



CONFLICT OF INTEREST DISCLOSURE FORM

Disclosure Statement

I, _____, am a member of USAA and/or currently 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
 - State Coordinator
 - Other _____

Attestation

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.

Affiliated Person Definition

Affiliated persons include your family and other people or organizations close to you. Affiliated persons can include:

- Your spouse, domestic partner, child, mother, father, brother, sister, grandparent, cousin or other blood relative;
- Any corporation or organization of which you are a board member, an officer, a partner, participate 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.

Sport and Community Involvement

- I own, operate or work at a business that is involved in our sport
If yes, what is the name of the business:
- My family members or **affiliated persons** own, operate or work in a business that is involved in our sport
If yes, what is the name of the business:
- I am actively participating in our sport as a competitor, official, coach or other type of participant
- My family member(s) or **affiliated person(s)** actively participate in our sport as a competitor, official, or other type of participant.

Detailed Declarations

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

(Includes a business you or an affiliated person own, an employer you or an affiliated person maintain, or any third party in which you or an affiliated person are associated with)

- Yes
 - No
 - N/A
-
- 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?

- Yes
- No
- N/A

- 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?

- Yes
- No
- N/A

- Gifts (To include Value-in-Kind)
- Favors

- Ownership
- Investment
- Negotiations
- Vendor
- Compensation or Financial Gain from Non-USAA Sources

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:

3. Please indicate whether you or any of your affiliated persons hold office, serve on a board, participate in management, are otherwise employed (or formerly employed), serve as a representative, agent, and/or consultant with a third party dealing with USAA:

(Includes any involvement with NAAF, NFAA, S3DA, ASA, IBO, Hoyt, Easton, other vendors, etc...)

- Yes
 - No
 - N/A
-
- Office
 - Board Service
 - Management
 - Employment
 - Representative
 - Agent
 - Consultant

If yes, please provide more information on who held office, served on a board, participated in management, or was otherwise employed with a third party dealing with USAA.

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)?

- Yes
- No
- N/A

Loans

Cash Advances

Restitution

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:

- Yes
- No
- N/A

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)

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
- N/A

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
- N/A

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:

- Yes
- No
- N/A

- 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:

- Yes
- No
- N/A

- 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. OTHER

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?

- Yes
- No
- N/A

Is there any other relevant relationship or matter not disclosed or asked about above, which may raise questions of a conflict between your duty and loyalty to USAA and your self-interest?

- Yes
- No
- N/A

Are you aware of any other events, transactions, arrangements or other situations that have occurred or may occur in the future that you believe should be and/or would prefer be examined by USAA's Ethics Committee in accordance with the terms and intent of USAA's Conflict of Interest Policy?

- Yes
- No
- N/A

If yes to any of the above, 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 Ethics Committee 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 (Name Printed): _____

Date: _____

Signature: _____