# University of Illinois

## Financial Disclosures and Conflict of Interest Review Checklist

### Financial Disclosures and Conflicts of Interest

**General Notes:**
This document is intended to provide guidance for completion and review. It will not cover every situation. If additional guidance is necessary, vendors should contact their University Project Manager. University PM/PAs should contact UOCP&RES for assistance. For more information, please refer to State Illinois Financial Disclosures and Conflicts of Interest Vendor Manual.

http://www.dnr.illinois.gov/procurement/Documents/DisclosureFormTrainingForVendors.pdf

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The Financial Disclosure includes the vendor, parent entity(ies), subcontractor(s), and disclosed interest. This step has been instructed in the step history. The Financial Disclosure is considered non-responsive if the financial disclosure is not submitted in the required format.

The requirements of disclosure of financial interests and conflicts of interest is a continuing obligation. If circumstances change and the disclosure is no longer accurate, then disclosing entities must provide an updated form.

Separate forms are required for the vendor, parent entity(ies), and subcontractors.

This disclosure is submitted for:

- [ ] Vendor
- [ ] Vendor's Parent Entity(ies) (100% ownership)
- [ ] Subcontractor(s) >$50,000
- [ ] Subcontractor's Parent Entity(ies) (100% ownership) > $50,000

### Project Name

Illinois Procurement Bulletin Number

Contract Number

Vendor Name

Doing Business As (DBA)

Disclosing Entity

Disclosing Entity's Parent Entity

Subcontractor

Instrument of Ownership or Beneficial Interest

If you selected Other, please describe.

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**Notes:**

1. The project name and procurement bulletin number are provided on the IPHEC Bulletin advertisement related to the project. For University of Illinois projects, this is typically PSS + University project number for Professional Services Submittals (QBS) or BA + University project number for Construction bid advertisements.
2. Secretary of State (SOS) requires registration for companies doing business in Illinois. Vendor information can be verified online at: [http://www.ilsos.gov/corporateLLC/](http://www.ilsos.gov/corporateLLC/). Sole proprietors are not required to register with the SOS.
3. Subcontractors includes sub-consultants.
4. Prime vendor is the company that has a contract directly with the University.
5. For advertisements with a publish date of January 23, 2015, the form must be V.15.1

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One of these check boxes must be selected and relate to the company name information provided in the next section.

Project Name can be found on the IPHEC Bulletin advertisement related to the project.

Illinois Procurement Bulletin Number can be found on the IPHEC Bulletin advertisement related to the project. (PSS or BA + project number).

The name of the vendor that is bidding/proposing or has a contract directly with the University. Vendor name must match the name registered with the SOS.

Subcontractors should provide the name of the prime vendor in this box.

Only required if the vendor uses a name other than the one registered with the SOS.

This form should be answered from the perspective of the disclosing entity. Include the name of the disclosing entity.

If vendor company is owned by a parent entity, provide parent entity company name. If multiple parent entities exist, each must complete a separate form. This is required for subcontractors.

If vendor company is a subcontractor, the company name must be provided here and vendor name above completed with the prime vendor name.

The drop down list includes the most frequently selected organization types. One of these check boxes must be selected. If other is selected, a description must be provided.
Financial Disclosures and Conflict of Interest Review Checklist

STEP 1
SUPPORTING DOCUMENTATION SUBMITTAL
(All vendors complete regardless of annual bid, offer, or contract value)
(Subcontractors with subcontract annual value of more than $50,000 must complete)

You must select one of the six options below and select the documentation you are submitting. You must provide the documentation the applicable section requires with this form.

☐ Option 1 - Publicly Traded Entities

1.A. Complete Step 2, Option A for each qualifying individual or entity holding any ownership or distributive income share in excess of 5% or an amount greater than 60% ($106,447.20) of the annual salary of the Governor.

     OR

1.B. Attach a copy of the Federal 10-K, and I will skip to Step 3.

☐ Option 2 - Privately Held Entities with More than 200 shareholders

2.A. Complete Step 2, Option A for each qualifying individual or entity holding any ownership or distributive income share in excess of 5% or an amount greater than 60% ($106,447.20) of the annual salary of the Governor.

     OR

2.B. Complete Step 2, Option A for each qualifying individual or entity holding any ownership in excess of 5% and will attach the information on Federal 10-K reporting companies are to report under 17 CFR 205.401.

☐ Option 3 - All other Privately Held Entities not including Sole Proprietorships

3.A. Complete Step 2, Option A for each qualifying individual or entity holding any ownership or distributive income share in excess of 5% or an amount greater than 60% ($106,447.20) of the annual salary of the Governor.

☐ Option 4 - Foreign Entities

4.A. Complete Step 2, Option A for each qualifying individual or entity holding any ownership or distributive income share in excess of 5% or an amount greater than 60% ($106,447.20) of the annual salary of the Governor.

     OR

4.B. Attach a copy of the Securities Exchange Commission Form 20-F or 40-F and will skip to Step 3.

☐ Option 5 - Not-for-Profit Entities

☐ Complete Step 2, Option B.

☐ Option 6 - Sole Proprietorships

☐ Skip to Step 3.

One of these options (1-6) must be selected.

- For each option selected, a secondary box must also be selected including those with one secondary box.
- Verify that the secondary box instructions corresponds to the steps (2 or 3) completed in the form.

For example, if Option 1 and 1.B. are selected (note that both check boxes should be marked), then a copy of the Federal 10-K must be attached (this can be a link to the 10-K on the SEC website) and Step 3 should be completed (Step 2 is not required).
STEP 2
DISCLOSURE OF FINANCIAL INTEREST OR BOARD OF DIRECTORS
(All vendors, except sole proprietorships, must complete regardless of annual bid, offer, or contract value)
(Subcontractors with subcontract annual value of more than $50,000 must complete)

Complete either Option A (for all entities other than not-for-profits) or Option B (for not-for-profits). Please include an attachment if necessary.

OPTION A - Ownership Share and Distributive Income

Ownership Share - If you selected Option 1.A, 2.A, 2.B, 3.A, or 4.A. in Step 1, provide the name and address of each individual or entity and their percentage of ownership if said percentage exceeds 5%, or the dollar value of their ownership if said dollar value exceeds $106,447.20.

If an attachment is provided in lieu of completing the tables, these boxes must be checked.

Distributive Income - If you selected Option 1.A, 2.A, 3.A, or 4.A. in Step 1, provide the name and address of each individual or entity and their percentage of the disclosing vendor’s total distributive income if said percentage exceeds 5% of the total distributive income of the disclosing entity, or the dollar value of their distributive income if said dollar value exceeds $106,447.20.

If Step 2 Option A is required per Step 1, both tables (X & Y) must be completed, if applicable.
University of Illinois
Financial Disclosures and Conflict of Interest Review Checklist

Please certify that the following statements are true.

I have disclosed all individuals or entities that hold an ownership interest of greater than 5% or greater than $106,447.20.

[ ] Yes  [ ] No

I have disclosed all individuals or entities that were entitled to receive distributive income in an amount greater than $106,447.20 or greater than 5% of the total distributive income of the disclosing entity.

[ ] Yes  [ ] No

OPTION B - Disclosure of Board of Directors (Not-for-Profits)

If you selected Option 5 in Step 1, list members of your board of directors. Please include an attachment if necessary.

TABLE 2

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

STEP 3

DISCLOSURE OF LOBBYIST OR AGENT

(Complete only if bid, offer, or contract has an annual value over $25,000)
(Subcontractors with subcontract annual value of more than $50,000 must complete)

[ ] Yes  [ ] No  Your company represented by or do you employ a lobbyist required to register under the Lobby Registration Act (lobbyist must be registered pursuant to the Act with the Secretary of State) or other agent identified through Step 2, Option A above and who has communicated, is communicating, or may communicate with any State/Public University officer or employee concerning the bid or offer? If yes, please identify each lobbyist or agent, including the name and address below.

If you have a lobbyist that does not meet the criteria, then you do not have to disclose the lobbyist’s information.

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Relationship to Disclosing Entity</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Describe all costs/fees/compensation/reimbursements related to the assistance provided by each representative lobbyist or other agent to obtain this Agency/ University contract:

Note: A “Yes” response to Step 3 requires a review and documentation per the Conflict of Interest Procedures.
Neural 자연 언어에서의 코딩은 아래와 같이 처리되었습니다.

**STEP 4**
**PROHIBITED CONFLICTS OF INTEREST**
(All vendors must complete regardless of annual bid, offer, or contract value)
(Subcontractors with subcontract annual value of more than $50,000 must complete)

Step 4 must be completed for each person disclosed in Step 2, Option A and for sole proprietors identified in Option 6 above.

Please provide the name of the person for which responses are provided:

1. Do you hold or are you the spouse or minor child who holds an elective office in the State of Illinois or hold a seat in the General Assembly? [ ] Yes [ ] No
2. Have you, your spouse, or minor child been appointed to or employed in any offices or agencies of State government and receive compensation for such employment in excess of 60% ($106,447.20) of the salary of the Governor? [ ] Yes [ ] No
3. Are you or are you the spouse or minor child of an officer or employee of the Capital Development Board or the Illinois Toll Highway Authority? [ ] Yes [ ] No
4. Have you, your spouse, or an immediate family member who lives in your residence currently or who lived in your residence within the last 12 months been appointed as a member of a board, commission, authority, or task force authorized or created by State law or by executive order of the Governor? [ ] Yes [ ] No
5. If you answered yes to any question in 1-4 above, please answer the following: Do you, your spouse, or minor child receive from the vendor more than 7.5% of the vendor's total distributable income or an amount of distributable income in excess of the salary of the Governor ($177,142.00)? [ ] Yes [ ] No
6. If you answered yes to any question in 1-4 above, please answer the following: Is there a combined interest of self with spouse or minor child more than 15% ($354,824.00) in the aggregate of the vendor's distributable income or an amount of distributable income in excess of two times the salary of the Governor? [ ] Yes [ ] No

If Step 2 was completed or Step 1 - Option 6 selected, Step 4 must also be completed for each individual identified. A name must be provided on this line and a separate copy made for each person identified. Note: Multiple names on the line are acceptable if the responses are the same for all.

**Questions 1-4 must be completed with a “Yes” or “No” response. Questions 5 & 6 are required only, if there is a “Yes” response to any of the previous questions.**

**Notes:** A “Yes” response to Step 4 requires:
- Review and documentation per the Conflict of Interest Procedures
- Explanation by the Vendor in Step 6 for each “Yes” response.

**STEP 5**
**POTENTIAL CONFLICTS OF INTEREST RELATING TO PERSONAL RELATIONSHIPS**
(Complete only if bid, offer, or contract has an annual value over $25,000)
(Subcontractors with subcontract annual value of more than $50,000 must complete)

Step 5 must be completed for each person disclosed in Step 2, Option A and for sole proprietors identified in Option 6 above.

Please provide the name of the person for which responses are provided:

1. Do you currently have, or in the previous 3 years have you had State employment, including contractual employment of services? [ ] Yes [ ] No
2. Has your spouse, father, mother, son, or daughter, had State employment, including contractual employment for services, in the previous 2 years? [ ] Yes [ ] No

If Step 2 was completed or Step 1 - Option 6 selected, Step 5 must also be completed for each individual identified. A name must be provided on this line and a separate copy made for each person identified. Note: Multiple names on the line are acceptable if the responses are the same for all.

Each question must be completed with a “Yes” or “No” response.
Each question must be completed with a “Yes” or “no” response.

Notes: A “Yes” response to Step 5 requires:
- Review and documentation per the Conflict of Interest Procedures
- Explanation by the Vendor in Step 6 for each “Yes” response.

Notes: A “Yes” response in Step 4 or Step 5 requires detailed explanation for each affirmative response on a separate page. For clarity, the additional page(s) should be titled or refer to Step 6 and indicate the person/Step/Question requiring the explanation.

STEP 6
EXPLANATION OF AFFIRMATIVE RESPONSES
[All vendors must complete regardless of annual bid, offer, or contract value]
(Subcontractors with subcontract annual value of more than $50,000 must complete)

If you answered “Yes” in Step 4 or Step 5, please provide on an additional page a detailed explanation that includes, but is not limited to the name, salary, State agency or university, and position title of each individual.
STEP 7
POTENTIAL CONFLICTS OF INTEREST RELATING TO DEBARMENT & LEGAL PROCEEDINGS
(Complete only if bid, offer, or contract has an annual value over $25,000)
(Subcontractors with subcontract annual value of more than $50,000 must complete)

This step must be completed for each person disclosed in Step 2, Option A, Step 3, and for each entity and sole proprietor disclosed in Step 1.

Please provide the name of the person or entity for which responses are provided:

1. Within the previous ten years, have you had debarment from contracting with any governmental entity?
   - Yes □ No □
2. Within the previous ten years, have you had any professional licensure discipline?
   - Yes □ No □
3. Within the previous ten years, have you had any bankruptcies?
   - Yes □ No □
4. Within the previous ten years, have you had any adverse civil judgments and administrative findings?
   - Yes □ No □
5. Within the previous ten years, have you had any criminal felony convictions?
   - Yes □ No □

If you answered “Yes”, please provide a detailed explanation that includes, but is not limited to the name, State agency or university, and position title of each individual.

Notes: A “Yes” response in Step 7 requires detailed explanation for each affirmative response on a separate page. For clarity, the additional page(s) should be titled or refer to Step 7 and indicate the person/question # requiring the explanation.

STEP 8
DISCLOSURE OF CURRENT AND PENDING CONTRACTS
(Complete only if bid, offer, or contract has an annual value over $25,000)
(Subcontractors with subcontract annual value of more than $50,000 must complete)

If you selected Option 1, 2, 3, 4, or 6 in Step 1, do you have any contracts, pending contracts, bids, proposals, or other ongoing procurement relationships with units of State of Illinois government?
   - Yes □ No □

If “Yes”, please specify below. Attach an additional page in the same format as provided below, if desired.

<table>
<thead>
<tr>
<th>Agency/University</th>
<th>Project Title</th>
<th>Status</th>
<th>Value</th>
<th>Contract Reference/P.O./Illinois Procurement Bulletin #</th>
</tr>
</thead>
</table>

Please explain the procurement relationship:

If “Yes” was selected, this table and the description must be completed. Procurement relationship should indicate prime or sub for each procurement. If a separate page is used, the additional page(s) should be titled or refer to Step 8. The procurement relationship can be added as another column in the table for each contract identified.
University of Illinois

Financial Disclosures and Conflict of Interest Review Checklist

STEP 9
SIGN THE DISCLOSURE
(All vendors must complete regardless of annual bid, offer, or contract value)
(Subcontractors with subcontract annual value of more than $50,000 must complete)

This disclosure is signed, and made under penalty of perjury for all for-profit entities, by an authorized officer or employee on behalf of the bidder or offeror pursuant to Sections 50-13 and 50-35 of the Illinois Procurement Code. This disclosure information is submitted on behalf of:

Name of Disclosing Entity: 

Signature:  

Printed Name:  

Title:  

Phone Number:  

Email Address:  

Date:  

The date should reasonably correspond to the bid or proposal date for Primes or the submittal date for subs

The signature block must be completed and signed.

Notes:
For the most recent version of this form, use the following URL:
http://www.procure.stateuniv.state.il.us/PublicDocs/VendorForms/FinancialDisclosuresAndConflictsOfInterest.pdf