

Annual Disclosure of Significant Financial Interests for Non-University of Georgia Investigators

(Version 10.3.22)

Name: (Please print) _____

Title: _____

Telephone Number: _____ E-Mail: _____

Employer: _____

Employer's Address: _____

UGA Principal Investigator: _____

The University of Georgia (UGA) requires that this form be filled out by any non-UGA Investigator (defined as the project director or principal investigator or any other person, regardless of title or position, who is responsible for any portion of the design, conduct, or reporting of research or activities on funded projects) who meets one or the other of the following criterion:

*The Investigator will participate in a proposal to be submitted by UGA to any Public Health Service (PHS) unit of the U.S. Department of Health and Human Services (DHHS) or to a sponsor that has adopted the [PHS financial conflict of interest regulations](#), **and** the investigator's employer does not have a conflict of interest policy that complies with the PHS regulations effective August 24, 2012.*

*The Investigator will participate in a proposal to be submitted by UGA to National Science Foundation (NSF), **and** the investigator's employer does not have a conflict of interest policy that complies with [NSF Conflict of Interests Policy](#) effective July 2005.*

*The Investigator will participate in a proposal to be submitted by UGA to the U.S. Department of Energy (DOE), **and** the investigator's employer does not have a conflict of interest policy that complies with [DOE Interim Conflict of Interests Policy](#) effective December 20, 2021.*

The questions pertain to financial activities/interests spanning the past 12 months. If you (or your spouse or dependent children) add new financial activities/interests at any point during the next 12 months, you are required to file an updated disclosure within 30 days of adding them.

Is this an update to a Disclosure that is already current? Yes No

I. Personal Compensation

In the past 12 months did you (or your spouse or dependent children) receive personal compensation valued at \$5,000 or more annually, when aggregated, from any Entity other than the employer listed above whose operations are related in any way to your professional responsibilities? Personal compensation includes salary, consulting fees, investments (stocks or stock options, but not mutual funds), equity (ANY equity in a privately held, non-publicly traded, company should be reported), paid authorships, speaker's fees, or intellectual property payments from any Entity other than the employer listed above.

Yes No

If you checked No, proceed to Section II: Related Outside Activities.

If you checked "yes", please provide, on separate sheet(s), the following details about each instance of personal compensation:

- a. Name and address of the Entity;
- b. The nature of your professional responsibilities insofar as they relate to or involve the Entity;
- c. Activities or business of the Entity (what goods or services are provided);
- d. The nature or type of personal compensation received from or equity in the Entity;
- e. Whether the provider is not-for-profit or for-profit. If for-profit, whether it is publicly traded or privately held;
- f. The monetary range of the personal compensation over \$5,000/yr

\$5,000-\$10,000 \$10,001-\$25,000 25,001-\$50,000 \$50,001-\$100,000 Above \$100,000

II. Related Outside Activities

In the past 12 months did you (or your spouse or dependent children):

- a. Hold any position, whether paid or unpaid, on the board of directors, a scientific or technical advisory board, or any other board of a business or a not-for-profit organization that is engaged in activity related to your professional responsibilities for your employer?
 Yes No
- b. Engage in any activities or relationships not disclosed above that could be perceived to have the potential for creating either a conflict or the appearance of a conflict with your employment responsibilities?
 Yes No

If you checked No, proceed to Section II: Related Outside Activities.

If you checked "yes", please provide, on separate sheet(s), the following details about each instance:

- a. Name and address of the Entity;
- b. The nature of your, your spouse's, or dependent children's role, relationship, or activity with the Entity;
- c. Activities or business of the Entity (what goods or services are provided);
- d. Whether the provider is not-for-profit or for-profit. If for-profit, whether it is publicly traded or privately held.

III. Start-Up/Outside Companies

Are you involved in any way in a startup or outside company derived from a UGA employee's institutional research, instruction, or public service/outreach responsibilities?

Yes No

Are you involved in any way in a startup or outside company that is related in any way to the project?

Yes No

If you checked No to do both questions, proceed to Section IV: Reimbursed and Sponsored Travel.

If you checked “yes”, provide the following details for each Entity:

- a. Name and address of the Entity
- b. Activities or business of the Entity
- c. Describe your role or involvement with the Entity

IV. Reimbursed and Sponsored Travel

You are required to disclose all travel reimbursements paid by any entity other than your employer for the past 12 months, no matter the dollar level, that is either reimbursed or sponsored (i.e., expenses paid on your behalf and not reimbursed to you directly so that you might not know the exact monetary value) that are related in any way to your employment responsibilities. Do not disclose travel paid by your employer; any state, federal or local government agency; another higher education institution, a medical center, or a research institute affiliated with a higher education institution. Do disclose travel paid by industries such as Pfizer, Lockheed-Martin, or GE and by non-profit organizations such as the American Cancer Society, AAAS, American Heart Association, or a national professional society.

I have no travel reimbursements to disclose

If none, proceed to Section V.

I have the following travel reimbursements to disclose:

	Sponsor/Organization	Purpose of Trip	Destination	Duration of Trip
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

V. Other

Have you engaged in an activity that would give you, or the research team, an actual or perceived competitive advantage for this award? Examples: Writing the requirements or specifications of the award or having access to sensitive/proprietary information not generally available to other parties competing for the funding. Yes No

If none, proceed to the Affirmation

If you checked “yes”, please describe and explain, in the area below, the nature of the activity(ies) that could be perceived to create a competitive advantage.

Affirmation:

I understand that this Disclosure is required to obtain funding from the U.S. Government. I certify to the best of my knowledge and belief that the information contained in this Disclosure Statement is true, complete, and accurate. I understand that any false, fictitious, or fraudulent information, misrepresentations, half-truths, or omissions of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims, or otherwise. (18 U.S.C. §§ 1001 and 287, and 31 U.S.C. 3729-3730 and 3801-3812). I further understand and agree that (1) the statements and representations made herein are material to U.S. Government's funding decision, and (2) I have a responsibility to update the disclosures during the period of performance of the award should circumstances change which impact the responses provided above.

I will comply with any conditions or restrictions imposed by UGA to manage, reduce, or eliminate any conflicts of interest I may have with respect to the project with which I will be affiliated.

Signature

Date

Please e-mail the completed disclosure to Gene Pope (gene.pope@uga.edu), Director, Conflicts of Interest Review and Management at UGA. When e-mailing the disclosure, please courtesy copy (Cc) the relevant UGA Pre-Award grants official.