

Disclosure of Financial Interests

Name:

Department:

Position Title:

Phone Number:

eMail:

Status (FT, PT, etc):

Conflicts of Interest CITI training completion date:

Your External Funding to the University

Source and amount of external funding: (spell out acronyms)

Does Federal Funding include?

National Science Foundation (NSF)

National Institute of Health (NIH)

Public Health Service (PHS)

Other

Section 1 – Introduction

In compliance with Federal law and regulation and University of Maine System (UMS) and University of Southern Maine (USM) policies, disclosure of all relevant and **significant financial interests** that reasonably appear to be related to your University responsibilities is required of all faculty and staff and all other members of the University community who are responsible for the design, conduct, or reporting of **research, educational, or service activities**. The interests that must be disclosed include those of yourself, your spouse, domestic partner, your dependent children, or other household members.

When answering questions, you do not need to include income from:

- Salary, royalties, or other money paid for work or a service paid by USM; income from investments, such as mutual funds and retirement accounts, as long as the person does not directly control the investment decisions.
- Income from seminars, lectures, teaching engagements, advisory committee service, or review panels, sponsored by:
 - Federal, state, or local government agency, an institution of higher education as defined at 20 U.S.C.1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education.

Section 2 – Disclosure of Financial Interests

Within the past 12 months or expect to receive in the next 12 months:

- A. Do you, your spouse, domestic partner, your dependent children, or other household members have any equity or other ownership interest in a publicly-traded for-profit, non-publicly traded for-profit, or non-profit entity that, in the aggregate, exceeds \$5,000 in value or represents more than 5% ownership of any single entity: **Yes/No**
- *e.g.*, stock, stock option, or other ownership interest;
 - any money paid for work or a service (including salary, royalties, consulting income, honoraria, paid authorship, or other payments)
 - Intellectual property rights and interests **of any amount** (*e.g.*, patents, copyrights), upon receipt of income related to such rights and interests.

If yes, briefly explain:

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B. Do you, your spouse, domestic partner, your dependent children, or other household members hold an executive position (for example: Officer, Director, partner, or proprietor) that, in the aggregate, exceeds \$5,000 in value in compensation year or 5% of ownership interest in any single entity which an independent observer could reasonably conclude may be related with any of your research, educational, or service activity at the University? **Yes/No**

- In the case of a partnership, it is the proportionate share of the fee or commission that is significant, without regard to the expenses of the partnership. An individual who receives a salary as opposed to portions of fees or commissions is generally not required to report in this section.

If yes, briefly explain:

C. Have you received any reimbursed travel or sponsored travel related to your University responsibilities whether paid for by a for-profit or not-for-profit organization that, in the aggregate, exceeds \$5,000 in value in compensation? **Yes/No**

- Reimbursed or sponsored travel reviewed and approved as University business by the appropriate designated department official should not be included here.

If yes, briefly explain:

D. Do you have an outside consulting relationship with an outside entity which also:

- a) provides you with support through the University? **Yes/No**
- b) or, has or seeks to have a business association with the University? **Yes/No**
- c) or, is in the field of your professional responsibility at the University? **Yes/No**

If yes, briefly explain:

E. Do you, your spouse, domestic partner, your dependent children, or other household members have or anticipate having any other outside interests, relationships or arrangements that could reasonably create the actuality or appearance of a conflict of interest under the University's Financial Conflicts of Interest Policy? **Yes/No**

If yes, briefly explain:

<https://usm.maine.edu/sites/default/files/orio/USM%20Financial%20Conflict%20of%20Interest%20Policy.pdf>

Section 3 – Declaration

I, _____, hereby declare that this statement of significant financial interests (including accompanying additional pages and statements) has been examined by me and that to the best of my knowledge and belief is a true, correct, accurate, and complete statement of all such interest which an independent observer could reasonably conclude may be related with any of my research or educational activities at the University.

I have received training on federal conflict of interest policies and regulations and agree to comply with the UMS and USM policies on Financial Conflicts of Interest.

Also, I understand that failure to file this statement as required or intentionally filing a false statement may result in disciplinary action. I will report any changes with regard to information provided on this statement when as they become known.

Signature

Date

Disclosure of Financial Interests

Submit this form to the Research Integrity Officer via the Office of Research Integrity and Outreach (ORIO), 126 Bedford Street, Portland Campus

VERIFICATION:

_____ I have reviewed the potential FCOI with the above named individual and there is no real or perceived FCOI. A copy of the signed Disclosure Form will be/has been sent to Human Resources.

Research Integrity Officer or designee

Date

_____ There is a potential FCOI, the DISCLOSURE OF FINANCIAL INTERESTS FORM will be referred to the USM Conflict of Interest Committee (through the committee chair or convener) for review and management. A copy of the signed Disclosure Form will be sent to Human Resources.

Research Integrity Officer worksheet

Name of Business:

Address:

Describe the primary business of this entity:

This entity is a: (check all that apply)

Publicly-traded for-profit

Privately-held for-profit

Non-profit

Financial interest held by: (check all that apply)

Yourself

Spouse/Domestic Partner

Dependent child(ren)

Other household member: specify text box

Position(s) held with entity:

Description of interest: (check all that apply)

Stocks

Stock options

Partnership share

Other ownership interest: specify text box

Aggregate amount/percentage of income/compensation from this entity in the preceding 12 months or anticipated in the next 12 months:

If applicable, describe the intellectual property to which these interests are related, and any associated agreements with USM, including licenses:

Is there a Management Plan in place for your financial interest in the entity?