

FINANCIAL CONFLICTS OF INTEREST (FCOI) DISCLOSURE FORM

The following definitions apply in the Financial Conflicts of Interest Disclosure Form for Federally Funded Research:

“Institutional Responsibilities” means an investigator’s professional responsibilities on behalf of IHMC, which may include for example: activities such as research, research consultation, teaching, professional practice, IHMC committee memberships, and service on panels such as Institutional Review Boards or data and safety monitoring boards.

“Investigator” means the project director or Principal Investigator and any other person, regardless of title or position, who is responsible for the design, conduct or reporting of research funded by PHS, or proposed for funding by PHS, which may include, for example, consultants or collaborators.

“Research” means a systematic investigation, study or experiment designed to develop or contribute to generalizable knowledge relating broadly to public health, including behavioral and social-sciences research. The term encompasses basic and applied research (e.g., a published article, book or book chapter) and product development (e.g., a diagnostic test or drug). The term includes any such activity for which research funding is available from a PHS Awarding Component through a grant, cooperative agreement, or contract, whether authorized under the PHS Act or other statutory authority, such as a research grant, career development award, center grant, individual fellowship award, infrastructure award, institutional training grant, program project, or research resources award.

“Significant Financial Interest” means a financial interest consisting of one or more of the following interests of the investigator (and those of the investigator’s spouse/domestic partner and dependent children) that reasonably appears to be related to the investigator’s institutional responsibilities:

- (a) With regard to any publicly traded entity, a Significant Financial Interest exists if the value of any remuneration received from the entity in the twelve months preceding the disclosure and the value of any equity interest in the entity as of the date of disclosure, when aggregated, exceeds \$5,000. For purposes of this definition, remuneration includes salary and any payment for services not otherwise identified as salary (e.g., consulting fees, honoraria, paid authorship); equity interest includes any stock, stock option, or other ownership interest, as determined through reference to public prices or other reasonable measures of fair market value:
- (b) With regard to any non-publicly traded entity, a Significant Financial Interest exists if the value of any remuneration received from the entity in the twelve months preceding the disclosure, when aggregated, exceeds \$5,000 or when the investigator (or the investigator’s spouse/domestic partner or dependent children) holds any equity interest (e.g., stock, stock option, private equity or other ownership interest) or venture or capital financing in a company with which the investigator has a financial interest;
- (c) Intellectual property rights and interests (e.g., patents, copyrights); or
- (d) The occurrence of any reimbursed or sponsored travel.

The following are not financial interests and **do not require** disclosure:

- 1) salary, royalties, or other remuneration paid by the Institute to the Investigator if the Investigator is currently employed or otherwise appointed by the Institute, including intellectual property rights assigned to the Institute and agreements to share in royalties related to such rights.
- 2) income from investment vehicles, such as mutual funds and retirement accounts, as long as the Investigator does not directly control the investment decisions made in these vehicles.
- 3) income from seminars, lectures, or teaching engagements sponsored by a U.S. federal, state, or local government agency, an institution of higher education within the U.S., an academic teaching hospital within the U.S., a medical center within the U.S., or a research institute that is affiliated with an institution of higher education within the U.S.
- 4) income from service on advisory committees or review panels for a U.S. federal, state, or local government agency, an institution of higher education within the U.S., an academic teaching hospital within the U.S., a medical center within the U.S., or a research institute that is affiliated with an Institution of higher education within the U.S.; or
- 5) travel that is reimbursed or sponsored by a U.S. federal, state, or local government agency, an institution of higher education within the U.S., an academic teaching hospital within the U.S., a medical center within the U.S., or a research institute that is affiliated with an institution of high ereducation within the U.S.

Investigators, including subrecipient Investigators following the IHMC Policy, must disclose all financial interests, foreign appointments, foreign-sourced income, and in-kind support, regardless of value, received from:

- 1) a foreign institution of higher education, including any affiliated research institutes.**
- 2) a foreign academic teaching hospital or medical center; and**
- 3) The government of a foreign country (which includes local, provincial, or equivalent governments of another country).**

I certify that I have read and understood the information provided in this document.

Signature: _____

Print Name Here: _____

Date: _____

Financial Disclosure Form for Investigators in Federally Funded Research

This form must be completed by investigators who plan to participate in research funded, or proposed to be funded, by the federal government. Please answer **all** of the questions. Do not leave any questions blank. If a question does not apply to you, simply put "**N/A**" or "**None**" in the box. Once completed, this form should be sent by email to khendry@ihmc.org.

Investigator Name: _____

Title of Proposal: _____

Project PI: _____

Funding Sponsor: _____

This form asks you to provide information regarding outside financial interests that are or reasonably appear to be related to your institutional responsibilities at IHMC. Please note that this is a personal form.

Significant Financial Interests

Have you received any remuneration, gift, or in-kind support, regardless of amount, from a foreign institution of higher education, foreign academic teaching hospital, and/or the government of a foreign country (which includes local, provincial, or equivalent governments of another country)?

Yes No

Have you negotiated participation or participated in a Foreign Talent Recruitment Program by a foreign institution of higher education, foreign academic teaching hospital, and/or the government, at any level, of a foreign country?

Yes No

If you answered Yes to question 1 or 2, please provide additional details, including identifying the foreign entity, describing your relationship to it, and including the approximate value of any remuneration received.

Definition:

Foreign Talent Recruitment Program: means any program sponsored by, or benefit offered (whether in the form of remuneration or in-kind support) by a foreign researcher, foreign government (at any level), foreign institution, or foreign government-controlled entity for the purpose of facilitating the transfer or acquisition of expertise, technical know-how, research results/data/designs, or technology. These programs may involve entering into a contract with a foreign institution or entity and may be accompanied by an honorary, adjunct, or temporary appointment.

Significant Financial Interests in *Publicly-Traded* Entities

Do you, your spouse/domestic partner, or your dependent children have any of the following interests in a publicly-traded entity that, alone or when aggregated, exceeds \$5,000 and that is or reasonably appears to be related to your institutional responsibilities at IHMC:

- Remuneration (such as consulting fees, honoraria, or paid authorship) received in the last twelve months
- Equity interest (stock, stock options, or other ownership interest)

If so, please provide details, including the name of the outside entity, the nature of the activity for which remuneration was received, the amount of remuneration received over the last twelve months, the value of any equity interest as of the date of this disclosure (as determined through reference to public prices or other reasonable measures of fair market value), the percentage of ownership interest in the outside entity, and the manner in which the equity interest was acquired.

Significant Financial Interests in *Non-Publicly-Traded* Entities

Have you, your spouse/domestic partner, or your dependent children received from a non- publicly traded entity over the last twelve months any remuneration (such as consulting fees, honoraria, or paid authorship) that alone, or when aggregated, exceeds \$5,000 and that is or reasonably appears to be related to your institutional responsibilities at IHMC? (A non-publicly-traded entity may be for-profit, non-profit, or governmental, but does not include IHMC.)

If so, please provide details, including the name of the outside entity, the nature of the activity for which payment was received, and the amount of the remuneration received over the last twelve months.

(Do you, your spouse/domestic partner, or your dependent children hold, in a non-publicly- traded entity, any equity interest (e.g., stock, stock option, or other ownership interest) that is or reasonably appears to be related to your Institutional Responsibilities at IHMC? (Please note that this question applies to any equity interest, regardless of value.)

If so, please provide details, including the name of the outside entity, the dollar value and percentage of ownership interest in the outside entity, and the manner in which the equity interest was acquired.

Intellectual Property Rights and Interests

Do you, your spouse/domestic partner, or your dependent children have any intellectual property rights and interests (e.g., patents and copyrights) from which you or they have received any related income in the last twelve months and that are or reasonably appear to be related to your institutional responsibilities at IHMC? (Please note that this question applies regardless of the value of the income received. You need not disclose intellectual property rights assigned to IHMC and agreements to share in royalties related to such rights.)

If so, please provide details, including the nature of the intellectual property rights and interests, how they were acquired, and the amount of income received.

Reimbursed or Sponsored Travel

Please disclose any reimbursed or sponsored travel, regardless of value that occurred in the last twelve months and that is or reasonably appears to be related to your institutional responsibilities at IHMC. (You need not disclose travel that is reimbursed or sponsored by IHMC, a Federal, state, or local government agency, an institution of higher education, an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education.)

(a) What was the purpose of the trip?

(b) What is the name of the organization that reimbursed or sponsored the travel?

(c) What was the destination of the trip?

(d) What was the duration of the trip?

Federally Funded Proposals or Awards

(8) Do you believe that any of the Significant Financial Interests you described in response to Questions (1)-(5) relate to any federally funded proposal or award on which you are an Investigator? Please explain.

Note: A Significant Financial Interest relates to federally funded research if (a) the Significant Financial Interest could be affected by the federally funded research or (b) the Significant Financial Interest is in an entity whose financial interest could be affected by the research.

I certify that all of the foregoing information in this form is true and complete to the best of my knowledge. I acknowledge that, during the period of a federally funded award, I am required to update this form annually and within 30 days of discovering or acquiring a new Significant Financial Interest.

Signature: _____

Full Name (Printed): _____

Date: _____