Addendum to Investigator’s Positive 700-U and NSF 925 Disclosure of Economic Interests

University of California, Riverside

UCR COI Disclosure #

(Assigned and completed by ORI administration)

***PLEASE NOTE THAT ONLY TYPED FORMS WILL BE ACCEPTED***

|  |  |
| --- | --- |
| Principal Investigator Name: **your text** | |
| Department: **your text** | Title **your text**: |
| Email: **your text** | Phone: **your text** |
| Research Project Title: **your text** | |
| Proposal / Grant #: **your text** | |
| Disclosing Individual (if different from Principal Investigator): **your text** | |

C*lick on box or (boxes) to indicate selection*

Disclosure Type:

Non-Governmental Sponsor (please specify if Contract, Grant, Clinical Trial, Other: **your text**

Federal Sponsor (please specify if NSF, Subcontract from NSF, CIRM, Other: **your text**

UC Discovery Grant

Other (please list name): **your text**

**I. Related Entity in Which You Have a Financial Interest**

*A Separate Addendum Is Required For Each Entity*

Name of Entity (Company in Which You Have a Financial Interest): **your text**

Entity’s Address and phone number: **your text**

Entity’s Website: **your text**

Principal Business of Entity: **your text**

**II. Description of Financial Interests**

# Position

* 1. Do you, your spouse or registered domestic partner, or dependent child(ren) hold a management position with the Entity (the Company listed above)? Examples include, but are not limited to director, owner, officer, or partner.

NO

YES

If yes, indicate position and responsibilities **your text**

* 1. Do you, your spouse or registered domestic partner, or dependent child(ren) hold any other type of position with the Entity (the Company listed above)? Examples include, but are not limited to employee, board member, trustee, scientific advisor, or consultant.

NO

YES

If yes, indicate position and responsibilities: **your text**

* 1. Are there any written agreements between you personally (excluding formal proposals, contracts, grants or gifts reviewed and/or executed through the Office of Research) and the Sponsor concerning this contract, grant, or gift?

NO

YES

If yes, please attach a copy.

# Income

1. Have you or your spouse, registered domestic partner, or dependent child(ren) received income from the Entity in the past 12 months?

NO

YES – if yes, indicate**:**  Self

Spouse/Registered Domestic Partner

Dependent Children

1. Indicate nature of income and amount received from the Entity.

|  |  |  |
| --- | --- | --- |
| a) | Consulting | $ **your text** |
| b) | Honoraria | $ **your text** |
| c) | Salary | $ **your text** |
| d) | Travel Reimbursements | $ **your text** |
| e) | Royalty Payments | $ **your text** |
| f) | Other | $ **your text** Please describe the nature of the income:  **your text.** |

1. Do you, your spouse, registered domestic partner, or dependent children anticipate receiving any *income* from the Entity within the next 12 months?

NO

YES - if yes, explain: **your text**

1. If you, your spouse or registered domestic partner, or dependent child(ren) received *consulting income* from the Entity, **specifically describe the nature of the consulting** activities or services. Please also **indicate if and how those consulting activities relate to the present research project. \***

**your text**

\**If consulting income exceeded $10,000 within the last 12 months, attach a copy of the consulting*

*agreement.*

1. If you, your spouse or registered domestic partner, or dependent child(ren) received

*honoraria* from the Entity, describe the services for which it was received.

**your text**

1. If you, your spouse or registered domestic partner, or dependent child(ren) received *travel reimbursements* from the Entity, provide dates and purpose of travel.

**your text**

# Gift (Personal Gifts)

1. Have you or your spouse, registered domestic partner, or dependent child(ren) received a *personal gift* from the Entity in the past 12 months?

NO

YES – if yes, indicate**:**  Self

Spouse/Registered Domestic Partner

Dependent Children Indicate amount/value of the gift: $

# Equity

1. Do you or your spouse, registered domestic partner, or dependent child(ren) hold an *equity interest* in the Entity?

NO

YES – if yes, indicate**:**  Self

Spouse/Registered Domestic Partner

Dependent Children

1. Indicate the nature of the *equity interest* and value.
2. Stock (publicly traded) Number of Shares **your text**

What percentage of Entity's issued and outstanding shares does this interest represent? (check box)

0-5%  6-10%  11-25% >26%

1. Stock (not publicly traded)

Estimated Current Stock Value: $ **your text** Total Number of Shares: **your text**

What percentage of Entity's issued and outstanding shares does this interest represent? (check box)

0-5%  6-10%  11-25%  >26%

1. Stock Options

Number of Shares: **your text**

What percentage of Entity's issued and outstanding shares does this interest represent? (check box)

0-5%  6-10% 11-25% >26%

Is the Entity publicly traded?  NO

YES

# Loans

1. Do you or your spouse, registered domestic partner, or dependent child(ren) have a *loan arrangement* with the Entity?

NO

YES – if yes, indicate**:**  Self

Spouse/Registered Domestic Partner

Dependent Children

1. Indicate amount of loan: $ **your text**

**III. Relationship with Entity**

# Direct and Significant Impact on Financial Interests

1. Does the present research project involve testing of any drugs or devices or the development of a product or service?

NO

YES – if yes, explain: **your text**

1. Does, or will, the Entity manufacture or commercialize any device, procedure, drug, vaccine or any other product that is associated with or that will predictably result from the present research project?

NO

YES – if yes, explain: **your text**

1. Is it reasonable to anticipate that the Entity could be directly and significantly affected by the design, conduct, or reporting of the present research project?

NO

YES – if yes, describe: **your text**

# Separation of University and Outside Interests

1. The following questions are designed to address the Promoting Research Objectivity Committee’s concerns that the researcher’s financial interests do not compromise or appear to compromise his/her objectivity in performing a research project.
2. State your specific role on the project.

**your text**

1. How will you keep your interests and obligations to the Entity separate from your University activities associated with the funded research project listed above? Responses could include examples of a clear division of the Entity’s goals and business interests and the aims of the funded research project listed above.

**your text**

1. Will the University be contributing to this project, either by supporting faculty or other salaries, or by directly providing supplies, equipment, or facilities?

NO

YES – if yes, describe: **your text**

1. Are there any additional mitigating factors? (Check all that apply)

Remove yourself as the Principal Investigator (provide details: **your text**

Other non-conflicted Investigators collect data and perform data analyses

(provide details: **your text**)

Entity is a large company with products unrelated to this research

(provide details: **your text**:)

Entity is one of at least several involved in the research project

(provide details: **your text**)

Double-blinded study

Randomized study

Other (identify): **your text**

None of the above (provide details: **your text**)

1. Is the Entity providing any of the following for the present research project?

(check all that apply)

Proprietary data  Test material research tools or drugs

Equipment or devices

Use of Entity's facility  Entity's personnel  None

1. Does the Entity participate in deciding the direction of the present research project?

NO

YES – if yes, explain: **your text**

# Openness of Teaching and Research Environment

1. Are there any undergraduate, graduate or postdoctoral students involved in the present research project?

NO – if no, please skip to question 24

YES – if yes, explain in what capacity:

1. Are you the advisor to any of these students?

NO

YES

1. Are there any constraints or restrictions imposed on the reporting of student work?

NO

YES – if yes, explain: **your text**

# Licensing

1. Do you, your spouse or dependent child(ren) have an inventive or ownership interest in any intellectual property that will be utilized in the present research project?

NO – if no, please skip to question 26

YES – if yes, provide a brief non-technical description of the intellectual property involved: **your text**

1. Identify the owner of the intellectual property to be utilized in the project:

Self  The Regents of the University of California

Other (identify): **your text**

1. Does the Entity hold rights to a pending application or issued patent to an invention, license right, or copyright for software of yours, your spouse or dependent children?

NO

YES, the license is from the University

YES, and the application, patent, license or copyright does not involve University owned intellectual property

1. List any previous and pending patents and any recently submitted disclosure of inventions of yours, your spouse or dependent children. You may attach your response.

See attached.

**IV. Verification**

I certify under penalty of perjury that this is a complete disclosure of all financial interests related to

the specified project, I have used all reasonable diligence in preparing this Description of Financial Interest Disclosure, and to the best of my knowledge it is true and complete.

Signature Date

NOTE: The State of California Information Practices Act of 1977 requires the University to provide the following information to individuals who are asked to supply information about themselves. The principal purpose for requesting this information is to accomplish the independent and substantive review of positive financial disclosures as required by the Revised Policy on Disclosure of Financial Interest in Private Sponsors of Research dated April 8, 1982. University policy and State law authorize maintenance of this information. Submission of this information is mandatory. The consequences of not providing all or any part of the requested information could be non-acceptance of your award from the proposed sponsor, state enforcement proceedings against you as well as University sanctions. The information is a public record under University policy and State law. Individuals have the right to review their own records in accordance with Academic Personnel Manual Section 160. These records will be retained for 3 years after termination of sponsored project or until resolution of any action by the sponsor, whichever is greater. The Office of Record is the Research and Economic Development Office.