CONFLICT OF INTEREST POLICY

For
FLORIDA WEST COAST OPERATING ENGINEERS APPRENTICESHIP TRUST FUND

WITNESSETH

WHEREAS, the **FLORIDA WEST COAST OPERATING ENGINEERS APPRENTICESHIP TRUST FUND** (hereinafter FUND) is governed by a Board of Trustees, whose members have acknowledged that each of them is a fiduciary with respect to the FUND; and,

WHEREAS, by virtue of their status as Trustees and fiduciaries to the FUND, each Trustee has accepted certain obligations to act solely in the interest of the participants and beneficiaries of the FUND; and

WHEREAS, by virtue of their status as Trustees and fiduciaries to the FUND, each Trustee has accepted certain obligations to not deal with the assets of the plan in his or her own interest or for his or her own account; and

WHEREAS, by virtue of their status as Trustees and fiduciaries to the FUND, each Trustee has accepted certain obligations to not act in his or her individual or any other capacity in any transaction involving the plan on behalf of a party (or represent a party) whose interests or the are adverse to the interests of the FUND or the interests of the participants and beneficiaries of the FUND; and

WHEREAS, by virtue of their status as Trustees and fiduciaries to the FUND, each Trustee is prohibited from receiving any consideration for his or her own personal account from any party dealing with the FUND in connection with a transaction involving the assets of the FUND

NOW THEREFORE, the Board of Trustees adopts this Conflict of Interest Policy to read as follows:

No Trustee or employee of the **FLORIDA WEST COAST OPERATING ENGINEERS APPRENTICESHIP TRUST FUND** shall derive any personal profit or gain, directly or indirectly, by reason of his or her service as a Trustee of the FUND.

Each individual shall disclose to the FUND any personal interest which he or she may have in any matter pending before the FUND and shall refrain from participation in any decision on such matter.

This Policy recognizes that Trustees of the FUND are appointed by the bargaining parties to the collective bargaining agreement(s) providing for contributions to the FUND and such Trustees may serve or be included in other capacities, included but not limited to:

A. Participation as a participant and/or beneficiary of the FUND, and/or

B. Service as a Trustee of related employee benefit plans which are related to FUND by virtue of having common plan sponsors, and/or

C. Status as an employee, member and/or officer of sponsoring employer or employee organizations.

Service or inclusion in such other capacities shall not constitute a violation of this Policy.

Subject to the foregoing no Trustee shall:

A. Become a party, directly or indirectly, in any arrangement, agreement, investment, or other activity with any vendor, supplier, or other party; doing business with the FUND (or seeking to do business with the FUND) which has resulted or could result in personal benefit to the Trustee.

B. Receive, directly or indirectly, any salary, payment, loan, gift, gratuities, meals, entertainment, or any other consideration or any free service or discounts or other fees from or on behalf of any person or entity (including any employee, affiliate, or other related party) engaged in (or seeking to engage in) any transaction with the FUND that has an aggregate annual value of $250 or more (per person or organization). In determining the aggregate annual value, any salary, payment, loan, gift, gratuities, meals, entertainment, or any other consideration or any free service or discounts or other fees from or on behalf of any person or entity engaged in (or seeking to engage in) any transaction with the FUND received by a relative shall be included.

THIS CONFLICT OF INTEREST POLICY adopted this _____ day of_____, 2021.

EMPLOYER TRUSTEES **EMPLOYEE TRUSTEES**

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CERTIFICATION OF COMPLIANCE

The Undersigned Trustees acknowledge te terms of the Conflict Policy above and confirm compliance with the policy during the period since their prior Certification of Compliance.

EMPLOYER TRUSTEES **EMPLOYEE TRUSTEES**

_____ _____

Date Date

_____ _____

Date Date

_____ _____

Date Date