

# The Kringle Cause, Inc.

## Annual Conflict of Interest Disclosure Form

(For Board Members, Officers, and Key Employees)

I, the undersigned, affirm the following:

1. I have received a copy of The Kringle Cause's Conflict of Interest Policy. Found on Page 14 of this document, The Board of Directors Manual.
2. I have read and understand the policy.
3. I agree to comply with the policy.
4. I understand that The Kringle Cause is a charitable organization, and to maintain its federal tax exemption, it must engage primarily in activities that accomplish one or more of its tax-exempt purposes.
5. I hereby disclose the following financial interests, affiliations, or other potential conflicts of interest that may influence my decisions or responsibilities as a board member, officer, or key employee (attach additional pages if necessary):

Disclosure of Potential Conflicts (check all that apply and provide details below if applicable):

- I (or a family member) have a financial relationship with a vendor, contractor, or service provider currently working with The Kringle Cause.
- I serve on the board of or am employed by an organization that may do business with or compete with The Kringle Cause.
- I have no known conflicts to disclose at this time.

If any boxes above are checked, please describe below:

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Signature: \_\_\_\_\_

Position: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_