

Affiliate Conflict of Interest Disclosure Statement



I acknowledge that I have received and read the Conflict of Interest Policy and Procedures of the Montana Community Foundation. I hereby disclose that I or my immediate family (see definition) has (or has had in the past five years) the following relationships that may be a potential conflict of interest:

Non-Profit Organizations

e.g., Board service; significant supporter; employment by an organization that might seek a foundation grant or compete for foundation donors

Name of Organization	Position

Business Interests

e.g., Board membership; ownership or employment by a firm that may seek business from the foundation; real estate interests related to foundation grantees; business partnerships with foundation donors

Name of Organization	Position

Other Significant Involvement

e.g., Membership on foundation boards, bank trust departments, trust companies, active political or advocacy role, elected or appointed official

Name of Organization	Position

I have disclosed all potential conflicts of interest with regard to my decision-making role(s) at MCF and will refrain from any participation in any board or committee action and votes affecting these other interests.

Advisory Committee Member (Print Name)

Date

Advisory Committee Member (Signature)

Please return this form to Shyanne Wallace, Local Community Foundations Program Officer at shyanne@mtcf.org.
For questions, contact Shyanne at shyanne@mtcf.org or (406) 230-2785.