

TEACHER RETIREMENT SYSTEM OF TEXAS
KEY EMPLOYEE ENHANCED DISCLOSURE FORM

In completing this form, the reporting year is January 1 through December 31 of the prior calendar year. You may attach additional sheets if necessary for complete disclosures.

Name: _____

Reporting Year: _____

Spouse's Name: _____

Dependent Children's Names: _____

Other Economic Dependents' Names: _____

SUMMARY OF INFORMATION

Indicate yes or no to the following:

I am disclosing non-TRS Employment (page 2): _____

I am disclosing material debt or debts, defined for this purpose as a debt of of \$25,000 or more (page 3): _____

I am disclosing a benefit or benefits received from a Restricted Donor (page 4): _____

I am disclosing a non-TRS fiduciary position (page 5): _____

I am disclosing privately held investments (page 6): _____

EMPLOYMENT

Your Non-TRS Employment

I have non-TRS employment during the reporting year: _____ (yes/no)

If yes, provide the following information.

Name and address of employer:

Nature of employment:

Spousal Employment (if applicable):

Name and address of employer:

Nature of employment:

Dependent Child Employment (if applicable):

Name and address of employer:

Nature of employment:

Name and address of employer:

Nature of employment:

Name and address of employer:

Nature of employment:

Other Economic Dependent Employment (if applicable):

Name and address of employer:

Nature of employment:

Name and address of employer:

Nature of employment:

Name and address of employer:

Nature of employment:

DISCLOSABLE DEBTS:

Did or do you, your spouse, dependent child, and/or other financial dependent owe any lender or creditor a debt or aggregate debts of \$25,000 or more during the reporting year? _____ (yes/no)

If no, move on to the next section. If yes, provide the following information for each debt of \$25,000 or more actually owed at any time during the reporting year. If you, your spouse, dependent child, and/or other financial dependent owed aggregate debts of \$25,000 or more to any lender or creditor, please list each debt separately.

Creditor:
Borrower:
Guarantor if any:
Principal owed (as of 12/31):

Creditor:
Borrower:
Guarantor if any:
Principal owed (as of 12/31):

Creditor:
Borrower:
Guarantor if any:
Principal owed (as of 12/31):

Creditor:
Borrower:
Guarantor if any:
Principal owed (as of 12/31):

Creditor:
Borrower:
Guarantor if any:
Principal owed (as of 12/31):

Creditor:
Borrower:
Guarantor if any:
Principal owed (as of 12/31):

BENEFITS FROM RESTRICTED DONORS

Have you, your spouse, dependent child, or other financial dependent received any benefit (e.g., gift) worth more than \$50 from a Restricted Donor during the reporting year? _____ (yes/no)

“Benefit” means any gift, item, favor, payment, or service, including a promised future benefit, whether or not such gift, item, favor, payment, or service has a pecuniary value, and includes, without limitation, any gift, item, favor, payment, or service given to or accepted by a person in whose welfare an Employee has a direct and substantial interest. A Benefit does not include a gift, item, favor, payment, or service for which TRS has given due consideration.

“Restricted Donor” means (1) persons or entities with which TRS does business, (2) persons or entities seeking to do business with TRS or with whom TRS is considering doing business, (3) non-publicly traded entities in which TRS invests or is considering investing, (4) publicly traded entities in which TRS invests or is considering investing, but only if the Employee knows that the publicly traded entity is interested in or likely to become interested in a TRS contract, purchase, payment, claim or transaction, (5) persons or entities seeking official action from TRS, or (6) any other person or entity who gives the Benefit because of the Employee’s official position with TRS. Persons employed by the same entity, and entities with common ownership or control, shall be considered to be a single donor.

If no, move to the next section. If yes, provide the following information.

Name of recipient:
Name and address of donor:
Description of gift:
Value of gift:

Name of recipient:
Name and address of donor:
Description of gift:
Value of gift:

Name of recipient:
Name and address of donor:
Description of gift:
Value of gift:

Name of recipient:
Name and address of donor:
Description of gift:
Value of gift:

NON-TRS FIDUCIARY POSITIONS

Did or do you, your spouse, dependent child, or other financial dependent hold any non-TRS office or position that owed fiduciary duties during the reporting year? _____ (yes/no)

If yes, provide the following information.

Organization:
Position Held:
Position Held by:

DISCLOSABLE PRIVATELY HELD INVESTMENTS

Do or did you, your spouse, dependent child, or other financial dependent hold an interest in any privately held investment (e.g., limited partnership, closely held corporation, limited liability company) during the reporting year? _____ (yes/no)

If no, move to the next section. If yes, provide the following information.

Held by:
Name of investment:
Date Acquired:
Estimated value of investment (as of 12/31):

Held by:
Name of investment:
Date Acquired:
Estimated value of investment (as of 12/31):

Held by:
Name of investment:
Date Acquired:
Estimated value of investment (as of 12/31):

Held by:
Name of investment:
Date Acquired:
Estimated value of investment (as of 12/31):

Held by:
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Date Acquired:
Estimated value of investment (as of 12/31):

Held by:
Name of investment:
Date Acquired:
Estimated value of investment (as of 12/31):

Held by:
Name of investment:
Date Acquired:
Estimated value of investment (as of 12/31):

Teacher Retirement System of Texas
Key Employee Financial Disclosure Form

DECLARATION

My name is

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____.

Signature: _____

Print Name: