

**Morrisville Public Library
Conflict of Interest Policy
Initial Statement**

I _____ have received a copy of Morrisville Public Library's
Conflict of Interest Policy, dated _____.

I affirm that I:

- 1) Have received a copy of the Conflicts of Interest policy,
- 2) Have read and understand the policy,
- 3) Have agreed to comply with the policy, and
- 4) Understand that Morrisville Public Library is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of its tax-exempt purposes.

Signature

Date

Name: Printed

Relationship with library at time of signature (trustee, staff, committee member, etc.)

Morrisville Public Library
Conflict of Interest Policy
Annual Disclosure Questionnaire

Please complete the questionnaire below, indicating any potential conflicts of interest. If you answer "yes" to any of the questions, please provide a written description of the details of the specific action, policy or transaction in the space allowed. Attach additional sheets as needed.

Financial Interests – A conflict may exist where an interested party, directly or indirectly benefits or profits as a result of a decision, policy or transaction made by Morrisville Public Library. During the past 12 months (for each yes response, please describe):

1. Has Morrisville Public Library proposed to contract or contracted to purchase or lease goods, services, or property from you or from any of your relatives or associates?

Yes

No

2. Has Morrisville Public Library offered employment to you (not applicable to existing staff) or to any of your relatives or associates?

Yes

No

3. Have you, or any of your relatives or associates, been provided with a gift, gratuity or favor of a substantial nature from a person or entity that does business or seeks to do business with Morrisville Public Library?

Yes

No

4. Have you or any of your relatives or associates been gratuitously provided use of the facilities, property, or services of Morrisville Public Library?

Yes

No

5. Have you, a relative or an associate been in a position to benefit financially from an action, policy or transaction made by Morrisville Public Library?

Yes

No

Other Interests – A conflict may also exist where an interested party obtains a non-financial benefit or advantage that he/she would not have obtained absent his/her relationship with Morrisville Public Library, or where his/her duty or responsibility owed to Morrisville Public Library conflicts with a duty or responsibility owed to some other organization.

Please indicate if at any time during the past twelve months (for each yes response, please describe)

1. Did you obtain preferential treatment, promotion, recognition or a non-salaried appointment as a consequence of your association with Morrisville Public Library for yourself or for any of your relatives or associates?

Yes

No

2. Did you make use of confidential information obtained from Morrisville Public Library for your own benefit or for the benefit of a relative, associate, or other organization?

Yes

No

3. Did you take advantage of an opportunity or enable a relative, associate or other organization to take advantage of an opportunity that you had reason to believe would be of interest to Morrisville Public Library?

Yes

No

4. Have you, a relative or an associate been in a position to benefit in a nonfinancial way from an action, policy or transaction made by Morrisville Public Library?

Yes

No

Name

Signature

Date

**Morrisville Public Library
Conflict of Interest
Affirmation of Compliance**

I have received and carefully read the Conflict of Interest Policy for board members and staff with significant decision making authority of Morrisville Public Library and have considered not only the literal expression of the policy, but also its intent. By signing this affirmation of compliance, I hereby affirm that I understand and agree to comply with the Conflict of Interest Policy. I further understand that Morrisville Public Library is a nonprofit organization and that in order to maintain its federal tax exemption, it must engage primarily in activities that accomplish one or more of its tax-exempt purposes without personal inurement (other than by salary) by Board members or employees.

Except as otherwise indicated in the Disclosure Questionnaire, I hereby state that I do not have any conflict of interest, financial or otherwise that may be seen as competing with the interests of Morrisville Public Library, nor does any relative or associate have such a potential conflict of interest. Nor shall I, any relative or associate, benefit from any action, policy or transaction made by Morrisville Public Library in a manner that has not been previously disclosed.

If any situation should arise in the future that I think may involve me in a conflict of interest, I will promptly and fully disclose in writing the circumstances to the President of the Board of Trustees of Morrisville Public Library or to the Director, as applicable.

I further certify that the information set forth in the Disclosure Statement and attachments, if any, is true and correct to the best of my knowledge, information and belief.

Name (Please print)

Signature

Date

Annual Review and Reaffirmation

Signature

Date

Signature

Date

Signature

Date

Signature

Date