

**DISCLOSURE BY ELECTED PUBLIC EMPLOYEE
OF EXPENSES RELATED TO ATTENDANCE AT AN EVENT
SERVING A LEGITIMATE PUBLIC PURPOSE
AS REQUIRED BY 930 CMR 5.08(3)(b)**

	ELECTED PUBLIC EMPLOYEE INFORMATION
Name of elected public employee:	Karen E. Spilka
Title/ Position	Massachusetts State Senate President
Office:	Massachusetts State Senate
Office address:	Massachusetts State House 24 Beacon Street, Room 332 Boston, MA 02133
Office phone:	617-722-1500
Office E-mail:	Karen.Spilka@masenate.gov
Write an X to confirm each statement.	I am filing this disclosure because: ☒ My attendance at an event will serve a legitimate public purpose, i.e., it will promote the interests of the Commonwealth, a county or a municipality; and ☒ A non-public entity (but not a lobbyist) has offered to pay or waive expenses worth \$50 or more related to the event.
	EVENT ATTENDED
Describe the event that you will attend.	Sail Boston, Inc. hosted an opening ceremony and luncheon to kick off Sail Boston 2026, an international maritime celebration of the 250th anniversary of the United States. The event included, among other things, a speaking program, the Blessing of the Sails, flag presentations, and fireboat salutes.
Describe your participation in the event.	I attended the event as a participant and representative of the Massachusetts State Senate.
Date, time and location of event.	Date: July 10, 2026 Location: Boston Harbor Hotel, 70 Rowes Wharf, Boston, MA 02110 Time: 11:45am to 2:00pm
	EXPENSES RELATED TO INCIDENTAL HOSPITALITY
Identify the person or organization that offered to reimburse, pay or waive expenses.	Sail Boston, Inc.

Address of person or organization.	88 Black Falcon Avenue, Suite 202 Boston, MA 02210
Provide information in as much detail as possible:	<i>Itemization and explanation of amounts offered:</i>
Transportation:	<i>Air, train, bus, and taxi fare and rental car hire, etc.</i>
Meals:	<i>Breakfast, lunch, dinner, special events.</i> I do not have this information at this time but will submit an updated disclosure once I receive the final amount.
Admission:	<i>Admission, tickets, etc.</i>
Other (please list):	<i>Refreshment, entertainment, etc.</i>
Total:	I will file an updated disclosure once I receive the final amount from Sail Boston, Inc.
For the exemption to apply, check off both statements.	Having disclosed the facts above, I determine that: ☐ Acceptance of the reimbursement, waiver or payment of travel expenses will serve a legitimate public purpose i.e., will promote the interests of the Commonwealth, a county or a municipality; AND ☒ Such public purpose outweighs any special non-work related benefit to me or to the person providing the reimbursement, waiver or payment.
Please explain how the activity will promote the interests of the Commonwealth, a county or a municipality.	The event provided me with an opportunity to meet with other elected officials, business leaders and other leaders in the community to welcome and celebrate Sail Boston 250, an event bringing economic development and cultural enrichment to residents, businesses and visitors in the Commonwealth. These conversations will inform my work on behalf of the residents of the Commonwealth as well as my leadership of the Massachusetts Senate as we work to continue to showcase and bring events to the Commonwealth that will provide an economic boost to our state.
Employee signature:	
Date:	July 24, 2026

Attach additional pages if necessary.

Elected state or county employees – file with the State Ethics Commission.

Members of the General Court – file with the House or Senate clerk or the State Ethics Commission.

Elected municipal employee – file with the City Clerk or Town Clerk.