SAM Director and Officer	School Administrators of
Annual Conflict of Interest Statement	M NA THE DEET O
$\sim$	
1. Name: Dan Kimzey	
2. Position:  Are you an Officer? Yes No  If you are an Officer, indicate which position you hold.	MASSP/SAMB
3. Laffirm the following:	
I have received a copy of the SAM Conflict of In I agree to comply with the policy.  I understand that SAM is charitable and in order exemption it must engage primarily in activities more of tax-exempt purposes.	to maintain its federal toy
4. Disclosures:	
<ul> <li>Do you have a financial interest (current or potential), including arrangement, as defined in the Conflict of Interest policy with</li> </ul>	ng a compensation SAM? Yes No
i. If yes please describe:	
ii. If yes, has the financial interest been disclosed, as Conflict of Interest policy? Yes No	provided in the
b. In the past, have you had a financial interest, including a comp defined in the Conflict of Interest policy with MQEC? Yes	pensation arrangement, as
i. If yes, please describe including approximate dates	3:
NA	
ii. If yes, has the financial interest been disclosed, as possible of Interest policy? Yes No	provided in the Conflict
5. Are you an independent director, as defined in the Conflict of	Interest policy Vos No
a. If you are not independent, please explain.	Tes No
	/
Signature of Director  Date: 3/8/	2018
Date of Review by Executive Board:	

A A A A A A
1. Name: Rick DUNCAN
2. Position:  Are you an Officer? Yes No  If you are an Officer, indicate which position you hold. MASS FEDERAL RELATIONS
3. I affirm the following:
I have received a copy of the SAM Conflict of Interest policy.  I agree to comply with the policy.  I understand that SAM is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of tax-exempt purposes.
4. Disclosures:
a. Do you have a financial interest (current or potential), including a compensation arrangement, as defined in the Conflict of Interest policy with SAM? Yes No
i. If yes, please describe:
ii. If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No
b. In the past, have you had a financial interest, including a compensation arrangement, as defined in the Conflict of Interest policy with MQEC? Yes No
i. If yes, please describe including approximate dates:
ii. If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No
5. Are you an independent director, as defined in the Conflict of Interest policy? Yes No
a. If you are not independent, please explain.
Date:
Date of Review by Executive Board:



1. Name: Josin Housi	. 7 2 5
2. Position:  Are you an Officer? Yes No  If you are an Officer, indicate which position you hold.  MASS  Parson	L
3. I affirm the following:	
I have received a copy of the SAM Conflict of Interest policy.  I agree to comply with the policy.  I understand that SAM is charitable and in order to maintain its federal exemption it must engage primarily in activities which accomplish on more of tax-exempt purposes.	al tax e or
4. Disclosures:	
a. Do you have a financial interest (current or potential), including a compensation arrangement, as defined in the Conflict of Interest policy with SAM? Yes No	
i. If yes, please describe:	
ii. If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No	3
b. In the past, have you had a financial interest, including a compensation arrangemen defined in the Conflict of Interest policy with SAM? Yes No	t, as
i. If yes, please describe including approximate dates:	
	_
<ol> <li>If yes, has the financial interest been disclosed, as provided in the Confliction of Interest policy? Yes No</li> </ol>	ct
5. Are you an independent director, as defined in the Conflict of Interest policy? Yes	No
a. If you are not independent, please explain.	
Date: 6/15/12	
Date of Review by Executive Board:	



1.	Name:	Jon Komen
2.	Position: Are you a If you are	an Officer? (Yes) No an Officer, indicate which position you hold. Pros. Elect of Sam  following:  Past less. of Macross
3.	I affirm the	following: Past-less of MAErnse
	He He	I have received a copy of the SAM Conflict of Interest policy.  I agree to comply with the policy.  I understand that SAM is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of tax-exempt purposes.
4.	Disclosures:	
	a. Do you ha	ve a financial interest (current or potential), including a compensation ent, as defined in the Conflict of Interest policy with SAM? Yes No
	i.	If yes, please describe:
	ii.	If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No
	h T., 41,	have and 1 - 1 - 5 1 - 1

- i. If yes, please describe including approximate dates:
- ii. If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No

Are you an independent director, as defined in the Conflict of Interest policy?	Yes (	No)	)
	Are you an independent director, as defined in the Conflict of Interest policy?	Are you an independent director, as defined in the Conflict of Interest policy? Yes	Are you an independent director, as defined in the Conflict of Interest policy? Yes No

Date of Review by Executive Board: 06/15/17



1. Name: JOEC T- GRAVES	
2. Position:  Are you an Officer? No  If you are an Officer, indicate which position you hold. MASS? Prosider.	1
3. I affirm the following:	
I have received a copy of the SAM Conflict of Interest policy.  I agree to comply with the policy.  I understand that SAM is charitable and in order to maintain its federal ta exemption it must engage primarily in activities which accomplish one or more of tax-exempt purposes.	ıx r
4. Disclosures:	
a. Do you have a financial interest (current or potential), including a compensation arrangement, as defined in the Conflict of Interest policy with SAM? Yes No	
i. If yes, please describe:	
<ol> <li>If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No</li> </ol>	
b. In the past, have you had a financial interest, including a compensation arrangement, a defined in the Conflict of Interest policy with SAM? Yes No	ıs
i. If yes, please describe including approximate dates:	
ii. If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No	
5. Are you an independent director, as defined in the Conflict of Interest policy? Yes	No
a. If you are not independent, please explain.	
Date: 6-15-17	
Date of Review by Executive Board:	

2. Position:

School Administrators of M o n t a n a
MASSP Project Elec
of Interest policy.  der to maintain its federal tax
ies which accomplish one or
uding a compensation vith SAM? Yes No
, as provided in the
ompensation arrangement, as
lates:
, as provided in the Conflict
t of Interest policy? Yes No
5/17

	Are you are	n Officer? Yes No an Officer, indicate which position you hold	MASSP	Praidert	EL
3.	I affirm the f	following:			
	PH	I have received a copy of the SAM Conflict of I agree to comply with the policy. I understand that SAM is charitable and in or exemption it must engage primarily in activit more of tax-exempt purposes.	rder to mainta	ain its federal ta	
4.	Disclosures:				
		ve a financial interest (current or potential), including as defined in the Conflict of Interest policy versions.			
	i.	If yes, please describe:			
	ii.	If yes, has the financial interest been disclosed Conflict of Interest policy? Yes No	l, as provided	l in the	
		have you had a financial interest, including a conflict of Interest policy with SAM? Yes		arrangement, a	S
	i.	If yes, please describe including approximate of	dates:		
	ii.	If yes, has the financial interest been disclosed of Interest policy? Yes No	, as provided	in the Conflict	
5.	Are you an in	dependent director, as defined in the Conflic	t of Interest	policy? Yes (1	No
	a. If you are n	ot independent, please explain.			
7 Sign	nature of Direct	Date: 6//	15/17		
Dat	e of Review by	Executive Board:			

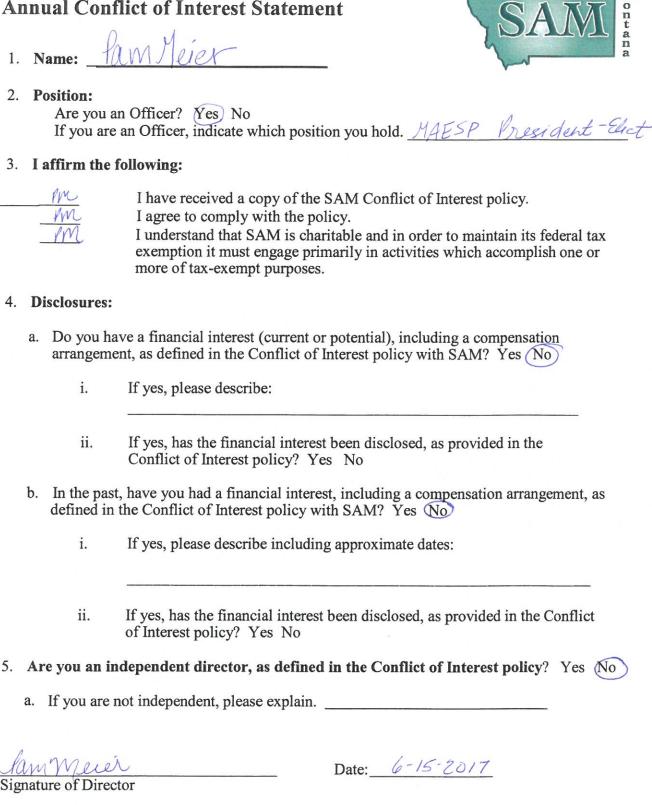


-aune Barra 2. Position: Are you an Officer? Yes No If you are an Officer, indicate which position you hold. SAM Pros Euch 3. I affirm the following: I have received a copy of the SAM Conflict of Interest policy. I agree to comply with the policy. I understand that SAM is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of tax-exempt purposes. 4. Disclosures: a. Do you have a financial interest (current or potential), including a compensation arrangement, as defined in the Conflict of Interest policy with SAM? Yes No i. If yes, please describe: ii. If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No b. In the past, have you had a financial interest, including a compensation arrangement, as defined in the Conflict of Interest policy with SAM? Yes (No i. If yes, please describe including approximate dates: ii. If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No 5. Are you an independent director, as defined in the Conflict of Interest policy? Yes No a. If you are not independent, please explain. Date: 6/15//

Date of Review by Executive Board:



1. Name: Dale Olinger
2. Position:  Are you an Officer? Yes No  If you are an Officer, indicate which position you hold.
3. I affirm the following:
I have received a copy of the SAM Conflict of Interest policy.  I agree to comply with the policy.  I understand that SAM is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of tax-exempt purposes.
4. Disclosures:
a. Do you have a financial interest (current or potential), including a compensation arrangement, as defined in the Conflict of Interest policy with SAM? Yes No
i. If yes, please describe:
ii. If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No
b. In the past, have you had a financial interest, including a compensation arrangement, as defined in the Conflict of Interest policy with SAM? Yes No
i. If yes, please describe including approximate dates:
ii. If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No
5. Are you an independent director, as defined in the Conflict of Interest policy? Yes No
a. If you are not independent, please explain.
Signature of Director  Date: 6 15 17
Date of Review by Executive Board:



School Administrators of

Date of Review by Executive Board:



1. Name: Paul Furthmy	
2. Position:  Are you an Officer? Ves No If you are an Officer, indicate wh	ich position you hold. Past Preside t
3. I affirm the following:	
I agree to comply wi	M is charitable and in order to maintain its federal tax gage primarily in activities which accomplish one or
4. Disclosures:	
a. Do you have a financial interest (carrangement, as defined in the Con	current or potential), including a compensation inflict of Interest policy with SAM? Yes No
i. If yes, please describe	
:: If 1 . 1 . C	
ii. If yes, has the financia Conflict of Interest po	ll interest been disclosed, as provided in the licy? Yes No
b. In the past, have you had a financi defined in the Conflict of Interest	al interest, including a compensation arrangement, as policy with SAM? Yes No
i. If yes, please describe	including approximate dates:
ii. If yes, has the financial of Interest policy? Yes	interest been disclosed, as provided in the Conflict
5. Are you an independent director, as	defined in the Conflict of Interest policy? Yes No
a. If you are not independent, please of	explain
Signature of Director	Date: 6-15-17
Date of Review by Executive Board:	

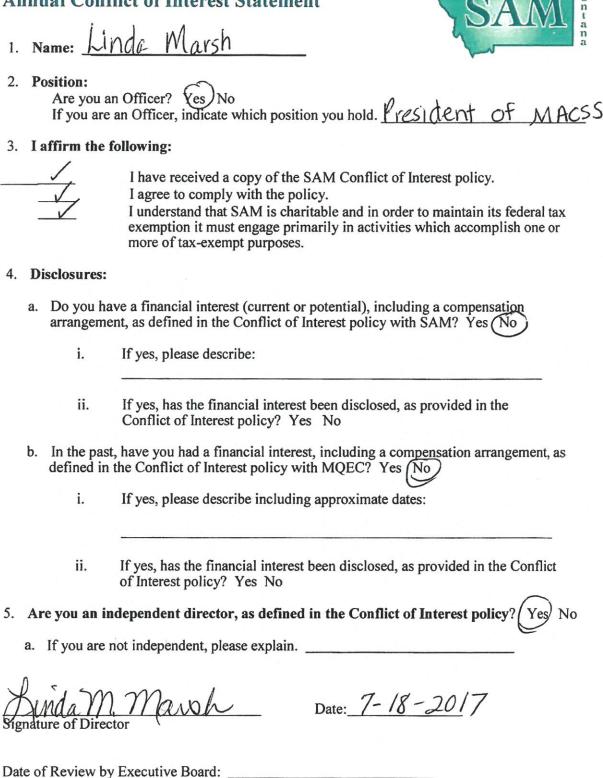


1.	Name: La	nce Boyd
2.	Are vou a	n Officer? Yes No an Officer, indicate which position you hold. MAKMSP President
3.	I affirm the	following:
	<u> </u>	I have received a copy of the SAM Conflict of Interest policy.  I agree to comply with the policy.  I understand that SAM is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of tax-exempt purposes.
4.	Disclosures:	
		we a financial interest (current or potential), including a compensation ent, as defined in the Conflict of Interest policy with SAM? Yes No
	i.	If yes, please describe:
	ii.	If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No
		t, have you had a financial interest, including a compensation arrangement, as the Conflict of Interest policy with SAM? Yes No
	i.	If yes, please describe including approximate dates:
	ii.	If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No
5.	Are you an ir	dependent director, as defined in the Conflict of Interest policy? Yes
	a. If you are	not independent, please explain.
Sig	Jane (M)	Date: 6/15/17

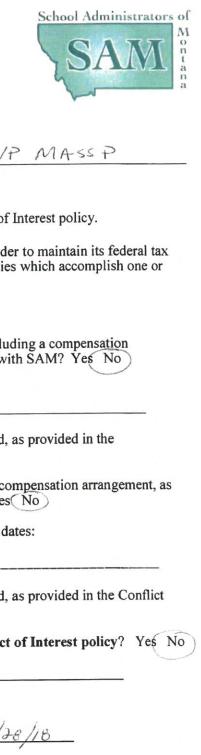
Date of Review by Executive Board:



1. Name: Chaig Changoro
2. Position:  Are you an Officer? Yes No  If you are an Officer, indicate which position you hold. VILE PRESTOWN MALMER
3. I affirm the following:
I have received a copy of the SAM Conflict of Interest policy.  I agree to comply with the policy.  I understand that SAM is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of tax-exempt purposes.
4. Disclosures:
a. Do you have a financial interest (current or potential), including a compensation arrangement, as defined in the Conflict of Interest policy with SAM? Yes No
i. If yes, please describe:
ii. If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No
b. In the past, have you had a financial interest, including a compensation arrangement, as defined in the Conflict of Interest policy with MQEC? Yes No.
i. If yes, please describe including approximate dates:
ii. If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No
5. Are you an independent director, as defined in the Conflict of Interest policy Yes No
a. If you are not independent, please explain.
Date: 2/28/2018  Date of Review by Executive Board:



1. Name: Jahr Haynes



2.	Position:  Are you an Officer? Yes No  If you are an Officer, indicate which position you hold. VP MASS P				
3.	I affirm the following:				
	0514 0514	I have received a copy of the SAM Conflict of Interest policy.  I agree to comply with the policy.  I understand that SAM is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of tax-exempt purposes.			
4. Disclosures:					
	a. Do you have a financial interest (current or potential), including a compensation arrangement, as defined in the Conflict of Interest policy with SAM? Yes No				
	i.	If yes, please describe:			
	ii. If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No				
	b. In the past, have you had a financial interest, including a compensation arrangement, as defined in the Conflict of Interest policy with MQEC? Yes No				
	i.	If yes, please describe including approximate dates:			
	ii.	If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No			
5.	Are you an in	dependent director, as defined in the Conflict of Interest policy? Yes No			
	a. If you are i	not independent, please explain.			
	gnature of Direc				
Da	ate of Review by	Executive Board:			

Annual Connect of Interest Statement	N			
SAM	n t a n a			
2. Position:  Are you an Officer? Yes No  If you are an Officer, indicate which position you hold.				
3. I affirm the following:				
I have received a copy of the SAM Conflict of Interest policy.  I agree to comply with the policy.  I understand that SAM is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of tax-exempt purposes.				
4. Disclosures:				
a. Do you have a financial interest (current or potential), including a compensation arrangement, as defined in the Conflict of Interest policy with SAM? Yes No				
i. If yes, please describe:				
ii. If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No				
b. In the past, have you had a financial interest, including a compensation arrangement, as defined in the Conflict of Interest policy with MQEC? Yes No				
i. If yes, please describe including approximate dates:				
ii. If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No				
5. Are you an independent director, as defined in the Conflict of Interest policy? Yes No				
a. If you are not independent, please explain.				
Signature of Director				
Date of Review by Executive Board:				

1.	Name:	Cal Letchum			
		V			
2.	Position:	" Officer? Vos No			
		n Officer? Yes No an Officer, indicate which position you hold.			
	-				
3.	I affirm the	following:			
		I have received a copy of the SAM Conflict of Interest policy.			
		I agree to comply with the policy.			
		I understand that SAM is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of tax-exempt purposes.			
4.	Disclosures:				
	a. Do you have a financial interest (current or potential), including a compensation arrangement, as defined in the Conflict of Interest policy with SAM? Yes No				
	i.	If yes, please describe:			
	ii.	If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No			
	b. In the past, have you had a financial interest, including a compensation arrangement, as defined in the Conflict of Interest policy with SAM? Yes No				
	i.	If yes, please describe including approximate dates:			
	ii.	If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No			
_		No. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
5.	Are you an ii	ndependent director, as defined in the Conflict of Interest policy? Yes No			
	a. If you are	not independent, please explain.			
		Date:			
Sig	mature of Direc	ctor			
Da	te of Review by	y Executive Board:			

1.	N	ame:R	Casaro Laurence		
2.	Po		n Officer? Yes 👀 an Officer, indicate which position you hold.		
3.	I	affirm the f	ollowing:		
- 1É	5S	X X (6.5	I have received a copy of the SAM Conflict of Interest policy.  I agree to comply with the policy.  I understand that SAM is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of tax-exempt purposes.		
4.	Di	isclosures:			
	a. Do you have a financial interest (current or potential), including a compensation arrangement, as defined in the Conflict of Interest policy with SAM? Yes No				
		i.	If yes, please describe:		
		ii.	If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No		
	b.		, have you had a financial interest, including a compensation arrangement, as the Conflict of Interest policy with SAM? Yes No		
		i.	If yes, please describe including approximate dates:		
		ii.	If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No		
5.	Ar	e you an in	dependent director, as defined in the Conflict of Interest policy? Yes No		
	a.	If you are n	not independent, please explain.		
Sign	/Z	ure of Direct	Date: 6-15-17		
Date	e o	f Review by	Executive Board:		



1.	Name:	aren Underwood			
2.	Position:  Are you an Officer? Yes No bd. Member WASE Presider  If you are an Officer, indicate which position you hold.				
3.	I affirm the following:				
		I have received a copy of the SAM Conflict of Interest policy.  I agree to comply with the policy.  I understand that SAM is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of tax-exempt purposes.			
4.	Disclosures:				
	a. Do you have a financial interest (current or potential), including a compensation arrangement, as defined in the Conflict of Interest policy with SAM? Yes				
	i.	If yes, please describe:			
	ii.	If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No			
	b. In the past, have you had a financial interest, including a compensation arrangement, as defined in the Conflict of Interest policy with SAM? Yes No				
	i.	If yes, please describe including approximate dates:			
	ii.	If yes, has the financial interest been disclosed, as provided in the Conflict of Interest policy? Yes No			
5.	Are you an in	dependent director, as defined in the Conflict of Interest policy? Yes No			
	a. If you are	not independent, please explain.			
Sig	gnature of Direct	Date: <u>6/15/17</u>			
Da	te of Review by	y Executive Board:			



1.	Name: PAUL Cu	LIBER IST		1	~	n a
2.	Position:  Are you an Officer? Y  If you are an Officer, in	es No dicate which position	on you hold.	MASSP	VP	€ lec
3.	I affirm the following:					
	I agree to c I understan exemption	ived a copy of the Somply with the pole d that SAM is charit must engage primal-exempt purposes.	icy. table and in	order to maintai	n its fede	
4.	Disclosures:					
	a. Do you have a financial interest (current or potential), including a compensation arrangement, as defined in the Conflict of Interest policy with SAM? Yes No					
	i. If yes, please	e describe:				
		ne financial interest nterest policy? Yes		ed, as provided	in the	
	b. In the past, have you had a financial interest, including a compensation arrangement, as defined in the Conflict of Interest policy with SAM? Yes No					ient, as
	i. If yes, please	e describe including	gapproximate	e dates:		
		e financial interest blicy? Yes No	been disclose	ed, as provided i	n the Co	nflict
5.	Are you an independent di	rector, as defined	in the Confl	ict of Interest p	olicy?	Yes No
	a. If you are not independent	nt, please explain.				
Sig	pature of Director		Date: 6	115/2017	7	
Dat	te of Review by Executive Bo	oard:				