

September 15, 2021

**CONFLICT OF INTEREST POLICY
OF
UNITED STATES FIELD HOCKEY ASSOCIATION**

1. Purpose

USFHA is committed to sustaining an ethical organization free of conflicts of interest and perceived conflicts of interest. Each Affiliated Individual (as defined below) has the responsibility to administer the affairs of **USFHA** honestly and prudently, and to exercise their best care, skill, and judgment for the sole benefit of **USFHA**. Those persons will exercise the utmost good faith in all transactions involved in their duties, and they will not use their positions with **USFHA** or knowledge gained therefrom for their personal benefit. The interests of the organization must be the first priority in all decisions and actions. **USFHA** requires that any of its Affiliated Individuals recognize, attempt to avoid activities or investments that involve, might appear to involve, or could result in a potential conflict of interest.

This policy does not attempt to provide an exhaustive list of every possible circumstance that might give rise to a conflict of interest, but provides examples of situations or “**transactions**” where potential conflicts of interest often arise. A “**transaction**” is any contract, transaction, agreement or relationship involving the sale or purchase of goods, services, or rights of any kind, the providing or receipt of a grant or loan, or the establishment of any other financial relationship with **USFHA**.

2. Applicability of Policy

This Conflict of Interest Policy is applicable to all **USFHA** Affiliated Individuals. “**Affiliated Individuals**” include, but are not limited to, members of **USFHA**’s Board of Directors (the Board of **USFHA**), officers, committee members, task force members, hearing panel members, employees, and volunteers.

3. Definitions

“**Conflict of Interest**” or “**Conflict**” exists when an Affiliated Individual’s activities or interests interfere with, influence, or have the potential to interfere with or influence his or her responsibilities on behalf of the **USFHA** or undermine the interests of the **USFHA**. A “**conflict of interest**” also exists in the context of athlete or team selection when an Affiliated Individual participates in a selection decision that involves or impacts an athlete with whom the Affiliated Individual has a direct or indirect relationship, or when an Affiliated Individual participates in a benefits or services allocation decision that directly impacts the Affiliated Individual.

4. Areas in Which Conflicts May Arise

Conflicts of interest often arise due to the relationships Affiliated Individuals have with the following third parties:

- a) Persons or entities supplying goods and services to **USFHA**;
- b) Persons or entities leasing property or equipment to **USFHA**;
- c) Persons or entities with whom **USFHA** is dealing or planning to deal in connection with the gift, purchase or sale of real estate, securities or other property;
- d) Competing or affinity organizations;
- e) Donors and others supporting **USFHA**;
- f) Agencies, organizations, and associations which affect the operations of **USFHA**; or
- g) Family members, friends, and other employees. A “**Family Member**” is defined as a spouse, domestic partner, parent, parent of spouse/domestic partner, child, stepchild, child of a domestic partner, sibling, or the sibling of a spouse/domestic partner of an Affiliated Individual.

Potential conflicts of interest often arise when Affiliated Individuals have an interest, directly or indirectly, with any persons or entities mentioned above. Examples of potential conflicts of interest are listed below. The list below is not intended to be an all-inclusive list of every instance that may create a potential conflict of interest, but, rather, is simply a sample of the types of relationships and activities that may give rise to a conflict of interest. If an Affiliated Individual or other disclosing individual has any question as to whether a relationship or activity may create a conflict of interest, a disclosure must be made.

Examples of potential conflicts of interest that should be disclosed are listed below:

- i. Affiliated Individual or their Family Member owns stock or holds debt or other proprietary interests in any third party dealing or who may potentially deal with **USFHA**.

EXAMPLE: A **USFHA** board member owns a 70% interest in a company seeking to enter into a contract with **USFHA** to provide consulting services.

- ii. Affiliated Individual or a Family Member owns a business, maintains a second job, or provides goods or services under a provider, contractor, or consulting agreement, where by the outside business provides goods or services to **USFHA**, the USOPC, or any other NGB.

EXAMPLE: **USFHA** is contemplating entering into an agreement with a HR consulting company owned by an **USFHA** employee’s husband.

- iii. Affiliated Individual or a Family Member holds a position of executive, officer or director, participates in the management of, or is otherwise is employed (or formerly employed) by any third party dealing with **USFHA**.

EXAMPLE: A **USFHA** board member is the CEO of a technology company negotiating a contract with **USFHA** to provide IT services.

- iv. Affiliated Individual uses **USFHA**'s time, personnel, equipment, supplies, or goodwill for anything other than **USFHA**-approved activities, programs, and purposes.

EXAMPLE: A **USFHA** employee uses a **USFHA** vehicle for a personal road trip.

- v. Affiliated Individual solicits gifts or gratuities using their **USFHA** role or accepts personal gifts, loans, gratuities, or discounts from third parties in violation of **USFHA**'s Gift & Entertainment Policy. No personal gift of money should ever be accepted.

EXAMPLE: A **USFHA** employee using her position at **USFHA** to obtain box seats to a sporting event from a vendor for personal use.

EXAMPLE: Accepting tickets to an NFL game worth \$250 from a business seeking to obtain a contract to provide landscaping services for **USFHA** headquarters.

EXAMPLE: A **USFHA** board member gets paid a commission if **USFHA** enters into a particular contract with a third party.

- vi. Affiliated Individual or a Family Member acts as an agent, representative, or consultant to a business whose interests may conflict with the interests of **USFHA**.

EXAMPLE: A **USFHA** board member agrees to promote another NGB in negotiations with potential sponsors or licensees.

- vii. Affiliated Individual or a Family Member has a business relationship with a sponsor, supplier, licensee, or vendor of **USFHA** (for a current list of **USFHA** sponsors, suppliers, and licensees, go to <https://www.teamusa.org/usa-field-hockey/about/sponsors>).

EXAMPLE: A **USFHA** employee's spouse provides legal services to a **USFHA** sponsor.

- viii. Affiliated Individual awards **USFHA** business to, or provides favorable treatment to, a business owned or controlled by a volunteer, family member, or personal friend.

EXAMPLE: **USFHA** is contemplating entering into a contract for landscaping services with a company because the landscaping company is owned by an employee's brother.

- ix. Affiliated Individual drafts selection procedures or participates and/or votes within a discretionary selection committee of **USFHA** when they have a relationship with an athlete who is potentially impacted by the selection procedures (e.g., as coach, trainer, parent, etc.) or when Affiliated Individual might benefit directly or indirectly from the selection method.

EXAMPLE: **USFHA** employee participating in a decision to select an athlete on **USFHA's** team for World Championships or major international competition when the **USFHA** employee is athlete's current coach or family member.

EXAMPLE: The athlete representative assisting with drafting, voting on, and/or signing the procedures is also competing for a spot on the team for which the procedures are written.

- x. Affiliated Individual engages in activities or maintains interests, that interfere with or influence, or have the potential to interfere with or influence, the satisfactory performance of their responsibilities on behalf of **USFHA** or undermine the interests of **USFHA**.

EXAMPLE: A **USFHA** board member has a significant client who owns or operates a facility being considered as the host of a **USFHA** event.

EXAMPLE: An Affiliated Individual serves on a hearing panel or appeal panel involving discipline against a member of the Affiliated Individual's club / team / family.

EXAMPLE: An athlete is the potential recipient of benefits or services that are being allocated by **USFHA** and participates in the allocation decision.

- xi. **USFHA** Officer is an officer of another NGB.

5. Interpretation of This Policy

The areas of conflicting interest and relations in those areas which may give rise to a conflict, as listed in Section 4, are not exhaustive. Affiliated Individuals should

disclose all relationships and activities which may give rise to a potential conflict of interest, whether or not listed expressly in Section 4.

However, disclosure of a conflict or potential conflict of interest does not necessarily prohibit involvement in the disclosed activity or with the **USFHA**. For example, the conflict might not be material enough to be of practical importance, or if it is material, it might be possible for the **USFHA** and Affiliated Individual to implement appropriate mitigating measures upon full disclosure of all relevant facts and circumstances. However, it is **USFHA's** policy that the existence of any of the interests described or similar in nature to those described in Section 4 will be disclosed before any transaction is consummated or any vote taken on an action, contract, relationship, or decision that would give rise to the potential conflict of interest. It is the continuing responsibility of each Affiliated Individual to scrutinize his/her transactions and outside business interests and relationships for potential conflicts and to immediately make such disclosures.

6. Disclosure Policy and Procedure

In addition to the mandatory self-disclosures required from each Affiliated Individual under Sections 9 and 10 of this policy, any individual with a good faith belief that another Affiliated Individual has a conflict of interest may notify the **USFHA** Ethics Committee of such perceived conflict pursuant to the procedures set forth below. Such notice may be provided anonymously. Furthermore, should any Affiliated Individual become aware of any undisclosed conflict of interest, or any conflict of interest not fully disclosed, such person should make full disclosure of their knowledge of the potential conflict of interest involved to **USFHA's** Ethics Committee. Board Members are required to disclose conflicts of interest during the meeting and these disclosures are to be included in the Board Minutes.

Affiliated members are encouraged to disclose conflicts whenever they may arise or whenever the member becomes aware of them, in addition to annual disclosures. Specifically, Board members, committee members and members of tribunals or panels must disclose any conflicts when they arise or whenever they become aware of them.

After disclosure of the conflict or potential conflict of interest and all material facts, and after any discussion with the interested person and any other relevant party, the Ethics Committee will decide if a conflict of interest exists pursuant to the procedures set forth in Section 7 below, as applicable, and if there are mitigating measures that could be implemented to permit **USFHA** to move forward with the transaction or activity.

7. Procedures for Addressing Potential Conflicts of Interest

a) With Respect to USFHA Transactions or Business

In the event a potential conflict of interest exists with respect to a proposed transaction or arrangement, then promptly and before any decision is made

regarding the proposed transaction or arrangement, the potential conflict of interest will be addressed as follows:

- i. The interested person may make a presentation to the Ethics Committee, (which will be made up of disinterested parties), which may be convened telephonically, regarding the transaction or arrangement involving the potential conflict of interest.
- ii. The interested person will then recuse themselves from any and all discussion and approval (if applicable) of the conflict of interest.
- iii. The Ethics Committee will determine whether an actual or apparent conflict of interest exists. For transactions, the Ethics Committee may consider whether a competitive bid or competitive evaluation exists.
- iv. If the Ethics Committee determines that an actual or apparent conflict of interest exists, it will determine whether there are mitigating measures that can be implemented to alleviate the conflict and/or what steps the interested individual and/or USFHA must take or not take in order to avoid the conflict. The Ethics Committee may determine in some cases that the NGB cannot engage in the transaction or arrangement at all due to the conflict or potential conflict of interest.

b) With Respect to Drafting Selection Procedures and Athlete/Team Discretionary Selection

The following more particularized disclosure requirements and procedures apply in the context of drafting selection procedures and athlete/team discretionary selection decisions in order to ensure that no Affiliated Individual participating in the process has a conflict of interest that will impact his/her ability to make a fair and unbiased decision in the athlete or team selection process.

Any Affiliated Individual involved in the drafting of procedures, including the athlete representative, or on a discretionary selection committee who has a potential conflict of interest must disclose it to the Ethics Committee for review. The following process will be followed:

- i. The Interested Person may make a presentation to the Ethics Committee, (which will be made up of disinterested parties), which may be convened telephonically, regarding the potential conflict of interest.
- ii. The interested person will then recuse themselves from any and all discussion regarding the potential conflict of interest.
- iii. The Ethics Committee will determine whether an actual or apparent conflict of interest exists

- iv. If the Ethics Committee determines that a conflict of interest exists, it will either mandate the individual's recusal from the process or determine to what extent, if any, that individual can participate in the process. The Ethics Committee may determine that the individual can still participate in the drafting of the procedures or be included in the discussions for discretionary selection of a team, but not take part in any sign-off, vote, or decision. For example, a national team coach or high performance director may provide information to the selection committee so long as such information is provided in a fair and unbiased manner and the committee member who disclosed the conflict of interest does not vote toward the final decision.
- v. Under no circumstances will a person with an actual or potential conflict attempt to unduly influence other members of the committee in the selection process.

If the Affiliated Individual is recused and a vacancy on the committee exists, either in the drafting process or on the discretionary selection committee, **USFHA** will use its best reasonable efforts to fill that vacancy. If a vacancy results in the athlete representative position, another athlete representative who meets the qualifications for that committee will be appointed and approved by a representative group of athletes.

8. Violations of The Conflicts of Interest Policy

If the Ethics Committee (which will be made up of disinterested parties), has reasonable cause to believe an Affiliated Individual has failed to disclose an actual or potential conflict of interest, it will promptly inform the Affiliated Individual of the basis for such belief and afford the member an opportunity to explain the alleged failure to disclose.

If, after hearing the Affiliated Individual's response and after making further investigation as warranted by the circumstances, the Ethics Committee determines the Affiliated Individual has failed to disclose the conflict or potential conflict of interest, it will take appropriate disciplinary and corrective action. The Ethics Committee's decision will be final.

While any such failure to disclose a conflict or potential conflict of interest is under investigation, the Affiliated Individual will be precluded from engaging in further decisions of **USFHA** that bear any relation whatsoever to the matter that is the subject of the conflict or potential conflict of interest.

9. Annual Disclosure Statements

Each Affiliated Individuals (as listed in Section 2 of this policy) will annually sign and submit to the Ethics Committee and **USFHA**'s Executive Director a statement, using the standardized form, affirming that they:

- 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 **USFHA** is a charitable organization 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. Each annual disclosure will be reviewed and addressed by the Ethics Committee.

Any actual, perceived, or potential conflict of interest should be disclosed in the annual statement.

Any new **USFHA** employee will submit a conflict of interest disclosure statement within 14 days of his or her hiring by **USFHA**. Any other new Affiliated Individual will submit a conflict of interest disclosure statement by the earlier of 14 days after his or her appointment or his or her first board, committee, or task force meeting. In no event will an Affiliated Individual participate in any decisions to commit **USFHA** to a proposed transaction or in athlete or team selection procedures prior to submission of his or her conflict of interest disclosure statement.

USFHA will maintain copies of all Annual Statements submitted under this Section 9 in accordance with the document retention policies and procedures.

10. Periodic Statements/Updates

In addition, each director, officer, committee member, task force member, hearing panel member, and employee will submit to the Ethics Committee a signed statement as necessary describing any new potential conflicts of interest as and when such potential conflicts of interest arises. **USFHA** will maintain copies of all periodic statements or updates submitted under this Section 10.

11. Anti-Retaliation

USA Field Hockey has zero tolerance for retaliation against people who make good faith reports of potential ethical, policy, financial or legal violations, or who cooperate with investigations of those reports. That means no Affiliated Individual may threaten, harass, discriminate against, or take any negative employment (where applicable) or participation related action (e.g., discharge, demotion, suspension, non-assignment, negative review) on that basis.

Any such retaliation can be reported as described above in the same way as any other policy violation. It will be treated as a violation this Policy and USA Field Hockey's Code of Conduct and may lead to serious consequences including termination of employment or participation for anyone involved in retaliation.

12. Conflict of Interest Policy Lead

Caitie Tornes (ctornes@usafielddhockey.com) can be contacted with any questions about this policy. The Ethics Committee and Chair are responsible for this policy and enforcement of this policy.

For Athletes With Questions Regarding This Conflict of Interest Policy:

The Athlete Ombudsman provides cost-free, independent and confidential advice regarding athlete rights; resolving disputes or grievances; and any sport rule, policy, or process, including NGB-athlete agreements, codes of conduct or team selection procedures. The Athlete Ombudsman can also help athletes connect with legal counsel or mental health resources if needed. Athletes may contact the Athlete Ombudsman at:

*PHONE: (719) 866-5000
EMAIL: ombudsman@usathlete.org
WEBSITE: www.usathlete.org*

For Additional Questions Regarding This Conflict of Interest Policy:

Please contact Holly Shick, Chief Ethics & Compliance Officer, USOPC

PHONE: 719-866-2018
EMAIL: Holly.Shick@usopc.org

USFHA CONFLICT OF INTEREST DISCLOSURE STATEMENT

I, _____, am a member of **USFHA** I attest to the following:

- I have received the **USFHA** Conflict of Interest Policy (the "Policy").
- I have read and understand the Policy.
- I agree to comply with the Policy.

Affiliated Persons include your family and other people or organizations close to you. *Affiliated persons can include:*

- *Your spouse, domestic partner, child, mother, father, brother, sister, grandparent, cousin or other blood relative;*
- *Any corporation or organization of which you are a board member, an officer, a partner, participate in management or are employed by, or are, directly or indirectly, a debt holder or beneficial owner of any class of equity securities; and*
- *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.*

Sport and Community Involvement

Please note all sport and USFHA community involvement. Please state the obvious – even if your involvement is widely known, be sure to note it here to be certain that any conflicts up front and easier to deal with.

- I own, operate or work at a business that is involved in our sport
- My family members or **affiliated persons** own, operate or work in a business that is involved in our sport
- I am actively participating in our sport as a competitor, official, coach or other type of participant
- My family member(s) or **affiliated person(s)** actively participate in our sport as a competitor, official, or other type of participant.

Detailed Declaration(s):

Do you or a Family Member own stock or hold debt or other proprietary interests in any third party dealing or who may potentially deal with USFHA?

- Yes
- No
- Not Sure

If yes, or if you are not sure, please provide the following information:

Who Holds, or May Hold the Proprietary Interest?

- Me
- An **Affiliated Person**, such as a family member or organization I am a part of
- Both

If someone else, who is that person/organization?

If someone else, how is this person or organization related to you?

What is the Proprietary Interest(s) held or that may be held?

Have you or a Family Member any of your affiliated persons provided services or been associated with a third party that has provided services or property to USFHA in the past year?

- Yes
- No
- Not Sure

If yes, or if you are not sure, please provide the following information:

Who was associated with the third party that provided goods or services to the NGB in the past year?

- Me
- An **Affiliated Person**, such as a family member or organization I am a part of
- Both

If an affiliated person or both, who is that person or organization?

What goods or services were provided to the NGB in the past year?

Do you or an **Affiliated Person** own a business, maintain a primary or secondary job, or provide goods or services under an agreement by which the outside business provides goods or services to USFHA, the USOPC, or another NGB?

- Yes
- No
- Not Sure

If yes, or if you are not sure, please provide the following information:

Who was associated with the third party that provided goods or services to the NGB in the past year?

- Me
- An **Affiliated Person**, such as a family member or organization I am a part of
- Both

If an **affiliated person** or both, who is that person or organization?

What goods and services have been or are to be provided to the NGB?

Have you or any of your **affiliated persons** purchased services or property from USFHA in the past year?

- Yes
- No
- Not Sure

If yes, or if you are not sure, please provide the following information:

Who was associated with the third party that purchased goods or services to the NGB in the past year?

- Me
- An **Affiliated Person**, such as a family member or organization I am a part of
- Both

If an **affiliated person** or both, who is that person or organization?

What goods and services have been or are to be purchased from the NGB?

Do you or an **Affiliated Person** hold office, serve on the board, participate in management, or are otherwise employed (or formerly employed) with a third party dealing with USFHA?

- Yes
- No
- Not Sure

If yes, or if you are not sure, please provide the following information:

Who held office, served on the Board, participated in management or was otherwise employed (for formerly employed) with a third party dealing with USFHA?

- Me
- An **Affiliated Person**, such as a family member or organization I am a part of
- Both

If an **affiliated person** or both, who is that person or organization?

What role(s) and/or organization(s) were you or your **affiliated persons** involved with?

What dealing(s) did the organization(s) noted above have with USFHA?

Did you or any of your affiliated persons had any direct or indirect interest in any business transaction(s) in the past year to which USFHA was or is a party.

- Yes
- No
- Not Sure

If yes, or if you are not sure, please provide the following information:

Who had a direct or indirect interest in dealing with USFHA?

- Me
- An **Affiliated Person**, such as a family member or organization I am a part of
- Both

If an **affiliated person** or both, who is that person or organization?

What direct or indirect interest in a transaction did you or the **affiliated person** have?

Do you or a Family Member act as an agent, representative, or consultant to a business whose interests may conflict with the interests of USFHA?

- Yes
- No
- Not Sure

If yes, or if you are not sure, please provide the following information:

Who has an interest that may conflict with the interests of USFHA?

- Me
- An **Affiliated Person**, such as a family member or organization I am a part of
- Both

If an **affiliated person** or both, who is that person or organization?

What potentially conflicting interest do you or the **affiliated person** have?

Were you or any of your affiliated persons indebted to pay money to USFHA at any time in the past year (other than travel advances or the like)?

- Yes
- No
- Not Sure

If yes, or if you are not sure, please provide the following information:

Who was indebted to USFHA in the past year?

- Me
- An **Affiliated Person**, such as a family member or organization I am a part of
- Both

If an **affiliated person** or both, who is that person or organization?

What debt did you or your **affiliated person** owe to USFHA in the past year?

Other than direct employment income, did you or an affiliated person make more than \$1000 from USFHA in the past year?

- Yes
- No
- Not Sure

If yes, or if you are not sure, please provide the following information:

Who was paid \$1000 or more by USFHA in the past year?

- Me
- An **Affiliated Person**, such as a family member or organization I am a part of
- Both

If an **affiliated person** or both, who is that person or organization?

Please describe the benefit and/or income paid to you or the **affiliated person**:

Are you or any of your **affiliated person(s)** a party to or do you or your affiliated person have an interest in any pending legal proceedings involving USFHA?

- Yes
- No
- Not Sure

If yes, or if you are not sure, please provide the following information:

Who is involved in a legal proceeding involving USFHA?

- Me
- An **Affiliated Person**, such as a family member or organization I am a part of
- Both

If an **affiliated person** or both, who is that person or organization?

What is the nature of the legal proceeding involving USFHA, you and/or an **affiliated person**?

Are you affiliated with an person who is an athlete competing for a spot on a USFHA national team, are you an athlete competing for a spot on the team, do you coach an athlete who is competing for a spot on the team, or do you have an immediate family member, employee, or colleague who is otherwise participating in the competition for which the selection committee has been convened?

- Yes
- No
- Not Sure

If yes, or if you are not sure, please provide the following information:

Who is the athlete competing for a spot on a national team, or the coach of an athlete competing for a spot on a national team?

- Me
- An **Affiliated Person**, such as a family member or organization I am a part of
- Both

If an **affiliated person** or both, who is that person?

What role do you or the **affiliated person** play?

- Competing Athlete
- Coach of a Competing Athlete

Do you or a Family Member have a business relationship with a sponsor, supplier, licensee or vendor of USFHA?

- Yes
- No
- Not Sure

If yes, or if you are not sure, please provide the following information:

Who is the person or organization with a business relationship with a sponsor, supplier, licensee or vendor?

- Me
- An **Affiliated Person**, such as a family member or organization I am a part of
- Both

If an **affiliated person** or both, who is that person?

What is the nature of the relationship you or the **affiliated person** has with the sponsor, supplier, licensee or vendor?

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 and/or would prefer be examined by USFHA Ethics Committee in accordance with the terms and intent of USFHA's Conflict of Interest Policy?

<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure
If yes, or if you are not sure, please provide the following information:
Who is the person or organization that you believe there may give rise to a conflict of interest?
<input type="checkbox"/> Me <input type="checkbox"/> An Affiliated Person , such as a family member or organization I am a part of <input type="checkbox"/> Both
If an affiliated person or both, who is that person?
What is the nature of the potential conflict you or the affiliated person may have?
Would you like to be contacted by a member of the USFHA Ethics Committee to discuss questions or comments about this declaration or to discuss the Conflict of Interest policy further?
<input type="checkbox"/> Yes <input type="checkbox"/> No

I HERBY CONFIRM 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 Chair of the Ethics Committee, Ron Hawley immediately.

Signature

Date