officer, director, or trustee, at any time during 2024, whether compensated or not, and whether full- or part-time, and provide the required information for each.

Filer reported none.

12. Identify any Business in which your spouse and/or any dependent child(ren) residing in your household served as an officer, director, or trustee, at any time during 2024, whether compensated or not, and whether full- or part-time, and provide the required information for each.

Filer reported none.

NOTE: If the Filer answered "YES" to a Question in the following section, one or more columns in the Table for that Question may be blank in the following situations: If the Filer indicated that the name of the person and/or the trust was a family member's name or address, the Filer was not required to provide that name. If the Filer indicated that an address was a family member's address, the Filer was not required to provide that address.

Real Estate

13. Identify all Real Estate in Massachusetts which you owned directly or through a Business as of December 31, 2024, and which had an assessed value greater than \$1,000, and provide the required information for each Real Estate holding.

Ownership Legend:
Filer = F
Spouse/Child(ren) = S/C
Trust = T

Property Address	Owner	Transferred?	Transferor Name	Transferor Address	Assessed Value
Redacted	F, S/C	No			\$100,001 or more

14. Other than the Real Estate identified in Question 13, identify all Real Estate in Massachusetts which your spouse and/or any dependent child(ren) residing in your household owned directly or through a Business as of December 31, 2024, and which had an assessed value greater than \$1,000, and provide the required information for each Real Estate holding.

Property Address	Transferred?	Transferor Name	Transferor Address
3455 Main St, West Springfield, MA, 01090, US	No		
Amherst Development Partners Limited, P.O Box 180, West Springfield, MA, 01090, US	No		

15. Identify any Trust of which you were a beneficiary, and which owned Real Estate in Massachusetts as of December 31, 2024, with an assessed value greater than \$1,000, and provide the required information for each such Trust and Real Estate holding.

Beneficiary Legend:

Filer = F

Spouse/Child(ren) = S/C

Trust = T

Filer reported none.

16. Other than the Real Estate identified in Question 15, identify any Trust of which your spouse and/or any dependent child(ren) residing in your household was a beneficiary, and which owned Real Estate in Massachusetts as of December 31, 2024, with an assessed value greater than \$1,000, and provide the required information for each such Trust and Real Estate holding.

Filer reported none.

17. Identify any Real Estate in Massachusetts with an assessed value greater than \$1,000, that was transferred to another person or entity by you, or by a Trust of which you were a beneficiary, at any time during 2024, and provide the required information for each Real Estate holding.

Ownership Legend:

Filer = F

Spouse/Child(ren) = S/C

Trust = T

Filer reported none.

18. Other than the Real Estate identified in Question 17, identify any Real Estate in Massachusetts with an assessed value greater than \$1,000, that was transferred to another person or entity by your spouse and/or any dependent child(ren) residing in your household, or by a Trust of which your spouse and/or any dependent child(ren) residing in your household was a beneficiary, at any time during 2024, and provide the required information for each piece of Real Estate transferred.

Ownership Legend:

Filer = F

Spouse/Child(ren) = S/C

Trust = T

Filer reported none.

19. Identify any Real Estate in Massachusetts with an assessed value greater than \$1,000, on which, as of December 31, 2024, you, or a Trust of which you were a beneficiary, had a lien, attachment, or mortgage receivable, and provide the required information for each.

Ownership Legend:

Filer = F

Spouse/Child(ren) = S/C

Trust = T

Filer reported none.

20. Other than the Real Estate identified in Question 19, identify any Real Estate in Massachusetts with an assessed value greater than \$1,000, on which, as of December 31, 2024, your spouse and/or any dependent child(ren) residing in your household, or a Trust of which your spouse and/or any dependent child(ren) residing in your household, had a lien, attachment, or mortgage receivable, and provide the required information for each.

Ownership Legend:

Filer = F

Spouse/Child(ren) = S/C

Trust = T

Filer reported none.

NOTE: If the Filer answered “YES” to a Question in the following section, one or more columns in the Table for that Question may be blank in the following situations: If the Filer indicated that the name of the person and/or the trust was a family member’s name or address, the Filer was not required to provide that name. If the Filer indicated that an address was a family member’s address, the Filer was not required to provide that address.

Financial Investments

21. Identify every bond or other security issued by the Commonwealth of Massachusetts or its political subdivisions, agencies, and authorities, which you owned directly or through a Business, as of December 31, 2024, and which had a fair market value as of that date greater than \$1,000, and provide the required information for each such investment.

Ownership Legend:

Filer = F

Spouse/Child(ren) = S/C

Trust = T

Filer reported none.

22. Other than the bonds or other securities identified in Question 21, identify every bond or other security issued by the Commonwealth of Massachusetts or its political subdivisions, agencies, and authorities, which your spouse and/or any dependent child(ren) residing in your household owned directly or through a Business, as of December 31, 2024, and which had a fair market value as of that date greater than \$1,000, and provide the required information for each such investment.

Filer reported none.

23. Identify every bond or other security issued by the Commonwealth of Massachusetts or its political subdivisions, agencies, and authorities, which was owned as of December 31, 2024, by a Trust of which you were a beneficiary, whether directly or through a Business, and which had a fair market value as of that date greater than \$1,000, and provide the required information for each such investment.

Beneficiary Legend:

Filer = F

Spouse/Child(ren) = S/C

Trust = T

Filer reported none.

24. Identify every bond or other security issued by the Commonwealth of Massachusetts or its political subdivisions, agencies, and authorities, which was owned as of December 31, 2024, by a Trust of which your spouse and/or any dependent child(ren) residing in your household was a beneficiary, whether directly or through a Business, and which had a fair market value as of that date greater than \$1,000, and provide the required information for each such investment.

Filer reported none.

25. Identify every Financial Investment that you owned directly or through a Business as of December 31, 2024, and which had a fair market value as of that date greater than \$1,000, and provide the required information for each.

Ownership Legend:
Filer = F
Spouse/Child(ren) = S/C
Trust = T

Name of Issuer	Owner	Description of Investment	Principal Place of Business or State of Incorporation	Address
iShares Core S&P Total U.S. Stock Market ETF (ITOT)	F, S/C			
Vanguard Tax-Exempt Bond ETF (VTEB)	F, S/C			

26. Other than the Financial Investments identified in Question 25, identify every Financial Investment that your spouse and/or any dependent child(ren) residing in your household owned directly or through a Business as of December 31, 2024, and which had a fair market value as of that date greater than \$1,000, and provide the required information for each. For any Financial Investment not included on the drop-down list of publicly traded stock, you must provide the issuer's principal place of business or state of incorporation as well as its address.

Name of Issuer	Description of Investment	Principal Place of Business or State of Incorporation	Address
Alphabet Inc. - Class A Common Stock (GOOGL)			
Amazon.com, Inc. - Common Stock (AMZN)			
Apple Inc. - Common Stock (AAPL)			
Bank of America Corporation Common Stock (BAC)			
Charter Communications, Inc. - Class A Common Stock (CHTR)			

Chevron Corporation
Common Stock(CVX)

Deere & Company
Common Stock(DE)

Walt Disney Company
(The) Common
Stock(DIS)

Dupont Fabros
Technology, Inc.
Common Stock(DFT)

Equinix, Inc. -
Common Stock(EQIX)

Exxon Mobil
Corporation Common
Stock(XOM)

Fidelity National
Information
Services, Inc.
Common Stock (FIS)

First Solar, Inc. -
Common Stock (FSLR)

General Dynamics
Corporation Common
Stock (GD)

International
Business Machines
Corporation Common
Stock (IBM)

Marriott
International -
Class A Common
Stock (MAR)

Medtronic plc.
Ordinary
Shares (MDT)

META	Common Stock	DE	1 Hacker Way, Menlo Park, CA, 94025, US
Microsoft Corporation - Common Stock (MSFT)			
Newmont Mining Corporation (NEM)			
NVIDIA Corporation - Common Stock (NVDA)			
Quanta Services, Inc. Common Stock (PWR)			
Salesforce.com Inc Common Stock (CRM)			

Solventum Corp	Common Stock	DE	2510 Conway Ave East , Maplewood, MN, 55144, US
Sylvamo Corp	Common Stock	DE	6400 Poplar Ave, Memphis , TN, 38197, US
Vanguard Small-Cap Growth ETF - DNQ (VBK)			
3M Company Common Stock (MMM)			
Comm Services Select	ETF	MA	1 Lincoln St, Boston , MA, 02111, US
SPDR Select Sector Fund - Consumer Discretionary (XLY)			

First Trust ISE
Cloud Computing
Index Fund (SKYY)

PAVE

ETF

GA

801 Pennsylvania Ave,
Kansas City, MO, 64105,
US

SPDR Select Sector
Fund - Health
Care (XLV)

SPDR Select Sector
Fund - Energy
Select Sector (XLE)

SPDR Select Sector
Fund -
Financial (XLF)

SPDR Select Sector
Fund -
Technology (XLK)

VanEck
Semiconductor
ETF (SMH)

Vanguard Consumer
Staples ETF -
DNQ (VDC)

Vanguard Consumer
Discretion ETF -
DNQ (VCR)

Vanguard
Industrials ETF -
DNQ (VIS)

Vanguard
Information Tech
ETF - DNQ (VGT)

Invesco S&P 500
Index Fund Class
A (SPIAX)

American Mutual
Fund Class A
Shares (AMRMX)

Berkshire Hathaway
Inc. New Common
Stock (BRK.B)

Boeing Company
(The) Common
Stock (BA)

Carrier Global Corp Common Stock

Palm Beach Gardens,
Florida

13995 Pasteur BLVD, Palm
Gardens, FL, 33418, US

Eversource Energy
(D/B/A) Common
Stock (ES)

The Growth Fund of
America Class A
Shares (AGTHX)

Home Depot, Inc.
(The) Common
Stock (HD)

iShares Russell
Mid-Cap ETF (IWR)

iShares Russell
1000 Growth
ETF (IWF)

iShares Russell
2000 ETF (IWM)

iShares U.S.
Technology ETF (IYW)

JP Morgan Chase &
Co. Common
Stock (JPM)

McDonald's
Corporation Common
Stock (MCD)

Net Lease Office
Properties

Common Stock

Manhattan, NY

1 Manhattan West, New
York, NY, 10001, US

Otis Worlkdwide

Common Stock

Farmington, CT

1 Carrier Place,
Farmington, CT, 06032, US

Raytheon Company
Common Stock (RTN)

Vanguard Russell
1000 Value
ETF (VONV)

Verizon
Communications Inc.
Common Stock (VZ)

<p>Visa Inc.(V)</p>					
<p>W.P. Carey Inc. REIT (WPC)</p>					
<p>Wal-Mart Stores, Inc. Common Stock (WMT)</p>					
<p>American Funds Capital World Growth & Income Fund Class A Shares (CWGIX)</p>					
<p>Coca Cola Euro Pacific Partners</p>	<p>Common Stock</p>	<p>Pemberton House, UK</p>	<p>Bakers Road, Uxbridge, Middlesex UB8</p>		
<p>American Funds EuroPacific Growth A (AEPGX)</p>					

International
Growth and Income
Fd, Cl A Shs (IGAAX)

American Funds New
World Fund A (NEWFX)

Vanguard FTSE All
World Ex US
ETF (VEU)

iShares Core S&P
500 ETF (IVV)

iShares S&P 500
Growth ETF (IVW)

iShares S&P 500
Value ETF (IVE)

iShares U.S.
Technology ETF(IYW)

iShares MSCI USDA
Quality Factor
ETF(QUAL)

iShares MSCI USA
Momentum Factor
ETF(MTUM)

iShares MSCI EAFE
Value ETF(EFV)

iShares MSCI EAFE
Growth ETF(EFG)

iShares Core MSCI
Emerging Markets
ETF(IEMG)

ishares msci emerging markets ex china	ETF	50 Hudson Yards, NY	50 Hudson Yards, New York , NY, 10001, US
iShares 20 Year Treasury Bond ETF (TLT)			
iShares MBS ETF (MBB)			
iShares Core Total USD Bond Market ETF (IUSB)			
ishares flexible income active ETF	ETF	Hudson Yards, NY	50 Hudson Yards, NY, NY, 10001, US
Fidelity FADMX	Mutual Fund	MA	245 Summer Street, Boston , MA, 02210, US

Fidelity Investment
Grade Bond
Fund (FBNDX)

Fidelity Contra
Fund (FCNTX)

Fidelity Value
Fund (FDVLX)

Fidelity Emerging
Markets Fund (FEMKX)

Fidelity
International
Discovery (FIGRX)

Fidelity New
Markets Income
Fund (FNMIX)

Spartan Total
Market Index Fd
Fidelity Advg Insti
Cl (FSKAX)

Fidelity
Commonwealth Trust
Fidelity Small Cap
Stock Fund (FSLCX)

Spartan 500 Index
Fd Advantage Insti
Cl (FXAIX)

27. Identify every Financial Investment that was owned as of December 31, 2024, by a Trust of which you were a beneficiary, and which had a fair market value as of that date greater than \$1,000, and provide the required information for each. For any Financial Investment not included on the drop-down list of publicly traded stock, you must provide the issuer's principal place of business or state of incorporation as well as its address.

Beneficiary Legend:

Filer = F

Spouse/Child(ren) = S/C

Trust = T

Filer reported none.

28. Other than the Financial Investments identified in Question 27, identify every Financial Investment that was owned as of December 31, 2024, by a Trust of which your spouse and/or any dependent child(ren) residing in your household was a beneficiary, and which had a fair market value as of that date greater than \$1,000, and provide the required information for each. For any Financial Investment not included on the drop-down list of publicly traded stock, you must provide the issuer's principal place of business or state of incorporation as well as its address.

Filer reported none.

NOTE: If the Filer answered “YES” to a Question in the following section, one or more columns in the Table for that Question may be blank in the following situations: If the Filer indicated that the name of the person and/or the trust was a family member’s name or address, the Filer was not required to provide that name. If the Filer indicated that an address was a family member’s address, the Filer was not required to provide that address.

Debts and Mortgages

29. Identify all mortgages, including home equity and reverse mortgage loans, on your Primary Residence, on which more than \$1,000 was owed as of December 31, 2024, where the creditor (person who loaned you the money) is not, by blood or marriage, your parent, grandparent, great grandparent, child, grandchild, great-grandchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any such relative, and provide the required information for each.

Creditor Name	Creditor Address	Mortgage Term	Interest Rate (%)	Termination Year
Bank of America	100 North Tryon Street, Charlotte, NC, 28255, US	30	2.5	2051

30. Did you have a mortgage, including a home equity or reverse mortgage loan, on any property OTHER than your Primary Residence, on which more than \$1,000 was owed as of December 31, 2024, which you were obligated to pay and where the creditor (person who loaned you the money) is NOT, by blood or marriage, your parent, grandparent, great grandparent, child, grandchild, great-grandchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any such relative?

Obligor Legend:
Filer = F
Spouse/Child(ren) = S/C
Trust = T

Real Estate Address	Obligor	Original Amount	Outstanding Amount	Mortgage Term	Interest Rate (%)	Termination Year	Creditor Name	Creditor Address
5664 Pepperbus h Dr, Fayetteville, NC, 28304, US	F	\$60,001 to 100,000	\$40,001 to 60,000	30	5.0	2039	Wells Fargo	420 Montgomery Street, San Francisco, CA, 94163, US

31. Identify all mortgages, including home equity and reverse mortgage loans, other than any mortgage on your Primary Residence or any mortgage identified in response to Question 30, on which more than \$1,000 was owed as of December 31, 2024, and which your spouse and/or any dependent child(ren) residing in your household were obligated to pay and where the creditor (person who loaned the money to your spouse and/or dependent child(ren) residing in your household) is not, by blood or marriage, your parent, grandparent, great grandparent, child, grandchild, great-grandchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any such relative, and provide the required information for each.

Filer reported none.

32. Identify all non-mortgage debts of more than \$1,000 that you owed as of December 31, 2024, IF the person to whom you owed the debt is not, by blood or marriage, your parent, grandparent, great grandparent, child, grandchild, great-grandchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any such relative, and provide the required information for each.

Filer reported none.

33. Identify all non-mortgage debts of more than \$1,000 that your spouse and/or any dependent child(ren) residing in your household owed as of December 31, 2024, if the person to whom your spouse and/or any dependent child(ren) residing in your household owed the debt is not, by blood or marriage, your parent, grandparent, great grandparent, child, grandchild, great-grandchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any such relative, and provide the required information for each.

Filer reported none.

34. Identify non-mortgage debts of more than \$1,000 which you owed and which were forgiven at any time during 2024, excluding debts forgiven by a person who is, by blood or marriage, your parent, grandparent, great grandparent, child, grandchild, great-grandchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any such relative, and provide the required information for each.

Filer reported none.

35. Identify non-mortgage debts of more than \$1,000 that were owed by your spouse and/or any dependent child(ren) residing in your household and were forgiven at any time during 2024, excluding debts forgiven by a person who is, by blood or marriage, your parent, grandparent, great grandparent, child, grandchild, great-grandchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any such relative, and provide the required information for each.

Filer reported none.

Reimbursements, Gifts, and Honoraria

36. Identify any Reimbursements for expenses in excess of \$100 provided to you at any time during 2024 by any legislative agent or executive agent (lobbyist).

Filer reported none.

36.a Identify any Reimbursements for expenses in excess of \$100, other than those identified in response to Question 36, you received at any time during 2024 from any person having a direct interest in legislation, legislative action, or a matter before a governmental body.

Filer reported none.

37. Identify any Reimbursements for expenses in excess of \$100 provided to your spouse and/or any dependent child(ren) residing in your household at any time during 2024 by any legislative agent or executive agent (lobbyist).

Filer reported none.

37.a Identify any Reimbursements for expenses in excess of \$100, other than those identified in response to Question 37, provided to your spouse and/or dependent child(ren) residing in your household at any time during 2024 by any person having a direct interest in legislation, legislative action, or a matter before a governmental body.

Filer reported none.

38. Identify any Gifts and/or Honoraria worth more than \$100 provided to you at any time during 2024 by any person having a direct interest in legislation, legislative action, or a matter before a governmental body.

Filer reported none.

39. Identify any Gifts and/or Honoraria worth more than \$100 provided to your spouse and/or any dependent child(ren) residing in your household at any time during 2024 by any person having a direct interest in legislation, legislative action, or a matter before a governmental body.

Filer reported none.

NOTE: If the Filer answered “YES” to a Question in the following section, one or more columns in the Table for that Question may be blank in the following situations: If the Filer indicated that the name of the person and/or the trust was a family member’s name or address, the Filer was not required to provide that name. If the Filer indicated that an address was a family member’s address, the Filer was not required to provide that address.

Blind Trusts

40. Did you, your spouse and/or any dependent child(ren) residing in your household during 2024, own anything that you have not reported on this Statement of Financial Interests because it was held in a Blind Trust during 2024?

Filer reported none.

CERTIFICATION

I, Joshua Tarsky, certify under the pains and penalties of perjury that:

I made a diligent effort to obtain the required information concerning myself and my spouse and/or any dependent child(ren); and

The information provided on this form is true and complete, to the best of my knowledge.

Submitted: 01/29/2025

Did your spouse and/or any dependent child(ren) residing in your household decline to disclose information which is necessary to complete this form fully and accurately?

The following are the specific Question(s) which I decline to answer in whole or in part because I assert that the information is privileged by law:

Please explain the basis of your claim of privilege:

IMPORTANT:

1. No DESIGNATED PUBLIC EMPLOYEE shall be allowed to continue in their duties or to receive compensation from public funds unless they have filed a Statement of Financial Interests with the State Ethics Commission.
2. The State Ethics Commission does not accept a faxed or emailed copy of a Statement of Financial Interests for filing.
3. If you were required to amend your Statement of Financial Interests last year, we encourage you to carefully review your 2024 filing before submitting.