

**Disclosure of Possible Conflict of Interest**

Employee's name (first, middle, last)

Department

Supervisor

**Explanation**

The Church of Jesus Christ of Latter-day Saints and its affiliated entities conduct business affairs ethically and legally. Employees are expected to abide by the letter and spirit of the law. Employees are responsible for ensuring that they do not engage in activities that are or could be considered a conflict with the interests of their employer. To assist employees in fulfilling this responsibility, the employer requires each employee to report to his or her supervisor any situation that might constitute a conflict of interest. This is accomplished through periodic completion of this Disclosure form. Any change in circumstances that may give rise to a conflict of interest should be reported immediately to management. The employee and management then can determine whether the situation constitutes an actual conflict. Full and complete disclosure allows management to work with the employee to ensure that potential conflicts do not become actual conflicts and protects the employee from allegations that he or she acted improperly.

**Personal Conduct**

Carefully consider all circumstances and possible consequences of your business and personal dealings that could be a conflict of interest with your employer. You must not use your employment to influence business transactions for your personal benefit. You must not become involved in any activity that could compromise or appear to compromise your ability to perform your duties or to make decisions in your work assignments that are in the best interest of the Church and your employer.

**Possible Conflict Situations**

It is not possible to define all the circumstances that could constitute a conflict of interest. Examples of situations that could be a conflict of interest and that must be disclosed include but are not limited to the following. Disclose any situation that may constitute a conflict, whether or not it matches one of the following examples.

- a. Engaging, during your working hours, in business activities that are not a part of your assigned duties.

- b. Using your employer's personnel, facilities, equipment, supplies, or vehicles for personal financial gain.
- c. Using your employment status with a Church-affiliated entity to further a personal interest.
- d. Interfering with the contracting, bidding, or negotiating process being conducted by vendors, employees of Church-affiliated entities, or others who serve the Church.
- e. Exerting influence on or being a part of any business transaction involving a Church-affiliated entity from which you or a relative could receive benefit or gain of any kind. (This does not include income from investments in securities commonly traded in the markets and other benefits received by minority owners or stockholders of entities.)
- f. Forming business relationships or obligations that compromise objectivity when performing assigned duties.
- g. Accepting travel, housing, gifts, services, or favors in excess of \$100 value per year from those doing business with the Church or with its affiliated entities. Any cash gift to an employee from those doing business with the Church or with its affiliated entities is a conflict of interest and is prohibited.
- h. Obligating the Church or any of its affiliated entities without being properly authorized to do so. This includes but is not limited to areas relating to policy, official position, purchasing, obligations of service, letters of recommendation, and so on.
- i. Displaying merchandise, soliciting coworkers, distributing literature, or participating in fund-raising for personal interests during work time or in work areas.
- j. Having additional employment or sources of personal services income, such as second jobs (including for other Church-affiliated entities or for companies that do business with Church-affiliated entities).

**Procedure**

- 1. Please complete and sign the back of this form. All situations that could be considered a conflict of interest must be listed.
- 2. Give this form to your immediate supervisor for review.
  - a. If your statements on the back of this form do not identify any possible conflicts of interest, your supervisor will send this form to the Human Resource Department, and it will be put in your file.
  - b. If your statements identify a possible conflict of interest, your supervisor will discuss the facts with you to ascertain whether an actual conflict exists. Your supervisor will sign this form and then give it to the department's human resource director or coordinator for review and signature,

- and then to the department head for review and signature. The department head will indicate on the form what action has been taken (such as agreement that no actual conflict exists, or acknowledgment that an actual conflict exists and agreement as to how it has been or will be resolved) and then will sign and forward the form to the Human Resource Department for review and filing.
- 3. If a possible conflict arises during the course of your employment, you must immediately complete a new Disclosure of Possible Conflict of Interest form and give it to your supervisor for review as described above.
- 4. Appropriate action will be taken if you fail to disclose conflicts of interest. See Human Resource Policy K, "Employee Discipline and Termination."

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**Employee's Statement on Possible Conflict of Interest**

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**Employee's Statement on Additional Employment or Sources of Personal Services Income**

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**Employee's Disclosure**

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I have read the "Explanation" and "Procedure" sections on the front of this form and have explained in the sections above any and all present possible conflicts according to the Human Resource policy as summarized on the front of this form. **I agree to advise my department manager through my supervisor of any possible conflicts that may arise in the future.**

Employee's signature

Date

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**Management's Response to Employee's Statements on Possible Conflict of Interest and Other Sources of Income**

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**Approval Signatures**

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1. Approval of supervisor

Date

2. Approval of department's human resource director or coordinator

Date

3. Approval of department head

Date

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