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| First & Last Name | <input type="text"/> | College(s) | <input type="text"/> |
| University Email | <input type="text"/> | Dept(s)/Unit(s) | <input type="text"/> |

A. Disclosure of Significant Financial Interest (SFI) for Non-University Financial or Fiduciary Relationships & Travel

Check the box if you **DO NOT HAVE ANY SIGNIFICANT FINANCIAL OR FIDUCIARY INTERESTS OR SPONSORED OR REIMBURSED TRAVEL** at present or in the preceding 12 months.
(if checked, skip to Part B – signature page)

If the Investigator has more than one relationship with an outside entity to disclose, then please replicate this page as needed. Please use one page per external entity. Federal Agency and US University funding is EXEMPT from disclosure. You may attach a statement if not enough space is provided. PLEASE SEE http://www.research.illinois.edu/coi/PHS_Financial_Disclosure.asp

1. **Name of Non-University of Illinois entity:**

2. **Describe the financial relationship with the entity at present or in the 12 months preceding the date of this disclosure.**

(check all that apply and complete required disclosure information for each section)

a. **Remuneration includes salary and any payment for services** (e.g. consulting fees, honoraria, paid authorship, or other supplemental income). If checked, indicate the level of financial interest *(check one below)*:

\$0-\$4,999 \$5,000-\$9,999 \$10,000-\$19,999 \$20,000-\$100,000

If greater specify:

Value cannot be determined by reference to public prices or other reasonable measures of fair market value.

b. **Equity interest includes any stock, stock option, or other ownership interest.** *If checked, complete the section.*

Total percent owned by you & family: %

Entity is: Publicly traded Non-Publicly traded N/A explain:

If Publicly traded, indicate the present value of the equity *(check one below)*:

\$0-\$4,999 \$5,000-\$9,999 \$10,000-\$19,999 \$20,000-\$100,000

If greater specify:

Value cannot be determined by reference to public prices or other reasonable measures of fair market value.

c. **Intellectual property rights and interests** (e.g. patents not assigned to the University of Illinois; licenses from the University of Illinois to the external entity; copyrights; royalties that are not paid by the University of Illinois).

d. **Fiduciary role** (e.g. executive role, a voting member of the board, even if unpaid)

e. **Travel** **If checked, disclose at <http://phstraveldisclosure.research.illinois.edu>.**

f. **Other.** Describe:

3. **Describe how the financial interest is or may be related to Investigator's research or University responsibilities.**

The activities with the external entity are **not related** to Investigator's research or University responsibilities.

Entity is or may be a research sponsor.

Entity's product(s) or service(s) is or may be utilized, tested, evaluated, or otherwise in the research.

Entity does/will license University intellectual property utilized, tested, evaluated or otherwise in the research.

Entity sponsors/reimburses Investigator for travel related to Investigator's research or University responsibilities.

Investigator's institutional responsibilities may involve or require interacting with the external entity.

Other, describe:

If related, list all affected sponsored research projects (titles and proposal or award dates):

4. **Will the relationship continue into the next 12 months from the date of this disclosure?** Yes No

(continue to section B - signature page)

B. Investigator's Affirmation

I affirm that:

- The above information is true to the best of my knowledge.
- I have read the University's *Policy on Conflicts of Commitment and Interest* and external activities disclosed here have been disclosed and approved on my Report of Non-University Activities (RNUA) form (if I am required to submit the RNUA form.)
- If the disclosed relationship with the external entity is determined by the University to be a Financial Conflict of Interest (FCOI) related to the research question of my sponsored research, then I must have an approved University conflict management plan prior to expenditure of funds related to the research project.

If research is funded by HHS or PHS, I understand that

- Prior to receiving HHS/PHS funds, I must complete mandatory financial conflict of interest training and update training as required by the University (42 CFR 50.605).
- If the financial or fiduciary relationship changes during the funding period, I agree to update the **PHS Investigator Financial Interest Disclosure Form** within 30 days of acquiring or discovering a new or a change in any of my financial or fiduciary relationships.
- I must disclose all sponsored or reimbursed travel (42 CFR 50.605) within 30 days if not previously reported. I agree to update the **PHS Investigator Financial Interest Disclosure Form** within 30 days of the travel OR to report travel at <http://phstraveldisclosure.research.illinois.edu>.
- At the time of the annual continuing review, I will submit the **PHS Investigator Financial Interest Disclosure Form** to the OVCR.
- The University is required to report all financial conflicts of interest (FCOIs) to the HHS/PHS funding agency or primary award institution when UIUC is a sub-contract (42 CFR 50.605).
- All HHS/PHS financial conflicts of interest for senior or key personnel are subject to the public disclosure requirements of the PHS regulation (42 CFR 50.605). The University must provide written response to written requests within 5 business days of receipt of request. The Investigator will comply with any further requests for information or clarification from the University.

Investigator Signature: _____ Date: _____

Please send form to PHS Disclosure, Office of the Vice Chancellor for Research, MC-304, phsdisclosure@illinois.edu,

C. OVCR Review

No financial or fiduciary relationships disclosed; or the financial interest does not meet the SFI threshold.
The relationship disclosed represents a significant financial interest (SFI)
The SFI disclosed may be reasonably related to the research question for studies specified below.
The SFI is determined to be a Financial Conflict of Interest that requires additional management.
The University is required to report the FCOI to the funding agency.