

4-3-24



STATEMENT OF ECONOMIC INTERESTS COVER PAGE A PUBLIC DOCUMENT

Date when Form 700 Required JB

Please type or print in ink.

NAME OF FILER (LAST) YOUNG (FIRST) Carlyle Ann (MIDDLE)

1. Office, Agency, or Court

Agency Name (Do not use acronyms) Monterey Water and Sanitary District ; Director Division, Board, Department, District, if applicable Your Position

(District 4)

If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: Position:

2. Jurisdiction of Office (Check at least one box)

State CA Multi-County N/A City of N/A

Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) County of San Mateo Other Unincorporated Moss Beach + Menlo Park

3. Type of Statement (Check at least one box)

Annual: The period covered is January 1, 2023, through December 31, 2023. -or- The period covered is 3/2/2023 through December 31, 2023. -or- Assuming Office: Date assumed 3/2/2023

Leaving Office: Date Left (Check one circle.) The period covered is January 1, 2023, through the date of leaving office. -or- The period covered is through the date of leaving office.

Candidate: Date of Election and office sought, if different than Part 1:

4. Schedule Summary (required)

Total number of pages including this cover page: 3

Schedules attached

- Schedule A-1 - Investments - schedule attached Schedule A-2 - Investments - schedule attached Schedule B - Real Property - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule D - Income - Gifts - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached

-or- None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS 8888 Caballero Way Monterey, CA 94037 STREET CITY STATE ZIP CODE (Business or Agency Address Recommended - Public Document)

DAYTIME TELEPHONE NUMBER (650) 728-9271 EMAIL ADDRESS cyoung@mosso.net

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 4/3/24 (month, day, year)

Signature Carlyle Ann Young (File the originally signed paper statement with your filing official.)

4-3-24

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name _____

▶ NAME OF BUSINESS ENTITY
MERCK *Stock shares*

GENERAL DESCRIPTION OF THIS BUSINESS
Pharma

FAIR MARKET VALUE
 \$2,000 - \$10,000 *638.80* \$10,001 - \$100,000 *127.66 = 127.66*
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other *5 shares @ 25.97*
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/23 ACQUIRED ____/____/23 DISPOSED

▶ NAME OF BUSINESS ENTITY
MERCK DRIP *Dividend Reinvestment Plan*

GENERAL DESCRIPTION OF THIS BUSINESS
include 11, 17, 26 < \$10,975.66

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000 *85,971 x 127.66*
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other *DRIP*
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE: *Long ago 2001*
____/____/23 ACQUIRED ____/____/23 DISPOSED

▶ NAME OF BUSINESS ENTITY
ORGANON DRIP

GENERAL DESCRIPTION OF THIS BUSINESS
Pharma

FAIR MARKET VALUE *# 142.00*
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other *DRIP 7.946 shares*
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE: *? spin-off from Merck*
____/____/23 ACQUIRED ____/____/23 DISPOSED

▶ NAME OF BUSINESS ENTITY
UNH *~ ROTH IRA*

GENERAL DESCRIPTION OF THIS BUSINESS
United Health Care Stock

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other *in Roth IRA*
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/23 ACQUIRED ____/____/23 DISPOSED

▶ NAME OF BUSINESS ENTITY
Procter + Gamble (PG Stock)

GENERAL DESCRIPTION OF THIS BUSINESS
Consumer Products

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other *SEP IRA*
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/23 ACQUIRED ____/____/23 DISPOSED

▶ NAME OF BUSINESS ENTITY
MetLife *dividends*

GENERAL DESCRIPTION OF THIS BUSINESS
Life Insurance etc

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000 *1099-DIV*

NATURE OF INVESTMENT
 Stock Other *dividends only less than 12% per year*
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/23 ACQUIRED ____/____/23 DISPOSED

Comments: _____

4-28-24
Same as last year

SCHEDULE B
Interests in Real Property
(Including Rental Income)

San Mateo Lot 037-283-040

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS: 037-283-040
CITY: Moss Beach CA

FAIR MARKET VALUE: \$10,001 - \$100,000
IF APPLICABLE, LIST DATE: 22 23
ACQUIRED: July 1980 DISPOSED: N/A

NATURE OF INTEREST: Ownership/Deed of Trust Easement
 Leasehold free + clear

IF RENTAL PROPERTY, GROSS INCOME RECEIVED: \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SOURCES OF RENTAL INCOME: None

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS: _____
CITY: _____

FAIR MARKET VALUE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
IF APPLICABLE, LIST DATE: _____/_____/_____
ACQUIRED _____ DISPOSED _____

NATURE OF INTEREST: Ownership/Deed of Trust Easement
 Leasehold _____ Yrs. remaining _____ Other _____

IF RENTAL PROPERTY, GROSS INCOME RECEIVED: \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

SOURCES OF RENTAL INCOME: None

* You are not required to report loans from a commercial lending institution made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*: 100 free + clear N/A free + clear
ADDRESS (Business Address Acceptable): between 140 + 180 on San Lucas Ave MB
BUSINESS ACTIVITY, IF ANY, OF LENDER: _____

INTEREST RATE: _____% None
TERM (Months/Years): _____

HIGHEST BALANCE DURING REPORTING PERIOD: \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

NAME OF LENDER*: _____
ADDRESS (Business Address Acceptable): _____
BUSINESS ACTIVITY, IF ANY, OF LENDER: _____

INTEREST RATE: _____% None
TERM (Months/Years): _____

HIGHEST BALANCE DURING REPORTING PERIOD: \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000
 Guarantor, if applicable

Comments: The lot is near my home, but I only keep it for my pet goat. No rental income