



CONFLICT OF INTEREST DISCLOSURE FORM

I, _____, am a member of USAA and/or serve USAA in the following manner(s)
(please select all that apply):

Board of Directors

Committee Member

Please specify which committee(s) _____

Task Force Member

Please specify which task force(s) _____

Hearing Panel Member

Please specify which hearing panel(s) _____

Employee

Volunteer

Selection Committee

Athlete Representative

Contractor

Coach

Official

Judge

ITS Staff

Other _____

I participate with USAA in the following manner(s) (please select all that apply):

Athlete/ Member

Please name each USAA club of which you, or any affiliated person(s), are a member

Please name your USAA coach. and the coach of any affiliated person(s)

Club Director/ Leader

Own or operate a business that is involved with the sport

Please name your business _____

I attest to the following:

I have received the USAA Conflict of Interest Policy (the "Policy").

I have read and understand the Policy.

I agree to comply with the Policy.

I understand that USAA is a charitable organization and to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of its tax-exempt purposes.

Note: This disclosure statement also requires you to provide information with respect to certain other parties that are related to you. These persons are called "affiliated persons" and include, but are not limited to:

Immediate Family Members

An "immediate family member" includes any child, stepchild, parent, stepparent, spouse, partner, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law or sister-in-law of the director, other blood relatives, as well as any person (other than a tenant or employee) sharing their household.

Related Persons

A "related party" of a director is defined as any entity, whether non-profit or for-profit:

- a) Which is directly or indirectly owned or controlled by such director, individually or together with persons related to that individual pursuant to the definition for Immediate Family Member; or
- b) Of which the individual is an officer, board member, director, partner, employee or trustee, participating in management or are employed by, or are, directly or indirectly, a debt holder or beneficial owner of any class of equity securities; and any trust or other estate in which you have a substantial beneficial interest or as to which you serve as a trustee or in a similar capacity.

Exceptions:

i. However, that if an entity is not owned or controlled by such director as provided in the immediately preceding clause under (a), such entity shall not constitute a related party of such USAA director under the following circumstances:

- 1) The individual's position with such entity is solely as a non-employee director, advisory board member or limited partner; or
- 2) The individual's position with such entity is as an officer, partner or trustee who does not have management-level decision-making authority or have material input into management-level decisions of such entity with respect to actual or potential transactions, including acquisitions and investments, between such entity and third parties.

1. Have you or any of your affiliated persons **provided** any of the following services or property to USAA in the last 12 months?

Coach certification courses

Judge certification courses

Individual membership

Club membership

Equipment

Independent Contractor Services (Coaching, Judging, Para Classifier, State Coordinator, Sport Performance Services, etc)

Other Services or Property _____

If yes to any of the above, please describe the nature of services or property, and, if an affiliated person is/was involved, the identity of the affiliated person and your relationship to that person:

2. Have you or any of your affiliated persons **purchased** any of the following services or property from USAA in the past 12 months?

Coach certification courses

Judge certification courses

Individual membership

Club membership

Equipment

Other Services or Property _____

If yes to any of the above, please describe the purchased services or property, and, if an affiliated person is/was involved, the identity of the affiliated person and your relationship to that person:

3. Please indicate whether you or any of your affiliated persons had any direct or indirect financial interest in any business transactions to which USAA was or is a related party within the last 12 months?

Gifts (To include Value-in-Kind)

Favors

Ownership

Investment

Negotiations

Vendor

Compensation or Financial Gain from Non-USAA Sources

YES NO

If yes, please describe the transaction, and, if an affiliated person is/was involved, the identity of the affiliated person and your relationship to that person:

4. Were you or any of your affiliated persons indebted to pay money to USAA at any time in the past 12 months (other than pre-approved travel advances)?

Loans

Cash Advances

Restitution

YES NO

If yes, please describe the indebtedness, and, if an affiliated person is/was involved, the identity of the affiliated person and your relationship to that person:

5. In the past year, did you or any of your affiliated persons receive, or become entitled to receive, directly or indirectly, any of the following as a result of your relationship with USAA:

Discounts

Grants/ Travel Provisions

Prize Money

Stipends

Equipment

Donations

Sponsorship

Non-USAA Sources (If you are aware that the other entity also does business with USAA)

Describe: _____

If yes to any of the above, please describe the benefit(s), and, if an affiliated person is/was involved, the identity of the affiliated person and your relationship to that person:

If yes to any of the above, was the aggregate total value in excess of \$1,000?

YES NO

6. Are you or any of your affiliated persons a party to or do you or your affiliated persons have an interest in any pending legal proceedings involving USAA?

YES NO

If yes, please describe the proceeding(s), and, if an affiliated person is/was involved, the identity of the affiliated person and your relationship to that person:

7. If you are on an athlete /staff selection committee or on the Board of Directors and are influential in policies that govern selection procedures, do any of the following apply:

Is there an affiliated person who is competing or intends to compete for a spot on a team?

Are you an athlete competing or intends to compete for a spot on a team?

Do you coach an athlete who is competing for a spot or intends to compete for a spot on a team?

Do you have an immediate family member, employee, or colleague who is otherwise participating in the competition for which the selection committee has been or may be convened?

Are you a coach, contractor, volunteer, or ITS Staff Member who is being considered or intends to be in consideration for a staff position?

If yes to any of the above, please describe the identity of the affiliated person, athlete, or person involved in or impacted by the selection proceedings in question, and your relationship to that person:

8. Do you have a pre-existing personal relationship with any the following:

USAA Employee

Board Member

Committee Member

Task Force Member

Hearing Panel Member

Volunteer

Contractor

ITS Staff Member

Athlete Representative

If yes, please identify the relationship and describe the nature of the relationship.

9. Is there any other relevant relationship or matter not disclosed or asked about above, which might be **perceived** to compromise your obligations to USAA under USAA's Code of Ethics or which may raise questions of a conflict between your duty and loyalty to USAA and your self-interest, please indicate here what that relationship or matter is:

YES NO

If yes, please describe the situation(s), the reason for which you believe that this situation may give rise to a conflict of interest, and, if an affiliated person is/was involved, the identity of the affiliated person and your relationship to that person:

I HERBY CONFIRM that my responses to the above questions are complete and correct to the best of my information and belief. I agree that if I become aware of any information that might indicate that this disclosure is inaccurate or that I have not complied with this policy, I will notify the board or committee Chairperson or General Counsel (as applicable) immediately.

Name (Print): _____

Signature: _____

Date: _____

FOR USA ARCHERY USE ONLY:

Reviewed- No Conflicts Noted

Reviewed - Conflicts addressed and mitigated in the following manner:

Reviewed by: _____

Date: _____