

Conflict of Interest Disclosure Form

The St. Marys Methodist Church Foundation, Inc. depends upon a governing board and staff whose members give freely of their time for the benefit of the community and recognizes that because of the varied interests and involvements of its members, Board service may at times result in situations involving real or apparent conflicts of interest. Believing that service should not be rendered impossible solely by reason of these conflicts, the matter shall be handled through full disclosure of such interests and noninvolvement in any decision in which conflict is in question. The foregoing requirements shall not be construed so as to prevent a Board or staff member from briefly stating his or her position on the matter, nor from answering pertinent questions of other members since his or her knowledge may be of great assistance.

To constructively participate in the governance process while handling conflict of interest situations responsibility, Board and staff members will annually file a conflict of interest survey, disclose conflict situations to other Board members prior to deliberation of the issue in question, and abstain from voting or using his or her personal influence on the issue in question. Minutes of the meeting will reflect the abstention from voting.

Service Provider Disclosure

Please list below any board memberships, corporate ownerships or other associations with any organization *that provides services* to the St. Marys Methodist Church Foundation, in which you or a close relative (parent, sibling, child, grandchild, and any spouses thereof) may have a potential self-dealing or conflict of loyalty situation. Please include any position held within that entity.

Potential Grantee Disclosure

Please list below any board memberships or other associations with any organization that *is or may be considered for a grant* from the St. Marys Methodist Church Foundation, in which you or a close relative (parent, sibling, child, grandchild, and any spouses thereof) may have a potential self-dealing or conflict of loyalty situation. Please include any position held within that entity.

My signature below verifies that I have read and understand the Conflict of Interest Policy of the St. Marys Methodist Church Foundation, Inc. and that the information provided in this disclosure is accurate and complete to the best of my knowledge. Signature: _____ Date: _____

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