



Statement of Financial Interest

City of Boston

Name: Mohammed Missouri

Street Address: 77 Dix Street Apt 1

Phone Number: 1-617-306 1038

City: Boston

Phone Type: Mobile

State: Massachusetts

Work Email:

Zip: 02122

mohammed.missouri@boston.gov

Submission Date: 2025-07-01

Did you have a spouse/partner residing in your household at any time during 2024?

Yes

Spouse Full Name: Tara Smith

Employment Information

Are you a candidate for public office? No

Name of Office:

Did you hold a position as a public official or designated public employee in 2024? Yes

| <i>Agency in which you served</i> | <i>Your job title</i> | <i>Start date</i> | <i>End date</i> | <i>Amount of income earned from this position in 2024</i> |
|-----------------------------------|-----------------------------|-------------------|-----------------|---|
| Mayor's Office | Senior Advisor for Strategy | 2023-06-05 | | \$100,001 or more |

Have you or your spouse/partner held a government position in any federal, state, county, district, or municipal agency? This includes full-time, part-time, and consulting positions, whether they were paid or unpaid. Yes



| <i>Who held the position?</i> | <i>What was the name of the of Government entity?</i> | <i>What was the job title?</i> | <i>If you held the position, how much money did you make?</i> |
|-------------------------------|---|--------------------------------|---|
| Spouse/Partner | Cannabis Control Commission | Communications Manager | \$100,001 or more |

Were you or your spouse/partner associated with a business as an employee, partner, sole proprietor, officer, director, or any similar capacity? This includes full-time and part-time positions, whether they were paid or unpaid. No

| <i>Who held the position?</i> | <i>What was the job title?</i> | <i>What was the name of the business?</i> | <i>Business Address</i> | <i>If you held the position, how much money did you make?</i> |
|-------------------------------|--------------------------------|---|-------------------------|---|
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Business Ownership or Equity

Did you or your spouse/partner own more than 1% of an equity in any business at any time during 2024? No

| <i>What was the name of the business?</i> | <i>Business Street Address</i> | <i>If you are the owner, what percentage equity did you own?</i> |
|---|--------------------------------|--|
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Did you transfer any equity or ownership in a business to your spouse/partner during the past calendar year? No



| <i>What was the name of the business?</i> | <i>Briefly describe the equity</i> | <i>To whom did you transfer the equity?</i> |
|---|------------------------------------|---|
| | | |

Did you take a leave of absence from a business in the past calendar year with the understanding that you would work again for that company in the future? No

| <i>What was the name of the business?</i> | <i>Business Address</i> |
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Gifts and Other Payments

Did you or your spouse/partner receive a gift you need to report in 2024? No

| <i>Who was the source of the gift?</i> | <i>Source Address</i> | <i>What is the affiliation of the source?</i> | <i>Who received the gift?</i> | <i>If you received the gift, what was the estimated fair market value?</i> |
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Did you or your spouse/partner receive any honoraria you need to report in 2024? No

| <i>Who received the honorarium?</i> | <i>What was the name of the organization that gave the honorarium?</i> | <i>Organization Address</i> | <i>What was the name of the representative of the organization?</i> | <i>Representative Address</i> |
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Did you or your spouse/partner receive a reimbursement you need to report in 2024?

No

| <i>Who received the reimbursement?</i> | <i>If you received the reimbursement, what was the estimated fair market value?</i> | <i>What was the name of the organization that paid the reimbursement?</i> | <i>Organization Address</i> | <i>What was the name of the representative of the organization that paid the reimbursement?</i> | <i>Representative Address</i> |
|--|---|---|-----------------------------|---|-------------------------------|
| Spouse/Partner | | Cannabis Control Commission | | | |

Securities and Investments

Do you or your spouse/partner own any securities issued by the Commonwealth of Massachusetts or any public agency, county, or municipality? No

| <i>Who owns the security?</i> | <i>Name the issuer of the security</i> | <i>Describe the security</i> | <i>If you own the security, please list the income it generated in 2024</i> |
|-------------------------------|--|------------------------------|---|
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Did you or your spouse/partner own any securities or investments as of December 31, 2024? No



| Who owns the investment? | What is the name of the Issuer? | Please describe the security | Where is the security's principal place of business? |
|--------------------------|---------------------------------|------------------------------|--|
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Trusts

Did you or your spouse/partner have a beneficial ownership interest or serve as the trustee of a business or charitable trust as of December 31, 2024? No

| <i>What is the name of the trust?</i> | <i>Trust Address</i> | <i>What day was the trust created?</i> | <i>Please name the grantors</i> | <i>Please list the trustees</i> | <i>Who are the trust beneficiaries?</i> | <i>What percentage of the trust equity do you own?</i> | <i>How much income did you earn from the trust in 2024?</i> |
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| | | | | | | | |

Did you or your spouse/partner own any securities and investments in a business or charitable trust with a fair market value of more than \$1,000 as of December 31, 2024? No



| <i>What is the name of the trust?</i> | <i>Trust Address</i> | <i>What is the name of the Issuer?</i> | <i>Describe the security:</i> |
|---------------------------------------|----------------------|--|-------------------------------|
| | | | |

Did you or your spouse/partner own securities and investments held in a family trust with a fair market value of more than \$1,000 as of December 31, 2024? No

| <i>Who are the trust beneficiaries?</i> | <i>Who is the Issuer?</i> | <i>Describe the security:</i> | <i>Address of real estate held in the trust</i> |
|---|---------------------------|-------------------------------|---|
| | | | |

Did you or your spouse/partner have a beneficial ownership interest or serve as a trustee of a realty trust as of December 31, 2024? No

| <i>What is the name of the trust?</i> | <i>Trust Address</i> | <i>When was the trust created</i> | <i>Please name the grantors</i> | <i>Please list the trustees</i> | <i>Who are the trust beneficiaries ?</i> | <i>What percentage of the trust equity do you own?</i> |
|---------------------------------------|----------------------|-----------------------------------|---------------------------------|---------------------------------|--|--|
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Do you or your spouse/partner beneficially own property in a realty trust as of December 31, 2024? No



| <i>What is the name of the trust?</i> | <i>Trust Address</i> | <i>Please describe the property held in the trust:</i> | <i>If the property is in Massachusetts, please list its assessed value:</i> | <i>What are the names on the deed?</i> | <i>Did you make any income from the property in 2024? Please select the amount:</i> |
|---------------------------------------|----------------------|--|---|--|---|
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Are there any mortgages — including home equity and reverse mortgage loans — as of December 31, 2024, on any property held in a business, charitable, or realty trust that you owned and reported in this form? No

| <i>What is the name of the trust?</i> | <i>Address of real estate held in the trust</i> | <i>What is the name of the creditor?</i> | <i>Creditor Address</i> | <i>If you borrowed the loan, what was the original amount?</i> | <i>If you borrowed the loan, how much is still owed?</i> | <i>What is the interest rate on the loan?</i> | <i>What year is the mortgage due or terminated?</i> |
|---------------------------------------|---|--|-------------------------|--|--|---|---|
| | | | | | | | |

Was any property in Massachusetts bought by or transferred to a business, charitable, family, or realty trust owned by you in 2024? No

| <i>Address of property bought in the trust</i> | <i>Please describe the property held in the trust:</i> | <i>What is the name of the seller or transferor?</i> |
|--|--|--|
| | | |

Where any properties in Massachusetts sold by or transferred from a business, charitable, family, or realty trust owned by you in 2024? No



| <i>Address of property bought in the trust</i> | <i>Please describe the property held in the trust:</i> | <i>What is the name of the seller or transferor?</i> |
|--|--|--|
| | | |

Real Estate

Did you or your spouse/partner own any real estate in Massachusetts with an assessed value of more than \$1,000 as of December 31, 2024? (Does not include out-of-state property) Yes

| <i>Address of property</i> | <i>Please describe the property</i> | <i>Who are the people holding interest in the property?</i> | <i>If you own the property, what is the assessed value?</i> |
|--|-------------------------------------|---|---|
| 77 Dix Street Apt 1 Boston Massachusetts 02122 | Condo | Myself and my spouse | \$100,001 or more |

Did you or your spouse/partner have a direct or indirect ownership of any business, investment, or rental properties with an assessed value of more than \$1,000 in 2024? This includes time-share arrangements. No

| <i>Address of property</i> | <i>Please describe the property</i> | <i>Who are the people holding interest in the property?</i> | <i>If you own the property, what is the assessed value?</i> | <i>Did you make any income from the property in 2024? Please select the amount</i> |
|----------------------------|-------------------------------------|---|---|--|
| | | | | |

Did you or your spouse/partner buy or have transferred any real estate in Massachusetts in 2024? No

| <i>Address of property</i> | <i>Please describe the property</i> | <i>What is the name of the seller or transferor?</i> | <i>Address of the seller or transferor</i> |
|----------------------------|-------------------------------------|--|--|
| | | | |



Did you or your spouse/partner sell or transfer any real estate in Massachusetts in 2024? No

| <i>Address of property</i> | <i>Please describe the property</i> | <i>What is the name of the seller or transferor?</i> | <i>Address of the purchaser or transferee</i> |
|----------------------------|-------------------------------------|--|---|
| | | | |

Mortgage and Debt Information

Do you or your spouse/partner own property subject to a mortgage -- including home equity and reverse mortgages -- as of December 31, 2024? This includes mortgages on property located outside of Massachusetts that were held for business or rental purposes. Yes

| <i>Address of property</i> | <i>Please describe the property</i> | <i>Please name the mortgagee:</i> | <i>If you own the property, what is the assessed value?</i> |
|--|-------------------------------------|-----------------------------------|---|
| 77 Dix Street Apt 1 Boston Massachusetts 02122 | Condo | Eagle Bank | \$100,001 or more |

Do you or your spouse/partner have any debts, loans, or other liabilities that you need to report? No

| <i>What is the name of the creditor?</i> | <i>Creditor Address</i> | <i>If you are the borrower, what was the original amount borrowed?</i> | <i>If you are the borrower, what is the amount currently owed?</i> | <i>What is the interest rate on the loan?</i> | <i>What year is the loan due or terminated?</i> | <i>Please list loan collateral:</i> |
|--|-------------------------|--|--|---|---|-------------------------------------|
| | | | | | | |

Did any creditors forgive a debt of more than \$1,000 to you or your spouse/partner in 2024? You do not have to include debts forgiven by a spouse, close relative, or the spouse of a close relative. No



| | | |
|--|-------------------------|--|
| <i>What is the name of the creditor?</i> | <i>Creditor Address</i> | <i>Please identify the amount forgiven</i> |
| | | |

Non-profit and Corporate Boards

Please list any non-profit or corporate boards on which you sat during Calendar Year 2024

| Name of Entity: | Position Held: | Did you receive compensation from this Entity? |
|------------------------|-----------------------|---|
| More Perfect Union | Member | No |

Certification

I certify under the pains and penalties of perjury that:

- I made a diligent effort to obtain the required information concerning myself and my immediate family members; and
- The information provided on this form and any attachments is true and complete.

E-Signature



Signature Name: Mohammed Missouri

Signature Date: 2025-07-01