

Attachment K

EXHIBIT A

UNITED STATES EQUESTRIAN FEDERATION, INC.

DISCLOSURE AND AFFIRMATION STATEMENT

Disclosure

I have read carefully and fully understand the attached Code of Ethics and Conflict of Interest Policies of the United States Equestrian Federation, Inc. (USEF).

I am aware that if, because of any relationships, positions, or circumstances concerning me, I may have or appear to have a potential conflict of interest, I am required to list such relationships, positions, or circumstances on the annexed Exhibit B and, if applicable, C as the case may be, and to return the appropriate completed Exhibit(s) with this Disclosure and Affirmation Statement.

I understand that if I have any question in my mind whether I may have a potential conflict of interest, I should disclose that interest to USEF on the annexed Exhibit B and, if applicable, C. Any questions concerning USEF's Conflict of Interest Policy shall be referred to the USEF General Counsel for referral to the appropriate reviewing body.

Affirmation

I hereby affirm that I have received a copy of the USEF Code of Ethics and Conflict of Interest Policy (collectively the "Policies"), that I have read and understand the Policies, and that I agree to comply with the Policies. I further understand the duty to list all individuals, businesses and/or other entities that create or represent a potential conflict of interest on Exhibit B and, if applicable, C and to promptly update and amend Exhibit B and, if applicable, C.

I affirm that I have a continuing obligation to update Exhibit B and, if applicable, C.

Signature

Print Name

Date

EXHIBIT B

UNITED STATES EQUESTRIAN FEDERATION, INC.

CONFLICT OF INTEREST DISCLOSURE STATEMENT

For all but Selection Matters

This Disclosure Statement must be submitted and updated as often as necessary to USEF. Refusal to provide the requested information or providing incomplete or inaccurate information may result in removal from office or Board membership, committee membership or employment.

1. If you or any member of your immediate family is an officer, partner, director, trustee, owner or employee of any person or any entity which does business with USEF, please list the name and address of the entity(ies) and the nature of your relationship with said person or entity(ies), and describe the dealings. If none, please state "none."

2. If you or any member of your immediate family holds an ownership interest in a closely-held company or other business entity, or at least a five (5%) percent ownership interest in any public company which does business with USEF, please list the name and address of the entity(ies), the nature of your relationship with said person or entity(ies) and describe the dealings. If none, please state "none."

3. If you have any reason to believe that any of the persons or entities with which you or immediate members of your family are affiliated may have business dealings with USEF in the future, please list those entities and the nature of such dealings. If none, please state "none."

4. Are you an employee or employer of another USEF Director or do you have any other business dealings or financial dealings with another USEF Director or any company or concern with which that Director is involved?

_____ Yes _____ No

If you have answered yes to the above, please provide the details as follows.

If you or any member of your immediate family is an officer, partner, trustee, owner or part- or full-time employee (contractual or otherwise) of a Director of USEF or the entity owned or in which said Director has at least a five (5%) percent ownership interest, please list the name and address of the Director, the nature of your relationship with said Director(s) and describe the dealings. If none, please state "none."

5. If there is any relationship or matter not disclosed above which might be perceived to compromise your obligations to USEF under its Conflict of Interest Policy or which may raise questions of a conflict between your duty and loyalty to USEF, your loyalty to any other entity and/or your economic self-interest, please indicate here what that relationship or matter is. If none, please state "none."

6. Are you an officer, director or employee of any other amateur sports organization that is recognized as a national governing body by the United States Olympic Committee? If not, please state "no."

Signature

Print Name

Date

EXHIBIT C

UNITED STATES EQUESTRIAN FEDERATION, INC.

CONFLICT OF INTEREST DISCLOSURE STATEMENT FOR SELECTIONS

This form must be completed by all members of the International High Performance Committees and all members of any other Committees involved in selection matters.

Please list all relationships within the selection period with individuals, businesses and/or other entities that may create a conflict of interest or which you believe might create the appearance of a conflict of interest with any applicant horse, owner or rider or members of their families (attach additional sheets as necessary to make the disclosure complete). Please review the Conflict of Interest Statement attached to the Selection Criteria for additional information.

If you have no such relationships, please indicate “none.”

	Individual/Entity with whom a conflict exists or may exist. EXAMPLE: Jane Rider, applicant	Relationship to the conflicting Individual/Entity and Nature of conflict. EXAMPLE: My wife is her trainer.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

I certify that I have disclosed on this list and any attachments hereto any and all situations that may constitute conflicts of interest or give the appearance of a potential conflict of interest in connection with the selection criteria for the Para Equestrian Dressage Selection Process for the 2016 World Para Driving Championships for Singles.

Signature

Print Name

Date