FROSTBURG ETHICS COMMISSION

Frostburg Municipal Center 37 Broadway PO Box 440 Frostburg, MD 21532 301-689-6000

DISCLOSURE STATEMENT FOR ELECTED OFFICIALS AND EMPLOYEES

PART 1. IDENTIFYING INFORMATION Name: Donald L Carter Jr_____ Position: ___Commissioner of Finance___ Reporting Year: January 1-December 30, 2024 Home Address: __37 Frost Ave, Frostburg, MD_____ (address for employees not be disclosed under MPIA) PART 2. SIGNATURE AND NOTARIZATION This financial disclosure describes all interests and transactions and matters required to be disclosed by Title 4 of the Maryland Public Ethics Law, as modified by the Frostburg Ethics Commission pursuant to Section 2-103 (h) thereof, with respect to the period indicated and pertaining to the person filing the statement. I hereby make oath or affirm that the contents of this financial disclosure statement are true and correct to the best of knowledge, information and belief. Printed Name of Person Filing: Donald L. Carter, JR Signature of Person Filing: Tunnel Date: April 9, 20 25 Sworn before me this 9 day of April , 2025. Printed Name of Notary Public: Mary E. Gracie Signature of Notary Public: Mary E Skacil My Commission Expires July 29, 2028.

City of Frostburg Disclosure Statement

Please Note: Fill in all schedules. If "none" is applicable, please state.

PART 3. FILING SCHEDULES

SCHEDULE A. Real Property Interests

Report all interests in real property, wherever located (including leasehold interests), held at any time during the reporting period.

LOCATION	TYPE OF PROPERTY	NATURE	CO-OWNERS
Address or legal description. If property is primary personal residence, complete this column only	A. Improved/unimproved and B. Residential/Commercial	Direct/attributable and EXTENT A. Fee simple, lease, etc. B. Solely or jointly (include % if joint)	List any other person having an interest in the property
37 Frost Ave, Frostburg	Improved/Residential	Direct/Jointly 50%	Stacy K. Carter
74 Linden St, Frostburg	Improved/Residential	Direct/Jointly 50%	Stacy K. Carter
76 Linden St, Frostburg	Improved/Residential	Direct/Jointly 50%	Stacy K. Carter
4-6 S. Broadway, Frostburg	Improved/Commercial	Direct/Jointly 50%	Stacy K. Carter
11 W. Main St, Frostburg	Improved/Commercial	Direct/Jointly 50%	Stacy K. Carter
7 W. Man St, Frostburg	Improved/Commercial	Direct/Jointly 50%	Stacy K. Carter
17 W. Main St, Frostburg	Improved/Commercial	Direct/Jointly 50%	Stacy K. Carter
774 Ocean Parkway, Berlin, MD	Improved/Residential	Direct/Jointly 50%	Stacy K. Carter

SCHEDULE B. Gifts

Report all gifts over \$25.00 in value, or totaling more than \$100.00 in value from any one person, received by you during the reporting period, from a person doing business with or regulated by the City of Frostburg. Exclude gifts from immediate family members, other children and parents, and also regulated campaign contributions.

NATURE OF GIFT	VALUE	IDENTIFICATION OF PERSON FROM WHOM	IF GIVEN TO ANOTHER PERSON AT
Indicate if cash; otherwise describe nature of gift.	Indicate dollar amount; otherwise retail value as receipt.	RECEIVED	YOUR DIRECTION, IDENTIFY THAT PERSON
None			

SCHEDULE C. Offices, Directorships, and Salaried Employment

Report all offices, directorships, and salaried employment of yourself, your spouse, or dependent children during the reporting period with any business entity doing business with the City of Frostburg. Do not complete the last column for spouses and children.

NAME & ADDRESS	NATURE	IDENTITY OF PERSON HOLDING POSITION	DATE OFFICE OF EMPLOYMENT
List name and full address of entity.	List title and nature of office or employment	Yourself, spouse, or	BEGAN
	held.	dependent child.	
None			

SCHEDULE D. Liabilities

To be completed by elected officials/candidates only.

Include all liabilities owed by you at any time during the reporting period to any entity doing business with the City. Exclude retail credit accounts; include any mortgages or other encumbrances on any property otherwise reported on this form if owed to an entity doing business with the City of Frostburg. An entity shall not be deemed to be doing business with the City merely because it purchases basic governmental services.

IDENTITY OF PERSON OR	DATE LIABILITY	TERMS	AMOUNT OF LIABILITY	DESCRIPTION OF SECURITY
ENTITY TO WHOM LIABILITY IS OWED	OCCURED Complete only if liability was incurred during the reporting period.	Indicate interest rate and payment schedule of liability.	Complete appropriate block to indicate amount of liability as to the end of the reporting period. If debt is paid in full, put "O" in the first block.	GIVEN FOR LIABILITY
None			\$10,000 or under	
			\$10,001 to \$25,000	
			\$25,001 or greater	

SCHEDULE E. Family members employed by the City.

To be completed by elected officials/candidates only.

List all members of your immediate family (spouse & dependent children) who were employed by the City of Frostburg in any capacity during the reporting period.

NAME OF PERSON	RELATIONSHIP	EMPLOYING CITY AGENCY AND POSITION HELD
None		

SCHEDULE F. Salaried Employment and Business Ownership

To be completed by elected officials/candidates only.

List the name and address of places of salaried employment and business entities wholly or partly owned by you, your spouse, or dependent children, and from which income was earned during the reporting period, whether or not the entity did business with the City of Frostburg.

NAME & ADDRESS OF ENTITY	NATURE OF INTEREST	
	Employment	Ownership
Carter & Roque Real Estate 11 W Main St, Frostburg, MD	Owned 50%	
Carter Hospitality Group 11 W Main St, Frostburg, MD	Owned 25%	
Better Homes and Gardens Real Estate Old Line Group 7 W. Main St, Frostburg, MD	Owned 100%	
Old 40 Trading Company 11 W. Main St, Frostburg, MD	Owned 50%	
Toasted Goat Winery 3 W. First St, Frostburg	Owned 50%	

SCHEDULE G. Other

To be completed by elected officials/candidates only.

This is an optional schedule on which you may include any other information or inter	ests that
you wish to disclose.	