



EXHIBIT A Annual Disclosure Statement

I have carefully read the General Conflict of Interest Policy, and in signing this Disclosure Statement, I have considered literal policy and its intent. Except as identified below, I do not, to the best of my knowledge, have a conflict of interest that may be seen as competing with the interests or concerns of The Morgridge Institute for Research, Inc. (the "Institute"), nor does any related party, or any organization to which I (or my related parties) have an allegiance, have such a competing concern.

I certify that the information on this form is correct and complete to the best of my knowledge. If any situation should arise in the future that may create a conflict of interest, I will promptly and fully disclose the circumstances to the Institute's Conflict of Interest Advisory Committee.

Name: _____

Signature: _____

Date: _____

In the space below, please list all organizations in which you or any related parties hold a position as trustee, director, general manager, or principal officer, or in which you or any related parties have a financial interest, if those organizations engage in business transactions with the Institute or compete directly with the Institute, or if you anticipate that they will do so in the coming year. LIST ONLY THOSE ORGANIZATIONS WITH RESPECT TO WHICH CONFLICTS HAVE ARISEN OR ARE LIKELY TO ARISE. Enter "N/A" if you have no organizations to report.

Name of Organization	Nature of Your Interest in the Organization
_____	_____
_____	_____
_____	_____
_____	_____