**ETHICAL CONDUCT AND CONFLICTS OF INTEREST**

1. Disclosure of Conflict of Interest.
	1. A consultant or independent contractor of IMC who is a party to or who is interested in a project, as more fully described in paragraph (b) below, shall immediately disclose the nature and extent of the interest to the IMC Executive Director.
	2. A consultant or independent contractor of IMC (any such person being a “Covered

Person”) shall be deemed to have an Adverse Interest and to be subject to the requirement for disclosure as described in paragraph (a) above if any of the following conditions are met:

1. The Covered Person has a financial interest in a project;
2. A member of the immediate family of the Covered Person has an interest in a project;
3. A Covered Person has an employer-employee, partnership, agency, lender or borrower, fiduciary or has legal or beneficial ownership in a party to or a person financially interested in a project; or
4. A situation or matter exists which might reasonably be expected to influence a Covered Person in the discharge of the Covered Person’s official duties concerning a project.
5. Prohibited Activities. No consultant or independent contractor of IMC may directly or indirectly use for personal gain any information not available to the public concerning a project which comes to him/her or is as a result of affiliation with IMC, nor may such person or entity provide that information to others not directly connected with IMC’s investigation concerning the feasibility, development or establishment of a project.
6. Remedies. The failure to make any required disclosure under this policy or any other breach of this policy is grounds for disciplinary action by IMC against the Covered Person, which disciplinary action may include termination of any consulting or other contract or arrangement, and is grounds for disapproval of an application or rescission of a project by IMC. The remedies provided herein shall be in addition to any other legal remedies available to IMC.

**Acknowledgment and Acceptance of Conflict of Interest Policy**

I have read and understand the above statement regarding conflicts of interest. I acknowledge that there are no current transactions or activities, which may represent a potential competing or conflicting interest, as defined above as it relates to my relationship with IMC. Further, I acknowledge that I must disclose to the IMC Executive Director any transaction or activities which might be covered by the above regarding Ethical Conduct and Conflicts of Interest. Finally, I understand that failure to comply with the above will cause irreparable damage to IMC and its activities, and the remedies set forth and other legal and equitable remedies necessary to protect IMC from further harm are appropriate.

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

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

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