



728 Madison Ave, Suite 105
Albany, NY 12208
518-250-6833
<http://pinehillsna.org>

POLICY: Conflicts of Interest Disclosure Policy

Policy Number: 1.1

Adopted: 11/18/2019

— Potential Conflicts Disclosure Statement —

As an Officer or Board member of the Pine Hills Neighborhood Association (the Association), prior to taking office or being seated on the Board of Directors, and annually thereafter, you are required to truthfully, completely and accurately disclose all information requested and to promptly update all such information if factual circumstances change. Volunteers or other persons serving the Association may also be asked or required to complete this Disclosure Statement if the Executive Committee of the Association so directs.

Name of reporting Board member/Officer (print)

Date/Fiscal Year

Please mark 'Yes' or 'No' & provide additional information when requested

Financial Information Return Disclosure

Responses to the following questions are required in order to complete financial information returns annually submitted to the Internal Revenue Service and the Office of the Attorney General.

1. Have you served as an officer, director, trustee, key employee, partner or member of, or hold a thirty-five percent (35%) or greater ownership or beneficial interest, or in the case of a partnership or professional corporation a direct or indirect ownership interest in excess of five percent (5%), in, an entity, which during the most recently completed, or current, fiscal year, had, or are reasonably anticipated to have, a direct, or indirect, business relationship, with the Association?

No

Yes

If Yes, briefly describe below and attach a detailed explanation

2. Have you, individually, or through an entity where you hold a thirty-five percent (35%) or greater ownership or beneficial interest, or in the case of a partnership or professional corporation a direct or indirect ownership interest in excess of five percent (5%), during the most recently completed, or current, fiscal year, had, or are reasonably anticipated to have, a direct, or indirect, business relationship, with any individual who is a current or former Officer of Board member of the Association?

_____ _____
No Yes If Yes, briefly describe below and attach a detailed explanation

3. Do you have a family member, spouse, or partner who, during the most recently completed or current fiscal year, had, or is reasonably anticipated to have, a direct, or indirect, business relationship with the Association?

_____ _____
No Yes If Yes, briefly describe below and attach a detailed explanation

4. Have you, or did you have a family member, spouse, or partner who, during the most recently completed, or current, fiscal year, had, or is reasonably anticipated to have, any transaction with the Association that might reasonably be considered a real or potential conflict of interest pursuant to the Association's Code of Ethics and Conflicts of Interest policy, which has not been otherwise disclosed herein?

_____ _____
No Yes If Yes, briefly describe below and attach a detailed explanation

5. Have you been provided with, properly reviewed and reasonably understand the terms of the Association's current written Code of Ethics and Conflicts of Interest policy?

_____ _____
No Yes If No, attach an explanation

“Independent Director” Assessment Disclosure

In order to qualify as an “Independent Director,” as defined by the New York Not-for-Profit Corporation Law, an Officer or Director must respond in the **negative** to each of the following questions, although failure to respond to all questions in the **negative** shall not necessarily preclude such an Officer or Director from serving on the Board of Directors.

- 1. Are you currently, or have you been within the last three fiscal years, an employee of the Association, or an affiliated organization of the Association?

No Yes If Yes, briefly describe below and/or attach a detailed explanation

- 2. Do you have a spouse, partner or relative who is, or has been within the last three years, an Officer or Board member of the Association, or an affiliate of the Association?

No ____ Yes ____ If Yes, briefly describe below and attach a detailed explanation

- 3. Have you received, within the last three fiscal years, more than ten thousand dollars (\$10,000) in direct compensation from the Association, or an affiliate of the Association, other than reimbursement for out-of-pocket expenses?

No ____ Yes ____ If Yes, briefly describe below and attach a detailed explanation

- 4. Do you have a spouse, partner or relative who has received, within the last three fiscal years, more than ten thousand dollars (\$10,000) in direct compensation from the Association, or an affiliate of the Association, other than reimbursement for out-of-pocket expenses?

No ____ Yes ____ If Yes, briefly describe below and attach a detailed explanation

- 5. Are you a current officer or employee of, or do you have a substantial financial interest in, any entity that has made payments to, or received payments from, the Association or an affiliate of the Association, for property or services in an amount which, within the last three fiscal years, exceeds the lesser of twenty-five thousand dollars (\$25,000) or two percent (2%) of such entity's consolidated gross revenue. For purposes of this question, the payments do not include charitable contributions.

No ____ Yes ____ If Yes, briefly describe below and attach a detailed explanation

6. Do you have a spouse, partner or relative who is a current officer or employee of, or has a substantial financial interest in, any entity that has made payments to, or received payments from, the Association or an affiliate organization for property or services in an amount which, within the last three fiscal years, exceeds the lesser of twenty-five thousand dollars (\$25,000) or two percent (2%) of such entity's consolidated gross revenue. For purposes of this question, the definition the term "payments" does not include charitable contributions.

No ___ Yes ___ If Yes, briefly describe below and attach a detailed explanation

—Certification—

I, the undersigned, certify that I have received, read and understand the Association's Code of Ethics, including its provisions on Conflicts of Interest, any related policies, and this Potential Conflicts Disclosure Statement. I agree that my actions will comply with these policies and that the disclosures made in this document are accurate. I further affirm that neither I, nor related parties, have taken any action that contravenes, or is likely to contravene, the Code of Ethics, Conflicts of Interest and related policies of the Association or otherwise impedes my ability to act as a fiduciary and in the best interests of the Association, except those that may have been disclosed herein.

Printed Name

Title/Role

Signature (reporting board member/officer)

Date