



UNIVERSITY OF MASSACHUSETTS DISCLOSURE SUMMARY
FOR INVESTIGATORS PROPOSING OR CONDUCTING
RESEARCH (NON-PHS FUNDED)

Principal Investigator:

Department:

Project Title:

Project Dates:

Proposal or Award Number:

Sub OUT: Y N

Sponsor:

If sub IN; Prime Sponsor:

This form is required to be filed for every proposal and should accompany the Proposal Routing Form. It is required for all "Investigators." The term "*Investigator*" includes the principal investigator and any other person who is responsible for the design, conduct, or reporting of the research, as well as his or her spouse and dependent children.

If an Investigator has a disclosable financial interest, it must be disclosed to ORSP when the Investigator submits the relevant grant proposal and whenever a reportable financial interest arises during the period of an award. NSF requires all Investigators to disclose the following conflicts of interest:

- (1) if an Investigator has a "*Significant Financial Interest*," which is defined as anything of monetary value, including but not limited to salary or other payments for services (e.g., consulting fees or honoraria); equity interests (e.g., stocks, stock options, or other ownership interests); and intellectual property rights (e.g., patents, copyrights, and royalties from such rights), but NOT including any of the following: (i) salary, royalties, or other remuneration from the University; (ii) income from seminars, lectures, or teaching engagements sponsored by public or nonprofit entities; (iii) income from service on advisory committees or review panels for public or nonprofit entities; (iv) an equity interest that, when aggregated for the Investigator and his or her spouse and dependent children, meets both of the following tests: (x) does not exceed \$10,000 in value as determined through reference to public prices or other reasonable measures of fair market value; and (y) does not represent more than a five percent ownership interest in any single entity; (v) salary, royalties, or other payments (including equity) that, when aggregated for the Investigator and his or her spouse and dependent children over the next twelve months, are not reasonably expected to exceed \$10,000;

and

- (2) any of the following circumstances apply:
- (a) when the grant application is submitted, the Significant Financial Interest would reasonably appear to be affected by the proposed research;
- (b) during the period of the award, the Significant Financial Interest would reasonably appear to be affected by the ongoing research;
- (c) when the grant application is submitted, the Significant Financial Interest is in one or more entities whose financial interests would reasonably appear to be affected by the proposed research; or
- (d) during the period of the award, the Significant Financial Interest is in one or more entities whose financial interests would reasonably appear to be affected by the proposed research.

Do you have a Significant Financial Interest that meets this NSF definition of conflict of interest?

NOTE: If you have a Significant Financial Interest in an entity receiving NSF funds for the proposed or sponsored award, or in an entity that could benefit from the research activity, or in an entity that has a license or other rights to research or technology that is a subject of the award, then you MUST answer "YES" to this question.

Yes No

If you answered "YES," you must complete the "Investigator's Detailed Disclosure Form" related to non-PHS funded research on page 4.

As required by the NSF, the University will report the existence of a conflict of interest which is unable to be managed, reduced or eliminated within the University to the NSF Office of the General Counsel.

Other Proposals (non-PHS, non-NSF)

Care should be given in every proposal submitted to a Federal agency to disclose any relationship where the proposing Investigator has a financial interest that would be of interest to the sponsor since every Federal sponsor requires honesty and transparency in the application process.

University Conflict of Interest Policy (BOT Doc. T96-039)

The University requires all "Covered Individuals" to disclose potential and actual conflicts of interests in the manner provided for under the Board of Trustees promulgated policy. Here is a link:

<http://www.massachusetts.edu/policy/academic.html> The term "Covered Individual" includes faculty, staff, students and other individuals associated with the University.

Do you have a Significant Financial Interest that as defined by University policy?

Yes No

NOTE: If you have a Significant Financial Interest that is a subject of the award, then you MUST answer "YES" to this question.

Clinical Research - In relation to Clinical Research that is performed or directed by a Covered Individual, "Significant Financial Interest" means (i) any Equity in a Company that is directly owned by, or is under the control of, a Covered Individual or a member of his or her immediate family or (ii) Non-Equity Compensation from a Company in an aggregate amount greater than \$1,000 within the prior twelve-month period that is directly or indirectly received by or contractually promised to a Covered Individual or a member of his or her immediate family.

Non-Clinical Research - In relation to research other than Clinical Research that is performed or directed by a Covered Individual, "Significant Financial Interest" means either (i) Equity that represents more than one percent (1%) of the total equity in a Company or has a total current value of more than \$10,000 that is directly owned by, or is under the control of, such Covered Individual or a member of his or her immediate family or (ii) Non-Equity Compensation in an aggregate amount greater than \$10,000 within the prior twelve-month period that is received by or contractually promised to a Covered Individual or a member of his or her immediate family.

If you answered "YES," you must complete the "Investigator's Detailed Disclosure Form" related to non-PHS funded research on page 4.

Certification

I hereby certify that I have read and understood the University's Policy on Conflicts of Interest Relating to Intellectual Property and Commercial Ventures (BOT Doc. T96-039), and that the contents of this Disclosure Summary (and any attached Disclosure Statement), to the best of my knowledge, are complete and accurate. I agree to provide additional supporting documentation as needed, update this disclosure during the period of the award, comply with any conditions imposed by the University to manage, reduce or eliminate a conflict of interest, or forfeit the award.

Signature of Investigator

Date

**University of Massachusetts Boston Investigator's Detailed Disclosure of
Financial Interests Related to non-PHS-Funded Projects**

Name:	Title:
School:	Department:
Office Location (Bldg & No):	Email:
Contact Phone:	Date Submitted:

Description of financial interest (be specific):

Description of activity (include identity of commercial entities involved):

I hereby certify that:

- I have read and understood the University Policy on Conflicts of Interests
- To the best of my knowledge, the contents of this Conflict of Interest Disclosure Statement are complete and accurate.

Signature

Date

-To be completed by authorized University personnel only-

Review by name:	Title:	Date Approved:

- Approved Not Approved

Action taken if not approved:

- Forwarded to the University Conflict Committee
- Other, explain: