



POLICY TITLE
Conflict of Interest

POLICY NUMBER
6-007

Responsible Unit: <i>Office of Strategic Planning, Policy, and Institutional Effectiveness</i>	Effective Date: <i>01/10/2020</i>
Responsible Official: <i>Vice President for Strategic Planning, Policy, and Institutional Effectiveness</i>	Last Reviewed Date:
Policy Classification: <i>Governance</i>	Origination Date: <i>12/01/2019</i>

I. POLICY STATEMENT AND RATIONALE

The Board's Bylaws address conflict of interest for its members in Part II, Article I, Section I. The provision reads as follows:

Conflict of Interest: *The Southern University Board of Supervisors is the governing board for all institutions that comprise the Southern University System. All members of the Board are appointed officers of the State of Louisiana. As such, they are subject to the laws of the State as defined by the 1974 Louisiana State Constitution, (Article X. Public Officials and Employees, Part I, Section. 2B-5. Unclassified Service) and the Louisiana Code of Governmental Ethics, which governs their conduct and responsibilities, under Louisiana law, Title 42. Public Officials and Employees, Code of Governmental Ethics. (04-12-19).*

All members of the Southern University Board of Supervisors, the governing/management board for Southern University and A&M College, are appointed state officials in unclassified service (LA 1974 Constitution, Article X, Part I, Section 2(B)(5)). As such, the actions of the members of the Southern University Board of Supervisors are governed by state statutes that guard against conflict of interest and Board members are subject to the stipulations of the Louisiana Code of Governmental Ethics, including the provisions in Louisiana's State Constitution (LA 1974 Constitution, Article X, Part III, Section 24 (A)(B)) and Louisiana State Laws pertaining to board member dismissal and due process (RS 42:1411).

The General Prohibitions under the Louisiana Code of Governmental Ethics (Title 42) are addressed in R.S. 42:1111 – 1121. For the official text of all provisions, prohibitions, restrictions, exceptions, etc., described in the Louisiana Code of Governmental Ethics, refer to the Code at LSA R.S. 42:1101 et seq.

This policy adopts the provisions in the Louisiana Code of Governmental Ethics that define and address potential conflict of interest for board members and provides evidence of policy implementation.

II. POLICY SCOPE AND AUDIENCE

This policy applies to members of the Southern University System Board of Supervisors.

III. POLICY COMPLIANCE

Adoption and implementation of this policy allows members of the Southern University System Board of Supervisors to demonstrate compliance with the Louisiana Code of Governmental Ethics and demonstrate adherence to SACSCOC Standard 4.2d – Conflict of Interest.

IV. POLICY DEFINITIONS

Southern Association of Schools and Colleges, Commission on Colleges (SACSCOC): SACSCOC is the regional body for the accreditation of degree-granting higher education institutions in the Southern states. Accreditation by SACSCOC signifies that the institution (1) has a mission appropriate to higher education, (2) has resources, programs, and services sufficient to accomplish and sustain that mission, and (3) maintains clearly specified educational objectives that are consistent with its mission and appropriate to the degrees it offers and that indicate whether it is successful in achieving its stated objectives.

Louisiana Code of Governmental Ethics: Universal Citation: LA Revised Statutes § 42:1101 et seq. According to Louisiana Revised Statutes, RS 42:1101 - Code of Governmental Ethics:

Declaration of Policy (RS 42:1101)

A. Whereas the people of the state of Louisiana have in Article X, Section 21 of the Louisiana Constitution mandated that the legislature enact a code of ethics for officials and employees of this state and its political subdivisions, the legislature does hereby enact a Code of Governmental Ethics.

B. It is essential to the proper operation of democratic government that elected officials and public employees be independent and impartial; that governmental decisions and policy be made in the proper channel of the governmental structure; that public office and employment not be used for private gain other than the remuneration provided by law; and that there be public confidence in the integrity of government. The attainment of one or more of these ends is impaired when a conflict exists between the private interests of an elected official or a public employee and his duties as such. The public interest, therefore, requires that the law protect against such conflicts of interest and that it establish appropriate ethical standards with respect to the conduct of elected officials and public employees without creating unnecessary barriers to public service.

Personal Financial Disclosure (PFD)

A. PFDs must be filed annually by May 15th. The report must be filed each year the office or position is held and the year following the termination of the office or position. The report filed by May 15th covers activity in the prior calendar year.

- **Tier 2.1 PFDs** – Filed by members and designees of boards and commissions which have the authority to expend, disburse or invest \$10,000 or more in funds in a fiscal year. The penalty for late filing is \$50 per day. R.S. 42:1124.2.1.

V. POLICY IMPLEMENTATION PROCEDURES

Examples of evidence of implementation include:

- Board members shall review and sign the Board-Approved Conflict of Interest Statements annually. A brief review of the Louisiana Code of Governmental Ethics shall precede signage. A copy of the signed statements shall be archived in the Board office.
- Board members shall complete, sign, and file a Tier 2.1 PFD by May 15th annually. A copy of the filed report shall be archived in the Board office. In signing the Tier 2.1 PFD, Board members shall certify their responses to the following statement(s) on the disclosure form:

CHECK ONE:

_____ *Neither I, nor any member of my immediate family, have a personal or financial interest in any entity, contract, or business, or a personal or financial relationship, that in any way poses a conflict of interest, which would affect the impartial performance of my duties as a member of the board or commission.*

_____ *I have attached a statement describing any conflicts, and actions I am taking to resolve or avoid the conflicts.*

- Appointed members of boards and commissions may recuse themselves to avoid a violation of Section 1112. Unlike elected officials, they may not participate in the debate or discussion of the matter. They must **recuse** themselves from all participation. R.S. 42:1112D. Abstention from voting on a Board action item may be evidence of recusal.

VI. POLICY RELATED INFORMATION

For the official text of all provisions, prohibitions, restrictions, exceptions, etc., described in the Louisiana Code of Governmental Ethics, refer to the Code at LSA R.S. 42:1101 et seq.

VII. POLICY HISTORY AND REVIEW CYCLE

This is a new policy. The effective date of this policy is determined by the approval date of the Board Chairman. This policy is subject to a five-year policy review cycle.

VIII. POLICY URL

System policies are archived at www.sus.edu.

IX. POLICY APPROVAL

This section identifies the appropriate official who has final authority to approve this policy.



Ray L. Belton, Ph.D.
President-Chancellor - Southern University and A&M College System

01/10/20

Effective Date of Policy



The Honorable Domonique D. Rutledge, Esq.
Chair - Southern University System Board of Supervisors

01/10/20

Effective Date of Policy

Evidence of Implementation of Conflict of Interest Policy Policy # 6-007

- **Conflict of Interest Disclosure
Statement**

(Southern University System Board of Supervisors Form)

- **Tier 2.1 Personal Financial
Disclosure Statement (PFD)**

(Louisiana Board of Ethics Form 417)



SOUTHERN UNIVERSITY SYSTEM BOARD OF SUPERVISORS
CONFLICT OF INTEREST DISCLOSURE STATEMENT

I, _____ a member of the Board
of Supervisors of Southern University System affirm that:

- (a) I am familiar with the Bylaws of the Board.
- (b) I do not engage in conduct that is prohibited or unlawful.
- (c) I do not have a personal interest in a transaction with the University.
- (d) I do not engage in prohibited conduct relating to contracts with the University.
- (e) I do not have any business interest or family relations that could be deemed a conflict of interest under any law or board policy.
- (f) I have no conflict of interest as it relates to the institution.

If any situation arises that makes the above statements incomplete or incorrect, I will notify the Board immediately of any conflicts and actions I am taking to resolve such conflict(s). Notification shall be submitted in writing to the Board Chair.

Signature of Board Member

Name: _____

Date: _____

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Post Office Box 4368
Baton Rouge, Louisiana 70821

TIER 2.1 PERSONAL FINANCIAL DISCLOSURE STATEMENT (ANNUAL)

This Report Covers Calendar Year: _____

ORIGINAL REPORT

AMENDED REPORT

I currently hold an office that would require me to file a Tier 3 Personal Financial Disclosure Statement.
As such, I have completed SCHEDULE D.

Name of Filer (print full name) : _____

Mailing Address: _____

City, State, Zip: _____

Name of Board/Commission (no abbreviations): _____

Date of Appointment: _____

Date Appointment Expires: _____

Name of Spouse (print full name): _____

Spouse's Occupation: _____

Principal Business Address: _____

City, State, Zip: _____

CHECK ONE:

- Neither I, nor any member of my immediate family, have a personal or financial interest in any entity, contract, or business, or a personal or financial relationship, that in any way poses a conflict of interest, which would affect the impartial performance of my duties as a member of the board or commission.
- I have attached a statement describing any conflicts, and actions I am taking to resolve or avoid the conflicts.

Check all that apply:

- I have filed my state income tax return for the previous year.
- I have filed for an extension of my state income tax return for the previous year.
- I have filed my federal income tax return for the previous year.
- I have filed for an extension of my federal income tax return for the previous year.

NOTE: La. R.S. 42:1124.2.1 does not provide you the opportunity to request an extension in filing your personal financial disclosure statement.

Certification of Accuracy

I do hereby certify that the information contained in this personal financial disclosure statement is true and correct to the best of my knowledge and belief.

Signature of Filer

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Post Office Box 4368
Baton Rouge, Louisiana 70821

Schedule A: Employment Information

Check if not applicable

<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time Name of Employer: _____ Job Title: _____ Job Description: _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time Name of Employer: _____ Job Title: _____ Job Description: _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time Name of Employer: _____ Job Title: _____ Job Description: _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time Name of Employer: _____ Job Title: _____ Job Description: _____

- You are required to disclose employment information related to both you and your spouse (if applicable).
- List the name of the employer; the title of the position; a brief description of the job; and disclosure as to whether the position is full-time or part-time.
- Self-employment information is reported on Schedule B.

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Schedule B: Positions - Business

Check if not applicable

<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
Amount of Interest: _____ %
Name of Business: _____
Address: _____
City, State, Zip: _____
Business Description: _____
Nature of Association: _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
Amount of Interest: _____ %
Name of Business: _____
Address: _____
City, State, Zip: _____
Business Description: _____
Nature of Association: _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Both
Amount of Interest: _____ %
Name of Business: _____
Address: _____
City, State, Zip: _____
Business Description: _____
Nature of Association: _____

* You are required to complete SCHEDULE B if you or your spouse is a director, officer, stockholder, owner, partner, member, or trustee of a business AND if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.

* "Business" means any corporation, partnership, limited liability company, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.

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Schedule C: Positions - Nonprofit

Check if not applicable

<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Organization: _____ Address: _____ City, State, Zip: _____ Nature of Association: _____ Description of Organization: _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Organization: _____ Address: _____ City, State, Zip: _____ Nature of Association: _____ Description of Organization: _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse Name of Organization: _____ Address: _____ City, State, Zip: _____ Nature of Association: _____ Description of Organization: _____

*You are required to complete SCHEDULE C if you or your spouse is a director or officer of a nonprofit organization.

Revised December 2016

Form 417

www.ethics.la.gov

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Schedule D: Other Offices/Positions Held

Check if not applicable

Name of Office/Position: _____
Name of Office/Position: _____
Name of Office/Position: _____
Name of Office/Position: _____
Name of Office/Position: _____
Name of Office/Position: _____
Name of Office/Position: _____
Name of Office/Position: _____
Name of Office/Position: _____
Name of Office/Position: _____
Name of Office/Position: _____

*You are required to complete SCHEDULE D if you hold any other office or position which would require you to file a personal financial disclosure statement under La. R.S. 42:1124.2.1 or 42:1124.3.

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Schedule E: Income from the State, Political

Check if not applicable **Subdivisions, and/or Gaming Interests**

Filer Spouse Business (where amount of interest exceeds 10%)
Type of Income: State Political Subdivision Gaming Interest

Name of Business (if applicable): _____

Name of Income Source: _____

Address: _____

City, State, Zip: _____

Amount of Income (exact dollar amount): \$ _____

Filer Spouse Business (where amount of interest exceeds 10%)
Type of Income: State Political Subdivision Gaming Interest

Name of Business (if applicable): _____

Name of Income Source: _____

Address: _____

City, State, Zip: _____

Amount of Income (exact dollar amount): \$ _____

Filer Spouse Business (where amount of interest exceeds 10%)
Type of Income: State Political Subdivision Gaming Interest

Name of Business (if applicable): _____

Name of Income Source: _____

Address: _____

City, State, Zip: _____

Amount of Income (exact dollar amount): \$ _____

* You are required to complete SCHEDULE E if you or your spouse received income (includes any income from public source such as employment income, retirement, etc.) from the State, any political subdivision, and/or a gaming interest OR if a business in which you or your spouse owns an interest which exceeds 10% (either individually or collectively) received income from the aforementioned sources.
* "Income" (for a business) means gross income less costs of goods sold, and operating expenses.
* "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.
* The definitions for (and examples of) *political subdivision, gaming interest, and business* are found in the *Instructions Section* of this form.

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Schedule F: Contributions

Check if not applicable (made within one year of appointment - in excess of \$1,000)

Date of Appointment: _____ Compensation: \$ _____ Candidate Name: _____ Amount of Contribution or Loan: \$ _____
Date of Appointment: _____ Compensation: \$ _____ Candidate Name: _____ Amount of Contribution or Loan: \$ _____
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Date of Appointment: _____ Compensation: \$ _____ Candidate Name: _____ Amount of Contribution or Loan: \$ _____
Date of Appointment: _____ Compensation: \$ _____ Candidate Name: _____ Amount of Contribution or Loan: \$ _____

* You are required to complete SCHEDULE F if you are appointed to a state board or commission and subject to annual financial statements as required by 42:1124.2.1 and you made a contribution or loan in excess of \$1,000 to the campaign of the official who appointed you.

* You are only required to disclose contributions or loans made within one year of appointment.

* "Candidate" means a person who seeks nomination or election to public office, except the office of president or vice president of the United States, presidential elector, delegate to a political party convention, United States senator, United States congressman, or political party office.

* "Contribution" means a gift, conveyance, payment, or deposit of money or anything of value, or the forgiveness of a loan or of a debt, made for the purpose of supporting, opposing, or otherwise influencing the nomination or election of a person to public office, whether made before or after the election.

* "Loan" means a transfer of money, property, or anything of value in exchange for obligation to repay in whole or in part, made for the purpose of supporting, opposing, or otherwise influencing the nomination for election, or election, of any person to public office.