

**ANNUAL DISCLOSURE FORM (2019-2020) FOR
MUHLENBERG COLLEGE OFFICERS
AND OTHER PERSONS WITH SUBSTANTIAL INFLUENCE**

Name: _____

It has been and shall continue to be the policy of Muhlenberg College that all Officers and other persons with substantial influence over College affairs (each a “covered person”) avoid any conflict, or appearance of conflict, between their personal interests and the interest of the College in dealing with any organization or individual having, or seeking to have, any business relationship with the College. I have received and read* Muhlenberg College’s current **Conflict of Interest Policy Statement for Officers and Other Persons with Substantial Influence** (“Policy”). I agree to comply with the Policy, to disclose and announce any conflict, abstain from involvement in any decision where the conflict would be applicable, understand that the College is a charitable organization and that in order to maintain its federal tax exemption, it must engage primarily in activities which accomplish one or more of its tax exempt purposes, and I am filing this form in accordance with the Policy.

1. Offices and Positions: Are you or any member of your family¹ a director, officer, trustee, partner (general or limited), employee, member, manager or regularly retained agent of any organization² with which the College currently has business dealings or with which there is a reasonable possibility the College may in the next year have business dealings?

Yes _____ No _____

If “Yes”, please provide the following information: (If “No,” please go to question 2.)

<u>Organization</u>	<u>Position</u>	<u>You or Name of Family Member & Relationship</u>	<u>Nature of Organization’s Business</u>
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2. Ownership Interests: Do you, or any member of your family, individually or in the aggregate, have the actual or beneficial ownership of stock, equity, debt or any other financial interest of any organization with which the College currently has business dealings or with which there is a reasonable possibility the College may in the next year have business dealings, other than a Permitted Interest³ as defined below?

Yes _____ No _____ (If “No,” please go to question 3.)

¹ “Family” includes spouse, parent or other ancestor, sibling (or spouse), child (or spouse), grandchild (or spouse), great-grandchild (or spouse), or any other relative if the latter resides in the same household.

² “Organization” includes any corporation, partnership, limited liability company or partnership, proprietorship, association, trust, government agency or other entity.

³ “Permitted Interest” means the ownership of (a) shares of stock listed on the New York Stock Exchange, the American Stock Exchange, or any other recognized stock exchange, so long as the amount of such stock of any one issuer is less than 5% of the outstanding voting shares; (b) shares of mutual funds; (c) an interest in a blind trust; or (d) any debt instruments of publicly-held companies.

If "YES", please provide the following information:

		<u>You or</u>	
		<u>Name of Family Member</u>	
<u>Organization</u>	<u>Position</u>	<u>& Relationship</u>	<u>Nature of Organization's Business</u>

3. Remunerative Activities: Do you, or any member of your family, either individually or in the aggregate, expect to receive in the current or a future year, remuneration for services or other form of compensation from an organization with which the College currently has business dealings or with which there is a reasonable possibility the College may in the next year have business dealings?

Yes _____ No _____

If "YES", please provide the following information:

		<u>You or</u>	
		<u>Name of Family Member</u>	
<u>Organization</u>	<u>Position</u>	<u>& Relationship</u>	<u>Nature of Organization's Business</u>

4. Trustee Activities: Do you, or any member of your family, expect to receive in the current or a future year, remuneration for services or other form of compensation from a Muhlenberg College Trustee or a company which employs a Muhlenberg College Trustee?

Yes _____ No _____

If "YES", please provide the following information:

		<u>You or</u>	
		<u>Name of Family Member</u>	
<u>Organization</u>	<u>Position</u>	<u>& Relationship</u>	<u>Nature of Organization's Business</u>

I certify that the foregoing information is true and complete to the best of my knowledge.

Signature: _____

Date: _____

Print Name: _____

Department: _____

* This policy has not changed. To review the policy and/or to print another copy, visit www.muhlenberg.edu/pdf/main/aboutus/hr/conflict_of_interest_policy303.pdf .
A new disclosure form is required annually.

PLEASE SIGN AND RETURN TO THE TREASURER'S OFFICE