

ACOG FOUNDATION CONFLICT OF INTEREST DISCLOSURE FORM

Instructions: Each year, ACOG Foundation Board of Directors members and volunteers are required to review ACOG Foundation’s Conflict of Interest and Disclosure Policy (“Policy”) and complete this ACOG Foundation Conflict of Interest Disclosure Form (“Form”) to advise ACOG Foundation of any actual, potential or perceived conflicts of interest. You must read the Policy in its entirety before completing and signing this Form. You must disclose any interests that conflict or *may appear to conflict* with the interests of ACOG Foundation, including both financial interests in any dollar amount and subject matter interests. You also must disclose all such interests held by a spouse or domestic partner.

- 1. Do you or your spouse/domestic partner own stock (not including blind trusts, mutual funds, or exchange-traded funds over which the individual has no control) or other financial interests in a Relevant Company?

Yes No

If you answered yes above, please provide a comprehensive explanation: _____

- 2. Are you or your spouse/domestic partner currently receiving any of the following from a Relevant Company:
 - a. Consulting fees
 - b. Royalties
 - c. Honoraria
 - d. In-kind services
 - e. Payments of any kind

Yes No

If you answered yes above, please provide a comprehensive explanation: _____

- 3. Do you or your spouse/domestic partner currently hold any of the following positions at a Relevant Company:
 - a. Board membership, whether executive or advisory position
 - b. Leadership position
 - c. Speakers bureau
 - d. Consulting arrangement
 - e. Advisory arrangement

f. Volunteer or any other position

Yes No

If you answered yes above, please provide a comprehensive explanation: _____

4. Do you or your spouse/domestic partner have an ownership interest or employment in a Relevant Company?

Yes No

If you answered yes above, please provide a comprehensive explanation: _____

5. Do you or your spouse/domestic partner hold a leadership position with another medical organization?

Yes No

If you answered yes above, please provide a comprehensive explanation: _____

6. Do you or your spouse/domestic partner hold any of the following interests in a Relevant Company or with any other company, organization, service, product or other concern that might affect or be affected by ACOG Foundation activities and that were not disclosed above?:

- a. Consultant
- b. Advisor
- c. Speaker
- d. Faculty
- e. Arrangements with medical, scientific, or related publishers to write articles or to provide editorial services
- f. Arrangements with genetic testing companies
- g. Arrangements with technology companies
- h. Medico-legal consulting
- i. Product development
- j. Royalties or patent beneficiary

k. Volunteer position with another nonprofit

Yes No

If you answered yes above, please provide a comprehensive explanation: _____

7. Are you or your spouse/domestic partner currently conducting pharmaceutical investigation, or research projects or support, except those conducted in accordance with federal requirements?

Yes No

If you answered yes above, please provide a comprehensive explanation: _____

8. Have you or your spouse/domestic partner accepted anything of value from a Relevant Company over the last year? If yes, you must disclose the individual and cumulative value of accepted items.

Yes No

If you answered yes above, please provide a comprehensive explanation: _____

9. Do you have any other conflicts or potential conflicts to disclose?

Yes No

If you answered yes above, please provide a comprehensive explanation: _____

By signing below, I hereby certify that I have read and understand the ACOG Foundation Conflict of Interest and Disclosure Policy, and that the above information is accurate and comprehensive to the best of my knowledge. I certify that, except as disclosed above, neither I nor my spouse or

domestic partner have any material interests, financial or otherwise, that might create a conflict between the personal or private interests of myself or my spouse or domestic partner and the interests of ACOG Foundation.

I further understand and hereby certify that I will not use my ACOG Foundation status for external personal gain, whether financial, professional or otherwise.

I understand that, as stated in the Policy, these disclosures may be shared with certain ACOG Foundation staff and volunteers as necessary to address any conflicts of interest in my service to the organization.

Signature:

Date:

Name:

ACOG Foundation Position:
