Board of Education Member Conflict of Interest Disclosure

(If additional space or entries are required for any required disclosure item, attach additional pages containing the required information and identifying the disclosure item the information relates to. If additional pages are attached, please check this space:)					
Name: Karen Pedersen					
Name of Board member's spouse (if any): Craig Pedersen					
Name of each adult residing in Board member's household but not related by blood or marriage (if any):					
<u>Employment</u>					
Board member's current employer(s)					
Name of employer: retired					
Address of employer:					
Description of Board member's employment with employer:					
Board member's job title with employer:					
Board member's occupation with employer:					
Name of a manla years					
Name of employer:					
Address of employer:					
Description of Board member a employment with employer.					
Board member's job title with employer:					
Board member's occupation with employer:					
Board member's employer(s) during the past year					
(List any employers during the past year not listed above.)					
Name of employer:					
Address of employer:					
Description of Board member's employment with employer:					
Board member's job title with employer:					
Board member's occupation with employer:					

Entities

Affiliated entities

(List each e	ntity of which the Board member <u>is</u> currently <u>or</u> in the prior year <u>was</u> an owner or officer)
Na	me of entity: None
Во	ard member's position in the entity:
De	scription of the type of business or activity conducted by the entity:
Na	me of entity:
	ard member's position in the entity:
	scription of the type of business or activity conducted by the entity:
<u>Investmer</u>	nt interests
valued eithe	tity in which the Board member holds stocks or bonds with a fair market value equal to or greater than \$5,000, er at present or within the prior year. This excludes funds managed by a third party, such as blind trusts, expectment accounts and mutual funds.)
Na	me of entity: None
De	scription of the type of business or activity conducted by the entity:
Na	mo of ontity:
	me of entity:scription of the type of business or activity conducted by the entity:
	scription of the type of business of activity conducted by the entity.
Other inco	<u>ome</u>
Note that if licensed pro through whi	ndividual or entity from whom the Board member received \$5,000 or more in income during the preceding year. the Board member provides goods or services to multiple customers or clients as part of a business and ofession, the Board member is only required to provide this information in relation to the entity or practice ich the Board member provides the goods and services and is not required to provide information about the ber's individual customers or clients.)
Na	me of individual or entity: <u>Utah State Retirement System</u>
De	scription of the type of business or activity conducted by the individual or entity:
	Distribution of earned retirement benefits
Na	me of individual or entity:

Description of t	Description of the type of business or activity conducted by the individual or entity:			
Entity leadership posi	<u>tions</u>			
	above for which the Board member <u>is</u> currently or in the prior year <u>was</u> <u>either</u> in a paid a paid or unpaid position on a board of directors)			
Name of entity	or organization:			
Board member	's position with the entity or organization:			
Description of t	the type of business or activity conducted by the entity:			
Name of entity	or organization:			
	's position with the entity or organization:			
	the type of business or activity conducted by the entity:			
Address of spo	of spouse se employer: Canyons School District suse employer: spouse's employment with employer: 28 hour classroom assistant for welding			
instructor at C	TEC			
Spouse's job ti	tle with employer:ESP employee			
Spouse's occu	pation with employer: <u>classroom aide</u>			
Name of spous	se employer:			
Address of spo	ouse employer:			
Description of	spouse's employment with employer:			
Spouse's job ti	tle with employer:			
Spouse's occu	pation with employer:			

Spouse employer(s) during the past year

(List any employers of the Board member's spouse during the past year not listed above.)

Na	me of spouse employer:
Ad	dress of spouse employer:
De	escription of spouse's employment with employer:
Sp	ouse's job title with employer:
Sp	ouse's occupation with employer:
Affiliated	Adult Employment
•	for each adult residing in Board member's household but not related by blood or marriage)
Aff	iliated adult's name:
Aff	iliated adult's occupation:
De	escription of affiliated adult's employment:
Aff	iliated adult's name:
Aff	iliated adult's occupation:
De	scription of affiliated adult's employment:
<u>Optional</u>	<u>Disclosures</u>
	, describe any real property in which the Board member holds an ownership or other nterest that the Board member believes may constitute a conflict of interest:
De	escription of real property:
De	escription of the type of interest held by the Board member:
f desired conflict of	, describe any other matter or interest that the Board member believes may constitute a interest:
De	escription of matter or interest:
De	escription of matter or interest:

I believe that the information provided with this disclosure statement is true and accurate to the best of my knowledge.

Date Disclosure Completed _	9/12/2025	
Board Member Signature:	Karen Pedersen	