



SUSTAINABLE SCIENCES INSTITUTE (SSI) **FINANCIAL CONFLICT OF INTEREST (FCOI) POLICY**

PURPOSE

A financial conflict of interest (FCOI) in research is a situation in which an objective layperson might perceive that an individual's financial relationships may compromise the individual's professional judgment in conducting, analyzing, or reporting research. For example, an investigator may have a financial conflict of interest if he or she is a consultant to the company sponsoring research in his or her laboratory. Another example is an investigator who owns significant equity in a company whose product he or she wants to test.

To better determine whether a FCOI exists, the National Institutes of Health (NIH) and the Public Health Service (PHS) adopted new regulations in 2011 expanding grant recipients' responsibilities for collecting information related to investigators' financial interests.

(http://grants.nih.gov/grants/policy/coi/coi_faqs.htm#3165)

Investigators are required to report all "Significant Financial Interests" that have monetary value, whether or not the value is readily ascertainable.

"Significant Financial Interest" is defined as: 1) any remuneration from a publicly-traded entity in the 12 months preceding financial disclosure and any equity interest owned or acquired as of the date of disclosure which exceeds \$5000 when aggregated for the investigator, spouse, registered domestic partner or dependent children; 2) the value of any remuneration received from a non publicly-traded entity which when aggregated exceeds \$5,000; 3) any equity interest held in a non publicly-traded entity by the investigator, spouse, registered domestic partner or dependent children regardless of value; 4) any payments exceeding \$5,000 received within the past 12 months for any intellectual property interests assigned or licensed to any party other than SSI; 5) any travel reimbursement or payment in excess of \$5,000 per entity made by any entity THAT IS NOT a U.S. Federal, state, or local government agency, institution of higher education, academic teaching hospital, medical center, or research institute affiliated with a U.S. institute of higher education.

To facilitate reporting of Significant Financial Interests, SSI requires all PIs, Co-PIs and Senior Personnel – individuals "responsible for the design, conduct or reporting" of research – to do the following:

- 1) Complete a FCOI Disclosure Form prior to receipt of funding;
- 2) Complete an annual update to the FCOI Disclosure Form in conjunction with the progress report;
- 3) Complete a FCOI Disclosure Form within 30-days of acquiring or discovering a new significant financial interest;
- 4) Complete an online FCOI tutorial and provide a certificate of completion at the beginning of a project and once every 4 years thereafter;
Tutorial Link: <http://grants.nih.gov/grants/policy/coi/tutorial2011/fcoi.htm>
- 5) Complete the Travel Disclosure Form to report travel payments more than \$5,000 made by any single non-government and non-academic entity as specified in regulations.

Investigators with "Yes" responses, on the Financial Disclosure Form must file a more in-depth form. This form must be completed annually in conjunction with the progress report.

These requirements also apply to investigators funded by any other agency or organization that follows Public Health Service disclosure requirements.

These requirements also apply to investigators related to any subcontracts or subawards granted by SSI.

The board-approved SSI Compliance Committee will review all financial disclosures where the disclosed financial interest is related to the work of SSI and will take any necessary steps to manage, reduce, or eliminate any conflicts of interest in accordance with regulations. Approval is required before any awards are executed.

See NIH requirements for more information:
<http://grants.nih.gov/grants/policy/coi>

Effective June 1, 2012.



Principal Investigator Certification

I certify that:

All Financial Disclosures have been submitted to SSI for all existing awards and funded projects.

I understand that I must submit a new Financial Disclosure form for any new investigator, to the project in the future, and I may not use project funds to support any SSI investigator who discloses a FCOI until the SSI Compliance Committee investigates and approves this disclosure.

I understand that should I wish to establish a subagreement with a subrecipient without an acceptable FCOI policy:

I must submit an FCOI form for each investigator who will be involved in the subrecipient's scope of work prior to the establishment of the subagreement or any supplements that extend the project end date.

I must verify that each subrecipient investigator has provided me with a certificate of acceptable FCOI training dated within the last four years prior to the establishment of the subagreement or any supplement that extends the project end date.

I agree to maintain a file containing up to date FCOI training certificates for all SSI investigators and all investigators of any subrecipient that does not have an acceptable FCOI policy for as long as each investigator is involved in the project, and to make this information available upon request.

Signature of Principal Investigator: _____

Date: _____



SSI Financial Conflict of Interest Disclosure Form

Section 1: Project Information

Principal Investigator: _____

Email Address: _____

Project Start Date: _____ Project End Date: _____

Project Title: _____

Sponsor: _____

Section 2: Type of Proposal/Disclosure (check one)

- | | |
|--|--|
| <input type="checkbox"/> New Proposal | <input type="checkbox"/> Renewal/Competing Continuation |
| <input type="checkbox"/> Supplemental Funding With Time Extension | <input type="checkbox"/> No-Cost Time Extension |
| <input type="checkbox"/> Change of Grantee Institution | <input type="checkbox"/> Renewal/Competing Continuation |
| <input type="checkbox"/> Annual Reporting/Non-Competing Continuation | <input type="checkbox"/> New Investigator Added to Project |

Section 3: Principal Investigator Disclosure

1. Publicly Traded Entity

Have you, your spouse or domestic partner, and/or dependent children received income or payment for services in the past 12 months or own equity interest in any publicly traded entity related to your institutional responsibilities exceeding \$5,000 when aggregated? This does not include interests in mutual funds and retirement funds in which you do not directly control investment decisions.

- Yes
 No

2. Non-Publicly Traded Entity

Have you, your spouse or domestic partner, and/or dependent children received income or payment for services in the past 12 months, exceeding \$5,000 when aggregated, from any non-publicly traded entity? This does not include income from seminars, lectures, or teaching engagements sponsored by a federal, state, or local US government agency, a US institution of higher education or an affiliated research institute, an academic teaching hospital, or a medical center.

- Yes
 No

Equity interests

Do you, your spouse or domestic partner, and/or dependent children currently own, or have acquired in the past 12 month, any equity interest in any non-publicly traded entity related to your institutional responsibilities? This can include any stock, stock option, or other ownership interest.

- Yes
 No

3. Intellectual Property and Interests

Have you, your spouse or domestic partner, and/or dependent children received payments, in the past 12 months, for any intellectual property rights and interests (e.g. patents, copyrights, assigned or licensed to a party other than SSI) exceeding \$5,000 related to your institutional responsibilities?

- Yes
 No

4. Travel Reimbursement/Sponsorship

Have you received a travel reimbursement or been sponsored for travel (i.e. travel expenses paid on behalf of investigator and not reimbursed to investigator) in excess of \$5,000 per entity in the 12 months prior to disclosure, by any entity related to your institutional responsibilities? This does not include travel sponsored or reimbursed by US federal, state, or local US government agency, a US institution of higher education or an affiliated research institute, an academic teaching hospital, or a medical center.

- Yes
- No

5. Acknowledgement and Certification

I certify under penalty of perjury that this is a complete disclosure of all my significant interests related to my institutional responsibilities and I have used all reasonable diligence in preparing this Financial Interest Disclosure, and to the best of my knowledge it is true and complete. I also acknowledge that by signing my name below that it is my responsibility to disclose, within 30 days, any new significant financial interests obtained during the terms of the above proposed project.

Signature of PI _____

Date _____

Printed Name _____

Attach additional sheets as required to identify and include financial disclosure information for all project investigators.