



Conflict of Interest Questionnaire

The Parasol Tahoe Community Foundation must always conduct itself in an ethical manner so that its reputation is beyond reproach. It is not enough that the Board and professional staff believe that they are operating from the highest motives and that any particular action is innocent. As much as possible, actions and relationships must avoid even an appearance of impropriety.

The cornerstone of the policy is complete disclosure. It is recognized that Board, committee members and staff members are actively involved in other charitable, business, and community affairs throughout the Tahoe Basin. Pursuing these experiences is generally encouraged and often provides perspectives that enrich the Foundation's deliberations; however, in some cases they may create a duality or conflict of interest that needs to be disclosed and addressed. When the relevant relationships of every individual that participates in decisions are fully disclosed, no matter how remote, this avoids any misunderstanding or later charges of concealment. In some cases, disclosure of a connection or past connection may indicate that the individual involved should abstain from participation in the decision-making process.

The purpose of this questionnaire is to identify, evaluate and address any real, potential or apparent conflicts of interest that might, in fact or in appearance, call into question their duty of undivided loyalty to the Foundation.

Definitions:

"Covered Persons" include Foundation's board members, employees, and individuals serving on standing board committees.

"Family Member" includes a spouse or domestic partner, parent, grandparent, sibling, whether whole or half blood, child, whether natural or adopted, stepchild, grandchild, great-grandchild, and in-law including spouses or domestic partners of siblings, children, grandchildren, and great grandchildren.

Covered Person: _____
(please print your name)

Current Employer or Business Affiliation: _____

Position (with Current Employer or Business Affiliation): _____

Please describe below the nature of any relationship or situation in which you are involved in that may be considered a conflict of interest or duality of interest pursuant to the Foundation's Conflicts of Interest Policy (*include naming all Boards you and/or your family members serve on*).

I hereby disclose that I and my family members currently have the following relationships that may be a potential conflict of interest or duality of interest:

- 1. Nonprofit Organization Interests of you or your family members** *(e.g., board service, significant supporter, or employment of family member in organization that may seek grant support or compete for donors with the Foundation)*

- 2. Business Interests of you or your family members** *(e.g., board membership, ownership, or employment in firm that may have or seek business from the Foundation; real estate interests related to Foundation grantees; business partnerships with Foundation donors)*

- 3. Other Significant Involvements of you or your family members** *(e.g., membership on foundation boards, bank trust departments, or bank advisory committees; active political or advocacy role; elected or appointed office)*

In accordance with the Conflict of Interest Policy adopted by the Board of Directors, I do hereby declare and affirm that I have received and read the policy, and I will adhere to the document's spirit, principles and practices.

Signature

Date

Reminder: If at any time there is a matter under consideration which may constitute a direct or indirect financial interest or duality of interest, it is your obligation to disclose the facts to the Board of Directors, and to abstain from discussion and voting if a conflict of interest exists.