



Trustee Name: _____

1. Do you have a family relationship or business relationship with any other officer, director, and trustee or key employee?

No _____

Yes _____

If you answered yes to question #1, please describe the relationship.

- 2a. During the tax year 1.1.17 to 12.31.17 did you have a direct business relationship with Bridge the Gap – SYNGAP Education and Research Foundation (other than as an officer, director, trustee or employee) or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively) with other person(s) who are officers, directors, trustees, key employees or highest compensated employees of Bridge the Gap – SYNGAP Education and Research Foundation.

No _____

Yes _____

If you answered yes to question #2a, please describe the relationship.

- 2b. During the tax year 1.1.17 to 12.31.17 did you have a family member who had a direct or indirect business relationship with Bridge the Gap – SYNGAP Education and Research Foundation?

No _____

Yes _____

If you answered yes to question #2b, please describe the relationship.

- 2c. During the tax year 1.1.17 to 12.31.17 did you serve as an officer, director, trustee, key employee, partner or member of an entity (or a shareholder of a professional corporation) doing business with the organization?

No _____

Yes _____

If you answered yes to question #2c, please describe the relationship.

Date: _____ Signature: _____