

Conflict of Interest Policy

The purpose of the Conflict of Interest questionnaire, as adopted by the Board of Directors of ACG Central Texas, Inc. (the "Chapter") is to help protect the Chapter's interest when it is contemplating entering into a transaction or arrangement that might benefit the private interest of a director, officer, member of a committee with Board-delegated powers, key employee, or vendor of the Chapter.

Policy.

1. The members of the Board of Directors of the Association, the members of committees of the Board of Directors who are not also directors of the Association, and the officers of the Association shall adhere to the highest standards of honesty, good faith, and fair dealing in all activities relating to the Association.
2. Without full and complete disclosure to and approval by the Association Board of Directors, no director, committee members or officer shall have any position of influence with, or a material financial interest in, any other entity, the existence of which does or could reasonably be expected to conflict with the proper performance of such person's duties or responsibilities to the Association. If such a position exists, it must be disclosed to the Board of Directors.
3. Each director, committee member and officer shall provide the Association Board of Directors with a full and complete written disclosure of material facts of any transaction or situation that may be subject to any reasonable doubt concerning the possible existence of a conflict of interest by the director, committee member or officer.
4. For situations which arise in which the Association may wish to contract or enter into an arrangement for goods or services under circumstances that may present a conflict of interest affecting a director, committee member or officer, such person shall provide full information to the Association Board of Directors to allow that body to approve by resolution (with such person abstaining) such contract or arrangement provided it is advantageous to do so.
5. Annually, the chapter President shall send, or cause to be sent, a copy of this policy, together with an explanation, and a copy of a disclosure statement/questionnaire to all directors, committee members and officers who shall complete and return a copy of the disclosure statement/questionnaire to the Chapter Executive.
6. The President shall submit a confidential report to the Board of Directors concerning any potential conflict of interest of any director, committee member or officer, together with his recommendations concerning the same.
7. The President shall administer this policy, and any disputed action of the President with respect to this policy shall be resolved by the Board of Directors.

Conflict of Interest Disclosure Statement

Preliminary Note: In order to be more comprehensive, this questionnaire/statement of disclosure also requires you to provide information with respect to certain parties that are related to you. These persons are termed "affiliated persons" and include the following:

- a) Your spouse, sibling(s), parents, children.
- b) Any corporation or organization of which you are a board member, an officer, a partner, participate in management or are employed by.
- c) 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.

1. NAME OF EMPLOYEE OR BOARD MEMBER: (please print)

2. Not including volunteer or employee services related to your duties to ACG Central Texas, have you or any of your affiliated persons provided services or property to the Association (i.e. for remuneration)?

_____ YES _____ NO

If yes, please describe the nature of the services or property and if an affiliated person is involved, the identity of the affiliated person and your relationship with that person:

3. Have you or any of your affiliated persons had any direct or indirect interest in any business transaction(s) in the past year to which ACG Central Texas was or is a party?

_____ YES _____ NO

If yes, please describe the transaction(s) and if an affiliated person is involved, the identity of the affiliated person and your relationship with that person:

4. Are you or any of your affiliated persons a party to or have interest in any pending legal proceedings involving ACG Central Texas?

_____ YES _____ NO

If yes, please describe the benefit(s) and if an affiliated person is involved, the identity of the affiliated person and your relationship with that person:

5. 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 examined or disclosed in accordance with the terms and intent of ACG Central Texas' conflict of interest policy?

_____ YES _____ NO

If yes, please describe the situation(s) and if an affiliated person is involved, the identity of the affiliated person and your relationship with that person:

I HEREBY CONFIRM that I have read and understood the ACG Central Texas conflict of interest policy and 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 President and/or the Board of Directors of ACG Central Texas immediately.

Signature

Date