

## AAA Policies

<b>Title:</b>	Conflict of Interest Policy
<b>Code:</b>	FIN 1.3
<b>Date:</b>	8/2009
<b>Originator:</b>	Audit Committee
<b>Approved:</b>	Board of Directors

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### Policy Statement

This Conflict of Interest Policy of the American Accounting Association (AAA): (1) defines conflicts of interest; (2) identifies classes of individuals within the AAA covered by this policy; (3) facilitates disclosure of information that may help identify conflicts of interest; and (4) specifies procedures to be followed in managing conflicts of interest.

### Rationale

AAA Council members and AAA staff shall at all times abide by and conform to the following conflict of interest guidelines:

- **Definition of conflicts of interest.**

A conflict of interest arises when a person in a position of authority over the AAA may benefit financially from a decision he or she could make in that capacity, including indirect benefits such as to family members, businesses, institutions, and other nonprofit organizations with which the person is closely associated. This policy is focused upon material financial interest of, or benefit to, such persons.

- **Individuals covered**

Persons covered by this policy are the AAA's Council members, Executive Director, Chief Operating Officer, Director of Finance, and AAA staff. The good Governance Policies will be reviewed annually by the Governance Committee of the AAA Council.

- **Facilitation of disclosure**

Persons covered by this policy will annually disclose or update to the President and Vice President – Finance on a form provided by the AAA their interests and relationships that could give rise to conflicts of interest, such as transactions or affiliations with businesses and other organizations, or those of family members, that do business with AAA or compete with AAA. In addition, for any potential or actual conflicts that arise between annual disclosures, these shall be disclosed at such time.

- **Procedures to manage conflicts**

For each interest disclosed, the AAA Management Team will determine whether to: (a) take no action; (b) assure full disclosure to the Board of Directors and other individuals covered by this policy; (c) ask the person to recuse from participation in related discussions or decisions within the AAA; or (d) ask the person to resign from his or her position in the AAA or, if the person refuses to resign, become subject to possible removal in accordance with the AAA's removal procedures.

**Conflict of Interest Disclosure Form  
American Accounting Association  
Addendum to the AAA Conflict of Interest Policy**

Name: \_\_\_\_\_

Position/Role: \_\_\_\_\_

I certify that I have received and read the American Accounting Association's Conflict of Interest Policy. I understand the purpose of this Policy is to protect the integrity of the Mission and operations of the AAA. Upon becoming a Council member or staff of the AAA, I will sign this form indicating that I have received, read and understand the policy and acknowledging any potential conflicts of interest

Signature

\_\_\_\_\_ Date

Printed Name

**Disclosure**

Please describe below any relationships, transactions, positions you hold (volunteer or otherwise), or circumstances that you believe could contribute to a conflict of interest between the American Accounting Association and your personal interests, financial or otherwise:

\_\_\_\_\_ I have no conflict of interest to report at this time.

\_\_\_\_\_ I have the following conflict of interest to report (please specify other nonprofit and for-profit boards you sit on; any for-profit businesses for which you or an immediate family member are an officer or director, or a majority shareholder; and the name of your employer(s) and any businesses you or a family member own):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

I hereby certify that the information set forth above is true and complete to the best of my knowledge. I have received, reviewed, and agree to abide by, the Policy of Conflict of Interest of the American Accounting Association

Signature: \_\_\_\_\_

Date: \_\_\_\_\_