

## Annual Conflict Disclosure Form

15/March/2019

I have read the CFA Society Chile's Conflict of Interest Policy and agree to comply fully with its terms and conditions at all times during my service as a Covered Individual of the CFA Society Chile. If I become aware of any actual or potential conflicts of interest at any time following my submission of this form, or if the information provided below becomes inaccurate or incomplete, I will promptly notify the Board of Directors in writing:

Disclosure of actual or potential conflicts of interest:

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1. Do you receive compensation as an Officer, Director, committee member, task force member or key employee of CFA Society Chile?	__ Yes	__ No
2. Other than reimbursement of reasonable expenses, have you received or do you expect to receive more than <b>USD 2,000</b> per year from CFA Society Chile for services provided to CFA Society Chile?	__ Yes	__ No
3. Have you received or do you expect to receive any material financial benefit from CFA Society Chile in addition to or apart from the benefits described in questions 1 and 2 above?	__ Yes	__ No
4. Does any family member receive compensation or material financial benefit from CFA Society Chile?	__ Yes	__ No
5. Do you have a family or business relationship with any current or former Covered Individual of CFA Society Chile?	__ Yes	__ No

If you answered **yes** to any of the above, please explain below.

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Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date