## Director and Officer

## Annual Conflict of Interest Statement

1. Name:

Date:
2. Position:

| Are you a voting Director? | $\square$ Yes | $\square$ No |
| :--- | :--- | :--- |
| Are you an Officer? | $\square$ Yes | $\square$ No |

If you are an Officer, which Officer position do you hold?
3. I affirm the following:

I have received a copy of the PPA Conflict of Interest Policy:(initial)
I have read and understand the Policy:(initial)
I agree to comply with the Policy:(initial)
I understand that PPA is charitable; and, in order to maintain its federal tax exemption, it must engage primarily in activities that accomplish one or more of tax-exempt purposes:(initial)
4. Disclosures:
a. Do you have a financial interest (currentor potential), including a compensation arrangement, as defined in the Conflict of Interespolicy with PPA? $\square$ Yes $\square$ No
i. Ifyes, please describe it:
ii. Ifyes, has the financial interestbeen disclosed, as provided in the Conflictof Interest policy? $\square$ Yes $\square$ No
b. In the past, have you had a financial interest, including a compensation arrangement, as defined in the Conflict of Interespolicywith PPA? $\square$ Yes $\quad \square$ No
i. Ifyes, please describe it, including when (approximately):
ii. Ifyes, has the financial interest been disclosed, as provided in the Conflictof Interest policy?
5. Are you an independent director, as defined in the ConflictofInterest policy?

a. Ifyou are notindependent, why?

Signature:
Date:

Review by Executive Committee:
Date:

