Statement of Financial Interests for 2019



CONTACT INFORMATION	
Last Name:	First Name and Middle initial:
Blais	Natalie
Work Phone Number:	Other Phone:
(617) 722-2400	Redacted
Work Email:	Other Email:
Natalie.Blais@mahouse.gov	Redacted
Primary Residence Address:	
Redacted	
Contact mailling address	
Redacted	
You indicated that you did have a spouse residing in your household during	g 2019.
You indicated that you did have dependent child(ren) residing in your hous	ehold during 2019.

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

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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.

Agency Name	Address	Position	Date	Amount of Income
Massachusetts House of Representatives	State House, Room 134, Boston, MA, 02133, US	Representative in General Court	01/02/2019	\$60,001 to 100,000

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 2019, whether compensated or not, and whether full- or part-time.	
Filer reported none.	

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 2019, 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 2019, 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 2019, and provide its address.

Filer reported none.

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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 2019, whether compensated or not, and whether full- or part-time, and provide the required information for each.

Business Name	Self-employed	Address	Position
Amherst College	N/A	220 South Pleasant Street, Amherst, MA, 01002, 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 2019, 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 2019, 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 2019, 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 2019, whether compensated or not, and whether full- or part-time, and provide the required information for each.

Filer reported none.

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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 2019, 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, 2019, 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	8005	\$100,001 or
				MOTO

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, 2019, and which had an assessed value greater than \$1,000, and provide the required information for each Real Estate holding.

Filer reported none.

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15. Identify any Trust of which you were a beneficiary, and which owned Real Estate in Ma 2019, with an assessed value greater than \$1,000, and provide the required information for 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 sp child(ren) residing in your household was a beneficiary, and which owned Real Estate in Ma 31, 2019, with an assessed value greater than \$1,000, and provide the required information Estate holding. Filer reported none.	assachusetts as of December
17. Identify any Real Estate in Massachusetts with an assessed value greater than \$1,000 person or entity by you, or by a Trust of which you were a beneficiary, at any time during 2 information for each Real Estate holding.	
	Ownership Legend: Filer = F Spouse/Child(ren) = S/C Trust = T
Filer reported none.	

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18. Other than the Real Estate identified in Question 17, identify any Real Estate in Massa greater than \$1,000, that was transferred to another person or entity by your spouse and/or residing in your household, or by a Trust of which your spouse and/or any dependent child was a beneficiary, at any time during 2019, and provide the required information for each	or any dependent child(ren) d(ren) residing in your household
	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 \$1,00 2019, you, or a Trust of which you were a beneficiary, had a lien, attachment, or mortgag 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 Mass greater than \$1,000, on which, as of December 31, 2019, your spouse and/or any dependent household, or a Trust of which your spouse and/or any dependent child(ren) residing in your attachment, or mortgage receivable, and provide the required information for each.	dent child(ren) residing in your
	Ownership Legend: Filer = F Spouse/Child(ren) = S/C Trust = T
Filer reported none.	

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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, 2019, 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.



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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, 2019, and which had a fair market value as of that date greater than \$1,000, and provide the required information for each such investment.

Name of Bond/ Other Security	Description of Investment
Mass St. Series C	Bond
Mass State Water Res Av	Bond
	S . S . S . S . S . S . S . S . S . S .
Mass State for ISS - 2025	Bond
Mass State for ISS - 2026	Bond
Mass State for ISS - 2027	Bond

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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, 2019, 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, 2019, 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, 2019, 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
AB Global Thematic Growth Fund, Inc Advisor Class (ATEYX)	F			
AllianzGl Global Sustainability Fund Class P(ASTPX)	F	5.0000000000000000000000000000000000000		
American Century Fundamental Equity Fund Institutional Class (AFEIX)	F			
Calvert U.S. Large Cap Value Responsible Index Fund Class I(CFJIX)	F			
Federated Hermes SDG Engagement EQ Fund Class Instl (FHESX)	F	Mutual Fund	Pennsylvania	Federated Investors Tower, 1001 Liberty Avenue, Pittsburgh, PA, 15222 3779, US
ISHARES Trust ISHARES ESG MSCI EAFE ETF (ESGD)	F	Exchange Traded Fund	California	BlackRock Fund Advisors , 400 Howard Street , San Francisco, CA, 94105, US

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Northern Global Sustainability Index Fund(NSRIX)	F			
UBS Global Sustainable Equity Fund Class P(BNUEX)	F			
UBS Engage for Impact Fund CL P (UEIPX)	F	Mutual Fund	New York	UBS Global Asset Management Americas, 1285 Avenue of the Americas, New York, NY, 10019 6028, US
BlackRock Global Alloc A(MDLOX)	F			
Calvert Green Bond Fund Class I(CGBIX)	F			
Calvert Income Fd Cl I(CINCX)	F			
UBS Sustainable Development Bank Bond Fund (UDBPX)	F	Bond	New York	UBS Global Asset Management Americas, 1285 Avenue of the Americas, New York, NY, 10019, US
TIAA-CREF Social Choice Bond Fund Advisor Class (TSBHX)	F	Mutual Fund	New York	730 3rd Ave, New York, NY, 10017, US

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Federated Hermes SDG Engagement High Yield Credit IS (FHHIX) Mutual Fund

Pennsylvania

1001 Liberty Ave #2100, Pittsburgh, PA, 15222, US

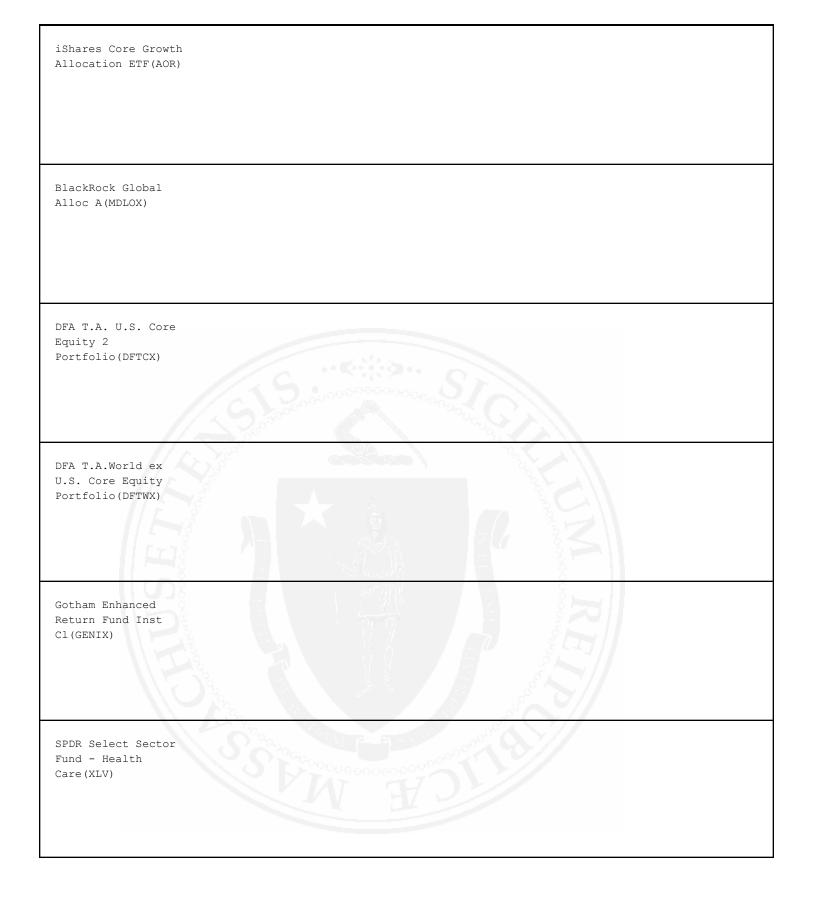


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26. Other than the Financial Investments identified in Question 25, identify every Financial Investment that your spouse and/or any dependent child(ren) residing in your household owned directly or through a Business as of December 31, 2019, and which 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 Address State of Incorporation
iShares iBoxx \$ Investment Grade Corporate Bond ETF(LQD)		
Powershares FTSE RAFI US 1000 Portfolio(PRF)	5,500	
PowerShares FTSE RAFI Developed Markets ex-U.S. Portfolio(PXF)		
PowerShares FTSE RAFI Emerging Markets Portfolio(PXH)		
FPA Funds Trust, FPA Crescent Portfolio Institutional Class(FPACX)	S. P. W.	EV O

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DFA Global Allocation 60/40 Portfolio Inst Cl(DGSIX) Guggenheim Total Return Bond Fund-Institutional Class(GIBIX) Nuveen Short Duration High Yield Municipal Bond Fd Cl I(NVHIX) AQR Managed Futures Strategy Fund Class I(AQMIX) Mutual Fund New York Catalyst/Millburn 36 N New York Avenue, Hedge Fund (MBXIX) Floor 3, Huntington, NY, 11743, US ishares Gold Trust(IAU)

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New York State Dorm Auth	Bond	New York	State St. and Washington Ave, Albany, NY, 12224, US
Maryland State Issue D	Bond	Maryland	100 State Circle, Annapolis, MD, 21401, US
Pennsylvania State	Bond	Pennsylvania	Commonwealth Avenue, Harrisburg, PA, 17025, US
Oklahoma Water Resources	Bond	Oklahoma	3800 N Classen Blvd, Oklahoma City, OK, 73118, US
Austin Texas Public Impt	Bond	Texas	1100 Congress Ave, Austin, TX, 73301, US
US Treasury Note 2022	Bond	Washington, DC	1500 Pennsylvania Ave NW, Washington, DC, 20220, US

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San Antonio TX Water System	Bond	Texas	1100 Congress Ave, Austin, TX, 73301, US
Ohio State Water Dev Auth	Bond	Ohio	1 Capitol Square, Columbus, OH, 43215, US
US Treasury Note 2028	Bond	Washington, DC	1500 Pennsylvania Ave NW, Washington, DC, 20220, US
North TX MUNWTR DIST RV BE/R 2025	Bond	Texas	1100 Congress Ave, Austin, TX, 73301, US
Dallas TX WTRWKS SWR SR A RV BE/R 2023	Bond	Texas	1100 Congress Ave, Austin, TX, 73301, US
iShares Global Consumer Staples ETF(KXI)			

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iShares MSCI China ETF (MCHI) Common Stock California ISHARES EDGE MSCI 400 Howard Street, San USA QUALITY FACTOR Francisco, CA, 94105, US ETF (QUAL) iShares MSCI International Developed Quality Factors ETF(IQLT) Massachusetts Real Estate Select ETF One Lincoln Street, Sec SPDR (XLRE) Boston, MA, 02111, US College America 529 College Savings Plan Virginia 5300 Robin Hood Rd, Norfolk, VA, 23513, US Plan 20204 iShares 1-3 Year Treasury Bond ETF(SHY)

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Schwab U.S. TIPs ETF (SCHP) ETF New York Granite Shares 205 HUDSON STREET, 7TH FLOOR, New York, NY, Goldtrust (BAR) 10013, US SPDR Select Sector Fund -Utilities(XLU) Vanguard FTSEEuropean ETF (VGK)

27. Identify every Financial Investment that was owned as of December 31, 2019, 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.

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28. Other than the Financial Investments identified in Question 27, identify every Financial Investment that was owned as of December 31, 2019, 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.

<u>NOTE</u>: 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, 2019, where the creditor (person who loaned you the money) is <u>not</u>, 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
Greenfield Cooperative Bank	63 Federal Street, Greenfield, MA, 01301, US	15 years	4	2025

30. Did you have a mortgage, including a home equity or reverse mortgage loan, on any property <u>OTHER</u> than your Primary Residence, on which more than \$1,000 was owed as of December 31, 2019, which you were obligated to pay and where the creditor (person who loaned you the money) is <u>NOT</u>, 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

Filer reported none.

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Resider 31, 201 where t not, by	ntify all mortgages, including home equity and reverse mortgage loans, other than any mortgage on your Primary nce or any mortgage identified in response to Question 30, on which more than \$1,000 was owed as of December 9, and which your spouse and/or any dependent child(ren) residing in your household were obligated to pay and he creditor (person who loaned the money to your spouse and/or dependent child(ren) residing in your household) is blood or marriage, your parent, grandparent, great grandparent, child, grandchild, great-grandchild, aunt, uncle, prother, niece, nephew, or the spouse of any such relative, and provide the required information for each.
	Filer reported none.
you owe	ntify all non-mortgage debts of more than \$1,000 that you owed as of December 31, 2019, IF the person to whom ed the debt is <u>not</u> , by blood or marriage, your parent, grandparent, great grandparent, child, grandchild, randchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any such relative, and provide the required tion for each.
	Filer reported none.
househ your ho great-gr	ntify all non-mortgage debts of more than \$1,000 that your spouse and/or any dependent child(ren) residing in your old owed as of December 31, 2019, if the person to whom your spouse and/or any dependent child(ren) residing in pusehold owed the debt is not, by blood or marriage, your parent, grandparent, great grandparent, child, grandchild, randchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any such relative, and provide the required tion for each. Filer reported none.
_	
<u>excludi</u> grandc	ntify non-mortgage debts of more than \$1,000 which you owed and which were forgiven at any time during 2019, ng debts forgiven by a person who is, by blood or marriage, your parent, grandparent, great grandparent, child, hild, great-grandchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any such relative, and provide the d information for each. Filer reported none.

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residir or mar	entify non-mortgage debts of more than \$1,000 that were owed by your spouse and/or any dependent child(ren) ng in your household and were forgiven at any time during 2019, excluding debts forgiven by a person who is, by blood rriage, your parent, grandparent, great grandparent, child, grandchild, great-grandchild, aunt, uncle, sister, brother, nephew, or the spouse of any such relative, and provide the required information for each.	
	Filer reported none.	
Reim	abursments, Gifts, and Honoraria	
	entify any Reimbursements for expenses in excess of \$100 provided to you at any time during 2019 by any legislative or executive agent (lobbyist).	
	Filer reported none.	
you re	dentify any Reimbursements for expenses in excess of \$100, other than those identified in response to Question 36, eceived at any time during 2019 from any person having a direct interest in a matter before the governmental body by you were or are now employed.	
ı		
	Filer reported none.	
	entify any Reimbursements for expenses in excess of \$100 provided to your spouse and/or any dependent child(ren) ng in your household at any time during 2019 by any legislative agent or executive agent (lobbyist).	
	Filer reported none.	

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37.a Identify any Reimbursements for expenses in excess of \$100, other than those identified in response to Question 36, provided to your spouse and/or dependent child(ren) residing in your household at any time during 2019 by any person having a direct interest in a matter before the governmental body by which you were or are now employed.				
	Filer reported none.			
	entify any Gifts and/or Honoraria worth more than \$100 provided to you at any time during 2019 by any person having ct interest in a matter before a governmental body by which you were or are now employed.			
	Filer reported none.			
residin	entify any Gifts and/or Honoraria worth more than \$100 provided to your spouse and/or any dependent child(ren) ng in your household at any time during 2019 by any person having a direct interest in a matter before the nmental body by which you were or are now employed.			
	Filer reported none.			
Questi family	: If the Filer answered "YES" to a Question in the following section, one or more columns in the Table for that ion may be blank in the following situations: If the Filer indicated that the name of the person and/or the trust was a member's name or address, the Filer was not required to provide that name. If the Filer indicated that an address family member's address, the Filer was not required to provide that address.			
Blin	d Trusts			
	Did you, your spouse and/or any dependent child(ren) residing in your household during 2019, own anything that you e not reported on this Statement of Financial Interests because it was held in a Blind Trust during 2019?			
	Filer reported none.			

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I, ${\tt Natalie}\ {\tt Blais}$, 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: 03/16/2020

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 2019 filling before submitting.

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