

**“Conflicts of Interest”
MVDS Annual Conflict of Interest and Compensation
Disclosure Statement**

I, _____, as a voting member of the Board of Directors (“BOD”) for Mountain Valley Developmental Services (“MVDS”), affirm that my responses to the following questions are true and correct for the current fiscal reporting year. If my response to any of the following is “False,” I am requested to provide further information for disclosure to MVDS.

1. I was not compensated as an officer or other employee of MVDS. (Compensation is defined as all forms of cash and non-cash payments of benefits provided in exchange for services. Such compensation is reported on Form W-2 or Form 1099-MISC.)
TRUE _____ FALSE _____

2. No member of my family was compensated as an employee of MVDS.
TRUE _____ FALSE _____
IF TRUE, COMMENT: _____

3. I was not compensated by a related organization to MVDS. (Activities of my home employer do not constitute an organization related to MVDS, as defined by the IRS, unless that organization maintains consolidated financial statements with MVDS).
TRUE _____ FALSE _____

4. Neither I nor any member of my family was involved in a transaction with MVDS required to be reported on Schedule L, Form 990, which addresses these areas:
 - Excess benefit transactions TRUE _____ FALSE: _____
 - Loan to or from MVDS at the end of reporting year TRUE _____ FALSE: _____
 - Grant or other assistance to me or someone related to me TRUE _____ FALSE: _____

5. I did not have a direct or indirect business relationship with MVDS through ownership of more than 35% of any entity conducting business with MVDS.
TRUE _____ FALSE _____

6. I did not receive or accrue compensation from any unrelated organization for services I rendered to MVDS.
TRUE _____ FALSE _____

7. MVDS did not provide for me:
- | | | |
|---|------------|-------------|
| - First class or charter travel | TRUE _____ | FALSE _____ |
| - Travel for companions | TRUE _____ | FALSE _____ |
| - Tax indemnification and gross-up payments | TRUE _____ | FALSE _____ |
| - Discretionary spending account(s) | TRUE _____ | FALSE _____ |
| - Housing allowance or residence for personal use | TRUE _____ | FALSE _____ |
| - Payments for business use of personal residence | TRUE _____ | FALSE _____ |
| - Health or social club dues or initiation fees | TRUE _____ | FALSE _____ |
| - Personal services (eg. maid, chauffeur, chef) | TRUE _____ | FALSE _____ |

Note: Ordinary MVDS business expenses which have been incurred and documented by me, and reimbursed by MVDS, are not subject to disclosure on the Form 990.

7. I did not give to or use gifts from persons who do or seek to do business with MVDS.
TRUE _____ FALSE _____

8. I did not use gifts or other incentives to improperly influence relationships or business outcomes for MVDS or its members.
TRUE _____ FALSE _____

9. I did not accept gifts or gratuities from any contractor, vendor, patient, consultant or any other entity doing business with MVDS that are given with the purpose of influencing a professional relationship.
TRUE _____ FALSE _____

10. I also serve on the Board of Directors of the following organizations which may give rise to a possible conflict of interest (please list all organizations): _____

MVDS Board Director Signature: _____

Date: _____