

Financial Conflict of Interest Disclosure Form

The HU Policy on Financial Conflict of Interest reminds HU Investigators that the requirements of 42 CFR Part 50, Subpart F, Objectivity of Research, apply to each institution, domestic and foreign, that applies for or receives sponsored funding in the form of grants or cooperative agreements. Further, this policy applies to all sponsored projects regardless of funding source. The regulation, also known as the Financial Conflict of Interest (FCOI) regulation, applies to both prime and subrecipient institutions, domestic or foreign, and through implementation, to each Investigator who is planning to participate in, or is participating in, such research or cooperative agreement. This regulation does not, however, apply to Phase I Small Business Innovative Research and Small Business Technology Transfer applications or awards.

The purpose of the policy (predicated on the NIH policy on FCOI) is to promote objectivity in research by establishing standards that provide a reasonable expectation that the design, conduct, and reporting of extramurally funded projects is free from bias resulting from Investigator financial conflicts of interest. In the case of Howard University, this policy applies to all scientific engagements.

SECTION I: GENERAL INFORMATION

1. Discloser: _____ Phone: _____
2. School/College/Business Unit: _____
3. Project Title:
4. PeopleSoft Project ID (if available): _____
5. Provide the following information regarding the Sponsor/Entity in which you have a financial interest:
 - a. Affiliation: Federal Non-Federal
 - b. Name of Entity: _____
 - c. Type of Business: _____
 - d. Address: _____
 - e. City: _____ State: _____ Zip Code: _____

SECTION II: Description of Financial Interest

A. Marketing

1. Yes No Do you, your spouse, or a dependent child(ren) hold a position of management or employment with the Sponsor/Entity? If Yes, please specify below.

| | | |
|-----------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Director | <input type="checkbox"/> Employee | <input type="checkbox"/> Member, Board of Directors |
| <input type="checkbox"/> Officer | <input type="checkbox"/> Partner | <input type="checkbox"/> Scientific Advisory Board Member |
| <input type="checkbox"/> Trustee | <input type="checkbox"/> Other: _____ | |

2. Describe the responsibilities of your or their position(s) with the Sponsor/Entity and how it relates to the project to be funded by, or license/option agreement to be held by, the Sponsor/Entity.
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B. Consulting

1. Yes No Are you a consultant with this Sponsor/Entity? If Yes, please answer questions 3, 4 and 5.
2. Yes No Do you plan to be a consultant with this Sponsor/Entity? If Yes, please explain.
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3. Yes No Do you have a written consulting agreement with the Sponsor/Entity (non-University agreement)?
4. Please describe in detail the frequency and nature of your consulting activities and how the consulting duties are separate from the scope of work of the proposed project.
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5. Yes No Will the terms of your consulting agreement in any way restrict the release of information or other dissemination of results by faculty/researchers involved in the project? If Yes, please explain.
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C. Income/Consideration

1. Yes No Excluding gifts, contracts or grants administered by Howard University, have you, your spouse or dependent child(ren) received income or anything else of value from the Sponsor/Entity in the past 12 months? If Yes, please answer A and B.
- A. What is the monetary value range of what will be/was received from the Sponsor/Entity?
- Below \$5,000 Above \$5,000 Non-monetary compensation (e.g., tickets)
- B. The value will be received as:
- Consulting fees Honoraria Salary Other: _____
2. Yes No Have you loaned money to or borrowed money from the Sponsor/Entity? If Yes, please provide the amount of the loan and explain the arrangements.
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3. Yes No Will you receive a royalty through the University under a license from the University to the Sponsor/Entity? If Yes, please describe and provide the University's Office of the General Counsel file number describing the licensed invention.
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D. Equity

1. Yes No Do you, your spouse, or a dependent child(ren) currently or plan to hold equity interest in this Sponsor/Entity? If Yes, please answer questions 2, 3 and 4.

2. Please indicate what percentage of the total company shares you hold or will hold. _____ %

3. What is the nature of this equity interest?

Bonds Stocks-Stock Options Convertible security Other: _____

4. What is the value of this equity interest?

Below \$5,000 Above \$5,000

Please note: If the stock is not publicly traded, please provide an internal estimate of value. \$ _____

SECTION III: Relationship with Entity

A. Direct and Significant Impact on Financial Interests

1. Yes No Is Sponsor/Entity a subcontractor, consortium member, supplier of goods or services, or lessor involved in the project? If Yes, please explain.

2. Yes No Does the Sponsor/Entity manufacture or commercialize any device, vaccine, procedure, drug or any product associated with this project? If Yes, please explain.

3. Yes No Will the project purchase/lease any device/material/service from the Sponsor/Entity? If Yes, please provide name and approximate cost.

4. Yes No Is it reasonable to anticipate that the Sponsor/Entity will or could be directly and significantly affected by the design, conduct or reporting of the proposed project activity or license? If Yes, please explain.

5. Yes No Is the Sponsor/Entity a non-profit organization? If Yes, answer questions A and B.

A. Yes No Do you have a financial interest in the company(ies) that is (are) providing funds to this non-profit organization? If Yes, please explain.

B. Yes No The non-profit organization is primarily a vehicle for one or two companies or a closely cooperating group of businesses. If Yes, please explain (you may provide a website showing the relationship between the non-profit organization and its corporate supporters or members).

B. Separation of University and Outside Interests

1. How will you keep your interests and obligations to the Sponsor/Entity separate from your University activity?

2. Were you part of a formal committee/body that made the decision which led to the project award or the license agreement?

Yes If Yes, please explain.

No If no, and you were present when the decision was made, please provide either a written statement or a copy of the meeting minutes.

3. Yes No Is the Sponsor/Entity providing any proprietary data, materials or equipment? If Yes, please explain what control on access to the project activity will be necessary.

4. Yes No Does the Sponsor/Entity participate in deciding the direction of the project? If Yes, please explain what role the entity will play.

C. Use of University Resources and Facilities

1. Where will the proposed project activity be conducted? _____

2. Yes No Will any of the proposed project activity be conducted in the Sponsor/Entity's facilities? If Yes, please indicate how many hours per week will be spent in the entity's facilities.

3. Yes No Will Sponsor/Entity employees or consultants use any University facilities to conduct their portion of the proposed project activity? If Yes, please explain.

4. Yes No Will any of the Sponsor/Entity's personnel work on the proposed project? If Yes, please explain in what capacity.

D. Licensing

1. Yes No For non-governmental projects, will the contract or grant that will fund the proposed project require the granting of an exclusive license or option to the entity?
2. Does the Sponsor/Entity currently hold rights, or is it negotiating rights, to a pending application or issued patent to an invention(s), license rights or software copyright for which you, your spouse or dependent child(ren) are listed as inventors?
- Yes, the Sponsor/Entity holds a license(s) from the University.
- Yes, the Sponsor/Entity is negotiating a license.
- Yes, however the University assigned the invention(s) to the you.
- Yes, however the application, patent, license or copyright did not arise from your HU employment.
- No
3. Yes No Are there any other University employees listed as inventors that also hold equity in the Sponsor/Entity? If Yes, please explain.

E. Protection of Human Participants and Animals:

1. Will/Does the project involve:
- Yes No Human Participants? If Yes, please indicate IRB number: _____
- Yes No Care or Use of Animals? If Yes, please indicate IACUC number: _____
2. Yes No Are you involved in recruiting and/or obtaining consent of humans to participate in this project?
3. Yes No Will the Sponsor/Entity provide a drug device, vaccine, or procedure for use in the project?
4. Yes No Are you the inventor of any drug, device, vaccine or procedure associated with this project? If Yes, please name the drug(s), device(s), vaccine(s) or procedure(s).

F. Foreign Relationships/Conflicts

Though the regulation excludes institutions of higher education as defined in 20 U.S.C. 1001(a) or a federal, state, or local government agency when disclosing financial interests (Salary royalties; Intellectual property rights; Ownership interests; Investment vehicles; Income from seminars, lectures, or teaching engagements; Advisory committees or Review panels; Consultancy), however, these references refer to a U.S. only (Institution of higher education or a federal, state, or local government agency within the U.S.). Therefore, Investigators, including subrecipient Investigators, must disclose all financial interests received from a foreign Institution of higher education or the government of another country (which includes local, provincial, or equivalent governments of another country).

1. Yes No Do you, your spouse or your dependent children have a financial interest(s) in a foreign entity (including foreign Institutions of higher education or another country's government (local, provincial, or equivalent governments of another country)?

If Yes, please list all financial relationships with any foreign entity, including foreign Institutions of higher education or another country's government (local, provincial, or equivalent governments of another country) below.

| Name of Institution, Government Entity | Type of Relationship | Amount/In-kind | Beginning Date | End Date |
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G. In-Kind Resources

1. Yes No Have you received or will receive in-kind support (e.g., office/laboratory space, equipment, supplies, employees, students, or visiting scholars) from the Sponsor/Entity? If Yes, please describe the in-kind support.

SECTION IV: Certification & Assurance

- I agree to update this disclosure for this activity on either an annual basis or as new reportable significant financial interests are acquired.
- I have informed all individuals involved with this project, including co-investigators, subcontractors, subgrantees, students, and staff of their obligation to comply with the President's directive on Conflict of Interest in Research Funded as required by federal regulations and the University Conflict of Interest Policy.
- I agree to comply with any conditions or restrictions imposed by the University to manage, reduce, or eliminate any conflicts of interest that may be identified through the University's procedure.

I certify that this is a complete disclosure of all financial interests related to the specified project. I have used all reasonable diligence in preparing this Conflict of Interest Disclosure Statement and to the best of my knowledge it is true and complete.

Discloser: _____ Date: _____