

**STUDENT ORCHESTRAS OF GREATER OLYMPIA
CONFLICT OF INTEREST POLICY (approved 10 10 2018)**

Directors are expected to use good judgment, to adhere to high ethical standards, and to conduct their affairs in such a manner as to avoid any actual or potential conflict between the personal interests of a Director or Officer and those of SOGO. A conflict of interest exists when a Director's loyalties or actions are divided between the interests of SOGO and the Director's interests. Directors should avoid both the fact and the appearance of a conflict of interest.

A voting member of the Board who receives compensation, directly or indirectly, from SOGO for services is precluded from voting on matters pertaining to that member's compensation.

Each Director shall annually sign a statement that affirms he/she:

- (a) Has received a copy of the conflict of interest policy,
- (b) Has read and understands the policy,
- (c) Has agreed to comply with the policy, and
- (d) Understands that SOGO is a charitable organization and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of its tax-exempt purposes.

If the Board finds that a Director has failed to disclose an actual or possible conflict of interest, the Board shall give the Director an opportunity to explain the alleged failure to disclose.

After hearing the Director's response and further investigation, the Board shall take appropriate disciplinary and corrective action.

**STUDENT ORCHESTRAS OF GREATER OLYMPIA
CONFLICT OF INTEREST POLICY CERTIFICATION**

The undersigned hereby acknowledges that the undersigned:

- (a) Has received a copy of the conflict of interest policy,
- (b) Has read and understands the conflict of interest policy,
- (c) Has agreed to comply with the conflict of interest policy, and
- (d) Understands that in order for SOGO to maintain its federal tax exemption as a charitable organization, it must engage primarily in activities that accomplish one or more of its tax-exempt purposes.

Please check one of the following boxes:

- I have no conflicts or potential conflicts to disclose.
- I have the following conflicts or potential conflicts to disclose (please describe any relevant organizational, professional or business affiliations as well as financial interests):

Dated: MM/DD/YYYY _____

Title: (ex. Board member) _____

Signature: _____

Print Name: _____