

**RECONCILIATION STATEMENT
AS REQUIRED BY 930 CMR 5.08(2)(d)3.**

	PUBLIC EMPLOYEE INFORMATION
Name of employee:	Yvonne Hao
Title/ Position	Secretary
Agency/ Department	Executive Office of Housing and Economic Development
Agency address:	One Ashburton Place, Suite 2101, Boston, MA
Office Phone:	617-788-3610
Office E-mail:	Yvonne.Hao@mass.gov
	<p>I previously filed a disclosure explaining that I accepted reimbursement, waiver or payment by a non-public entity (but not a lobbyist) of travel expenses related to an activity or speaking engagement that served a legitimate public purpose. I am filing this Reconciliation Statement because the actual amount of the travel expenses differed by more than \$50 from the amount I originally disclosed.</p> <p>I HAVE ATTACHED A COPY OF MY PREVIOUS DISCLOSURE.</p>
	ADDITIONAL EXPENSES
Date of activity or speaking engagement:	June 25-30, 2023
Reason that the actual amount differs from the previously disclosed amount by \$50 or more:	<p>American Chamber of Commerce in Ireland did not provide refreshments accepted by staff.</p> <p>Value of dinner provided by the Irish Senate was more than \$50 lower than estimate.</p>

PLEASE INCLUDE DETAILED INFORMATION
ONLY ABOUT AMOUNTS THAT DIFFER FROM THE AMOUNTS ORIGINALLY DISCLOSED.

	<u>Previously disclosed amount</u>	<u>Actual amount</u>
Transportation:		
Lodging:		
Meals:	Presumed to exceed \$200	\$37.98
Admission:		
Refreshments (American Chamber of Commerce in Ireland Reception):	Presumed to exceed \$50	\$0
Total:	Presumed to exceed \$250	\$37.98

Employee signature	
Date	8/1/23

Attach additional pages if necessary.

Non-elected public employees - file with your appointing authority.

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

**Members of the General Court -
file with the Senate or House Clerk or the State Ethics Commission.**

Elected municipal employee - file with the city or town clerk.

**Elected regional school committee member –
file with the clerk or secretary of the committee.**

**DISCLOSURE BY NON-ELECTED PUBLIC EMPLOYEE
OF INCIDENTAL HOSPITALITY AT AN EVENT
SERVING A LEGITIMATE PUBLIC PURPOSE
AS REQUIRED BY 930 CMR 5.08(3)(b).**

	PUBLIC EMPLOYEE INFORMATION
Name of non-elected public employee:	Yvonne Hao
Title/ Position	Secretary
Agency/ Department	Executive Office of Economic Development
Agency address:	1 Ashburton Place, Room 2101, Boston, MA 02108
Office phone:	(617) 788-3610
Office e-mail:	Yvonne.Hao@mass.gov
Write an X to confirm each statement.	<p>I am filing this disclosure because:</p> <p>☒ 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</p> <p>☐ A non-public entity (but not a lobbyist) has offered to pay or waive expenses worth \$50 or more related to the event.</p>
	EVENT ATTENDED
Describe the event that you will attend.	As part of a multi-day itinerary with the Governor in Ireland, I will be attending a dinner hosted by the Cathaoirleach and Members of the Oireachtas LGBTQI+ following the Governor's address to the Irish Senate.
Describe your participation in the event.	I will attend the dinner as a guest.
Date, time and location of event.	<p>June 27, 2023; 4:30 P.M.</p> <p>Leinster House, Kildare Street Dublin 2 County Dublin</p>
Please explain how the activity will promote the interests of the Commonwealth, a county or a municipality.	The dinner will provide opportunities to meet and connect with elected officials in Ireland, to learn about Ireland's renowned business, technology, clean energy, and education communities, and to discuss opportunities for strategic partnerships for the benefit of Massachusetts.
	EXPENSES RELATED TO INCIDENTAL HOSPITALITY
Identify the person or organization that offered to reimburse, pay or waive expenses.	The Irish Senate

Address of person or organization.	2 Kildare Street Dublin D02 County Dublin
Provide information in as much detail as possible:	<i>Itemization and explanation of amounts offered:</i>
Transportation within the Commonwealth:	<i>Air, train, bus, and taxi fare and rental car hire, etc.</i>
Meals:	<i>Breakfast, lunch, dinner, special events.</i> Presumed to exceed \$200 in value.
Admission:	<i>Admission, tickets, etc.</i>
Other (please list):	<i>Refreshment, entertainment, materials, etc.</i>
Total:	Presumed to exceed \$200.
Employee signature:	<i>Yvonne Hao</i>
Date:	6/22/2023

SEE NEXT PAGE FOR DETERMINATION BY APPOINTING AUTHORITY

DETERMINATION BY APPOINTING AUTHORITY

	APPOINTING AUTHORITY INFORMATION
Name of Appointing Authority:	Maura Healey
Title/ Position:	Governor
Agency/ Department	Office of the Governor
Agency Address:	Massachusetts State House, Room 360, Boston, MA 02133
Office Phone:	617-725-4000
Office E-mail:	Maura.Healey@mass.gov
Employee who filed the disclosure:	Yvonne Hao
	DETERMINATION
To give approval, check off both statements.	<p>Upon consideration of the facts disclosed by the employee above, I find that:</p> <p>☒ The employee's attendance at the event will serve a legitimate public purpose i.e., it will promote the interests of the Commonwealth, a county or a municipality; AND</p> <p>☒ Such public purpose outweighs any special non-work related benefit to the employee or the person paying or waiving expenses related to the event.</p>
Reason that the employee's travel or attendance will serve a legitimate public purpose:	The dinner will provide important and unique opportunities to meet and connect with elected officials in Ireland, to learn about Ireland's renowned business, technology, clean energy, and education sectors, and to discuss opportunities for strategic partnerships for the benefit of Massachusetts.
Appointing Authority signature:	
Date:	6/23/23

Attach additional pages if necessary.

The appointing authority should maintain the disclosure as a public record
and give a copy of any signed determination to the employee.

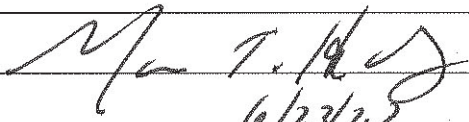
**DISCLOSURE BY NON-ELECTED PUBLIC EMPLOYEE
OF INCIDENTAL HOSPITALITY AT AN EVENT
SERVING A LEGITIMATE PUBLIC PURPOSE
AS REQUIRED BY 930 CMR 5.08(3)(b).**

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Name of non-elected public employee:	Yvonne Hao
Title/ Position	Secretary
Agency/ Department	Executive Office of Economic Development
Agency address:	1 Ashburton Place, Room 2101, Boston, MA 02108
Office phone:	(617) 788-3610
Office e-mail:	Yvonne.Hao@mass.gov
Write an X to confirm each statement.	<p>I am filing this disclosure because:</p> <p>☒ <u>X</u> 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</p> <p>☐ <u>X</u> A non-public entity (but not a lobbyist) has offered to pay or waive expenses worth \$50 or more related to the event.</p>
	EVENT ATTENDED
Describe the event that you will attend.	As part of a multi-day itinerary with the Governor in Ireland, I will be attending a reception hosted by the American Chamber of Commerce in Dublin and the Irish Department of Foreign Affairs celebrating the 60th Anniversary of JFK's State Dinner in Dublin.
Describe your participation in the event.	I will attend the reception as a guest.
Date, time and location of event.	<p>June 27, 2023; 6:00 P.M.</p> <p>Iveagh House, 80 St Stephen's Green, Dublin 2, D02 VY53</p>
Please explain how the activity will promote the interests of the Commonwealth, a county or a municipality.	The reception will provide opportunities to meet, connect, and discuss opportunities for partnership with approximately one hundred leadership representatives of U.S.-based Irish companies, JFK Library supporters, Chamber of Commerce officials, Irish public officials, and others invested in US-Ireland business relations.
	EXPENSES RELATED TO INCIDENTAL HOSPITALITY
Identify the person or organization that offered to reimburse, pay or waive expenses.	American Chamber of Commerce in Ireland

Address of person or organization.	6 Wilton Place Dublin D02 YD51 Dublin
Provide information in as much detail as possible:	<i>Itemization and explanation of amounts offered:</i>
Transportation within the Commonwealth:	<i>Air, train, bus, and taxi fare and rental car hire, etc.</i>
Meals:	<i>Breakfast, lunch, dinner, special events.</i>
Admission:	<i>Admission, tickets, etc.</i>
Other (please list):	<i>Refreshment, entertainment, materials, etc.</i> Refreshments presumed to exceed \$50 in value.
Total:	Presumed to exceed \$50
Employee signature:	<i>Yvonne Hao</i>
Date:	6/22/2023

SEE NEXT PAGE FOR DETERMINATION BY APPOINTING AUTHORITY

DETERMINATION BY APPOINTING AUTHORITY

	APPOINTING AUTHORITY INFORMATION
Name of Appointing Authority:	Maura Healey
Title/ Position:	Governor
Agency/ Department	Office of the Governor
Agency Address:	Massachusetts State House, Room 360, Boston, MA 02133
Office Phone:	617-725-4000
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Employee who filed the disclosure:	Yvonne Hao
	DETERMINATION
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Reason that the employee's travel or attendance will serve a legitimate public purpose:	The reception will provide opportunities to meet, connect, and discuss opportunities for partnership with approximately one hundred leadership representatives of U.S.-based Irish companies, JFK Library supporters, Chamber of Commerce officials, Irish public officials, and others invested in US-Ireland business relations.
Appointing Authority signature:	
Date:	6/23/23

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The appointing authority should maintain the disclosure as a public record and give a copy of any signed determination to the employee.