

FINANCIAL INTEREST DISCLOSURE FORM 1

FULL NAME: _____

PART A: REQUIRED TRAINING

I certify that I have reviewed and understand the contents of the required training.

PART B: SIGNIFICANT FINANCIAL INTEREST

- | | | |
|---|-----|----|
| 1. Have/will you ⁱ receive(d) income (e.g. gifts, favors, loans, services, salary, consulting fees), and/or have/will you possess(ed) an equity/managerial interest from/in a <u>publicly traded entity</u> deemed a Significant Financial Interest (SFI) ⁱⁱ ? | YES | NO |
| 2. Have/will you receive(d) income (e.g. gifts, favors, loans, services, salary, consulting fees) from a <u>non-publicly traded entity</u> deemed a SFI ? | YES | NO |
| 3. Do/will you possess an equity/ managerial interest in a <u>non-publicly traded entity</u> deemed a SFI ? | YES | NO |
| 4. Do you receive income from any Intellectual property rights and interests (e.g. patents, licenses, royalties, and copyrights) deemed a SFI ? | YES | NO |
| 5. Have/will you receive(d) reimbursed or sponsored travel deemed a SFI ? | YES | NO |

If you have answered YES to any of the questions in Part B, please provide a list of all entities in the box below and complete, sign, and return an additional form, **Financial Interest Disclosure Form 2**, for each significant financial interest along with this form to the Vice President for Finance and Administration for further review.

Entities/ Intellectual Property:

I certify, to the best of my knowledge and belief, that the above questions have been answered correctly and that I will update and revise the answers as required.

Signature _____

Date _____

ⁱ **You** means you, your spouse, and/or dependent children.

ⁱⁱ **Significant Financial Interest (SFI)** means a financial interest of a value exceeding a *Defined Threshold** that is reasonably related to your *Institutional Responsibilities* ** and/or could reasonably affect or be affected by the outcome of the sponsored project and has been/will be possessed and/or received during a 12-month period prior to and/or after the disclosure. The following EXCLUSIONS apply to the definition of a SFI:

- Salary, royalties, or other remuneration paid by the University to University Personnel (UP) if UP are currently employed or otherwise appointed by the University, including intellectual property rights assigned to the University and agreements to share in royalties related to such rights;
- Income from investment vehicles, such as mutual funds and retirement accounts, as long as UP do not directly control the investment decisions made in these vehicles;
- Income from seminars, lectures, or teaching engagements sponsored by a Federal, state, or local government agency (Government Agency), an Institution of higher education as defined in 20 U.S.C. 1001(a) (Higher Education Institution), an academic teaching hospital, a medical center, or a research institute that is affiliated with a Higher Education Institution;
- Income from service on advisory committees or review panels for a Government Agency, a Higher Education Institution, an academic teaching hospital, a medical center, or a research institute that is affiliated with a Higher Education Institution;
- Travel reimbursed or sponsored by a Government Agency, a Higher Education Institution, an academic teaching hospital, a medical center, or a research institute that is affiliated with a Higher Education Institution; and
- Grants and contracts administered through the University.

**Defined Threshold* means:

- \$5000 aggregate amount, on an entity-by-entity basis, for each of the following categories: 1) income from and equity in a publicly traded entity; 2) income from a non-publicly traded entity; 3) income from any intellectual property rights and interests; and 4) reimbursed or sponsored travel.
- \$0 aggregate amount, on an entity-by-entity basis, for: 1) equity in a non-publicly traded entity; 2) income from managerial interest.

** *Institutional Responsibilities* means University Personnel’s professional responsibilities on behalf of the University, which may include for example: current or proposed activities such as research, research consultation, research-related student supervision, teaching, professional practice, institutional committee memberships, and service on panels such as Institutional Review Boards or Data and Safety Monitoring Boards.

**FINANCIAL INTEREST DISCLOSURE
FORM 2**

FULL NAME: _____

Award/Proposal No.: _____

Sponsoring Agency: _____

1) NATURE OF THE FINANCIAL INTEREST:

(EXAMPLES: TRAVEL, OWNERSHIP INTEREST, GIFT, CONSULTING FEES, EQUITY INTEREST, MANAGERIAL INTEREST, LOAN)

2) NAME, ADDRESS, & WEB ADDRESS OF ENTITY:

3) DESCRIPTION OF THE BUSINESS OR SERVICE(S) PROVIDED BY THE ENTITY:

4) YOUR RELATIONSHIP WITH THE ENTITY:

5) BUSINESS STRUCTURE OF ENTITY

(EXAMPLES: PUBLICLY TRADED FOR-PROFIT ENTITY, NONPUBLIC FOR-PROFIT ENTITY, NONPROFIT ENTITY, FOUNDATION)

6) WHAT IS THE ROLE OF THE ENTITY, IF ANY, IN THIS SPECIFIC SPONSORED PROJECT

NONE SPONSOR SUBRECIPIENT VENDOR OTHER _____

7) JUSTIFICATION FOR THE ENTITY'S INCLUSION IN THIS SPONSORED PROJECT:

8) VALUE OF FINANCIAL INTEREST:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$0-4,999 | <input type="checkbox"/> \$5,000-9,999 | <input type="checkbox"/> \$10,000-19,999 | <input type="checkbox"/> \$20,000-39,999 |
| <input type="checkbox"/> \$40,000-59,999 | <input type="checkbox"/> \$60,000-79,999 | <input type="checkbox"/> \$80,000-99,999 | <input type="checkbox"/> \$100,000-150,000 |
| <input type="checkbox"/> OTHER AMOUNT _____ | <input type="checkbox"/> UNASCERTAINABLE. PLEASE PROVIDE AN EXPLANATION. | | |

9) TRAVEL (IF NOT APPLICABLE, PLEASE SKIP.)

A. PERSON(S) TRAVELING: SELF SPOUSE DEPENDENT CHILD

I. NAME(S), IF SPOUSE AND/OR DEPENDENT CHILD:

B. PURPOSE: _____

C. PROVIDED BY: _____

D. DESTINATION: _____

E. DURATION: _____

10) DESCRIPTION OF HOW THIS ENTITY RELATES TO OR IMPACTS THIS SPECIFIC SPONSORED PROJECT:

11) DESCRIPTION OF HOW TO SAFEGUARD OBJECTIVITY OF THIS SPECIFIC SPONSORED PROJECT DESPITE THIS SIGNIFICANT FINANCIAL INTEREST:

12) DESCRIPTION OF HOW TO MONITOR THIS SPECIFIC SPONSORED PROJECT TO ENSURE OBJECTIVITY AND RESEARCH INTEGRITY DESPITE THIS SIGNIFICANT FINANCIAL INTEREST:

13) DESCRIPTION OF ANY SUPERVISORY ROLE YOU HAVE IN THIS SPONSORED PROJECT:

I CERTIFY, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THAT THE ABOVE QUESTIONS HAVE BEEN ANSWERED CORRECTLY AND THAT I WILL UPDATE AND REVISE THE ANSWERS AS REQUIRED.

SIGNATURE _____ DATE _____
