

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Date Initial Filing Received
Filing Official Use Only

Filed Date: 03/16/2026 07:40 AM
SAN: 072400521-STH-0521

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Pedersen David W

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Las Virgenes Municipal Water District

Division, Board, Department, District, if applicable

Your Position

General Manager

► 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

☐ Judge (Supreme, Appellate, Superior Court), Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County _____

☐ County of _____

☐ City of _____

☒ Other District

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

☒ **Annual:** The period covered is January 1, 2025, through December 31, 2025.

☐ **Leaving Office:** Date Left ____/____/_____
(Check one circle below.)

-or-

The period covered is ____/____/_____, through December 31, 2025.

☐ The period covered is January 1, 2025, through the date of leaving office.

-or-

☐ **Assuming Office:** Date assumed ____/____/_____

☐ 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: 5

Schedules attached

☒ **Schedule A-1 - Investments** – schedule attached

☐ **Schedule C - Income, Loans, & Business Positions** – schedule attached

☐ **Schedule A-2 - Investments** – schedule attached

☒ **Schedule D - Income – Gifts** – schedule attached

☒ **Schedule B - Real Property** – schedule attached

☐ **Schedule E - Income – Gifts – Travel Payments** – schedule attached

☐ **Attachment 700-P - Prospective Employment (87200 Filers Only)** – schedule attached

-or- ☐ **None - No reportable interests on any schedule**

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)

4232 Las Virgenes Road

Calabasas

CA

91302

DAYTIME TELEPHONE NUMBER

(818) 251-2122

EMAIL ADDRESS

dpedersen@lvmwd.gov

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 03/16/2026 07:40 AM

(month, day, year)

Signature

David W Pedersen

(File the originally signed paper statement with your filing official.)

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.

Name

David Pedersen

► NAME OF BUSINESS ENTITY

Companhia Siderurgica

GENERAL DESCRIPTION OF THIS BUSINESS

Steel Manufacturer

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 _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/25 ____/____/25
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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 _____ (Describe)
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NATURE OF INVESTMENT

- ☐ Stock ☐ Other _____ (Describe)
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IF APPLICABLE, LIST DATE:

____/____/25 ____/____/25
ACQUIRED DISPOSED

Comments: _____

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name

David Pedersen

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

452 Rosecrans Avenue

CITY

Manhattan Beach

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☒ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/25 ACQUIRED ____/____/25 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: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

☐ None

SEE ATTACHED

▶ 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:

____/____/25 ACQUIRED ____/____/25 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: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

☐ 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*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None _____

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

TERM (Months/Years)

_____% ☐ None _____

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

☐ Guarantor, if applicable

Comments: _____

SCHEDULE B

Attachment

CALIFORNIA FORM700

FAIR POLITICAL PRACTICES COMMISSION

Name

David Pedersen

ASSESSOR PARCEL NUMBER OR STREET ADDRESS : 452 Rosecrans Avenue

LIST OF SOURCES OF RENTAL INCOME OF \$10,000 OR MORE
Dimitri Pouliopoulos
Luke Sussman
Nicholas Delgado
Jennifer Montano
Kylie Long
Robert Woo

SCHEDULE D

Income – Gifts

NAME OF SOURCE (Not an Acronym) Aleshire & Wynder ADDRESS (Business Address Acceptable) 2659 Townsgate Rd #226, Westlake Village, CA 91361 BUSINESS ACTIVITY, IF ANY, OF SOURCE Law Office <table> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> <tr> <td>05 / 13 / 25</td> <td>\$ 145.65</td> <td>Dinner at ACWA Conference</td> </tr> <tr> <td>___/___/___</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>___/___/___</td> <td>\$ _____</td> <td>_____</td> </tr> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	05 / 13 / 25	\$ 145.65	Dinner at ACWA Conference	___/___/___	\$ _____	_____	___/___/___	\$ _____	_____	NAME OF SOURCE (Not an Acronym) ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE <table> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> <tr> <td>___/___/___</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>___/___/___</td> <td>\$ _____</td> <td>_____</td> </tr> <tr> <td>___/___/___</td> <td>\$ _____</td> <td>_____</td> </tr> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	___/___/___	\$ _____	_____	___/___/___	\$ _____	_____	___/___/___	\$ _____	_____
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Comments: