Financial Interest Disclosure
and Annual Conflict of Interest Attestation Form

Financial Interest Disclosure Form
American Kidney Fund (AKF) Board of Trustees and Senior Staff

Terms used in this form, including “financial interest,” “compensation,” “family,” “entity,” and “transaction” have the meanings ascribed to them in Article IV of AKF’s Bylaws, “Conflict of Interest Policy.” For the avoidance of doubt, a person shall not be deemed to have a “financial interest” in a dialysis company or an entity with which AKF has or is negotiating a transaction or arrangement if the person’s sole relationship with such dialysis company or such entity is through an investment in a mutual fund or exchange-traded fund that maintains an ownership or investment interest in such dialysis company or entity. A copy of Section IV of AKF’s Bylaws, “Conflict of Interest Policy” (the “Policy”) is attached as Exhibit A. Please take a moment to review the Policy prior to completing this form.

1. Within the past 12 months, have you, directly or indirectly, through business, investment or, to your knowledge, family, had an actual or potential ownership or investment interest in any entity with which AKF has a transaction or arrangement, or is negotiating a transaction or arrangement? If so, please list the names of those businesses.

2. Within the past 5 years, have you, directly or indirectly, through business, investment or, to your knowledge, family, had any financial interest in a dialysis company? If so, please list the names of those businesses.

3. As to Trustees, within the past 12 months, have you, directly or indirectly, through business, investment or, to your knowledge, family, had a compensation arrangement with AKF for services provided to AKF (excluding reimbursement of out-of-pocket business expenses) or with any entity or individual with which AKF has a transaction or arrangement? If so, please describe below the type of service and amount of fees or compensation received during the prior 12 months.

4. As to Senior Staff, within the past 12 months, have you, directly or indirectly, through business, investment or, to your knowledge, family, had a compensation arrangement with any entity or individual with which AKF has a transaction or arrangement? If so, please describe below the type of service and amount of fees or compensation received during the prior 12 months.

5. Within the past 12 months, have you, directly or indirectly, through business, investment or, to your knowledge, family, or any institution with which you are employed by (Trustees) or affiliated with (Trustees and Senior Staff), applying for or receiving grant funding from AKF? If so, please list below the institutions and nature of your affiliation or details of your relationship.

6. Within the past 12 months, have you, through business, investment or, to your knowledge, family, directly or indirectly, received monetary compensation for providing editorial or advisory services to AKF or its publications? If so, please explain the nature and amount of compensation.
Annual Conflict of Interest Attestation
American Kidney Fund Board of Trustees and Senior Staff

With respect to AKF’s Conflict of Interest Policy, set forth in Article IV of its Bylaws (the “Policy”), by signing this form I affirm that I:

i) Received a copy of the Policy;
ii) Read and understand the Policy;
iii) Agree to comply with the Policy;
iv) Have disclosed in writing any financial interest in the Financial Interest Disclosure Form, above; and,
v) Understand AKF is a charitable organization, and that to maintain federal tax exemption AKF must primarily engage in activities which accomplish its tax-exempt purposes, and that I, when acting as a Trustee, officer, or employee of AKF subject to this Policy, am responsible for ensuring AKF is faithful to its charitable purposes.

Print Name ................................................. Role at AKF .................................................

Signature .................................................. Date .........................................................