

**PHS Additional Financial Disclosure (Form 2)**

**Investigator Information**

Disclosing Investigator: \_\_\_\_\_

Check One:     New Proposal     Annual Reporting/Renewal/Supplemental Funding     New Significant Financial Interests

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Awarding Organization: \_\_\_\_\_

Project Title: \_\_\_\_\_

**Disclosure**

Please provide information regarding any significant financial interests related to the Disclosing Individual's institutional responsibilities.

Entity Name	Disclosure Type (Check all that apply.)	Do these interests relate to the above-referenced PHS-funded research project? Please provide an explanation for your response.
<p>_____</p> <p><input type="checkbox"/> Publicly Traded <input type="checkbox"/> Non-Publicly Traded</p> <p>For new Significant Financial Interests, did you acquire the interest in the past 30 days? <input type="checkbox"/> Yes    <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Income: \$ _____</p> <p><input type="checkbox"/> Stock and/or Stock Options Number of Shares: _____ Estimated Current Stock Value: \$ _____ % of Issued and Outstanding Shares: <input type="checkbox"/> &lt;5%    <input type="checkbox"/> 6-10%    <input type="checkbox"/> 11-25%    <input type="checkbox"/> &gt;26%</p> <p><input type="checkbox"/> IP (royalties, license fees, etc.)</p>	<p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>Explanation:</p>
<p>_____</p> <p><input type="checkbox"/> Publicly Traded <input type="checkbox"/> Non-Publicly Traded</p> <p>For new Significant Financial Interests, did you acquire the interest in the past 30 days? <input type="checkbox"/> Yes    <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Income: \$ _____</p> <p><input type="checkbox"/> Stock and/or Stock Options Number of Shares: _____ Estimated Current Stock Value: \$ _____ % of Issued and Outstanding Shares: <input type="checkbox"/> &lt;5%    <input type="checkbox"/> 6-10%    <input type="checkbox"/> 11-25%    <input type="checkbox"/> &gt;26%</p> <p><input type="checkbox"/> IP (royalties, license fees, etc.)</p>	<p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>Explanation:</p>
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Attach additional sheets as necessary.

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**Reimbursed or Sponsored Travel**

**Exclude** travel that is reimbursed or sponsored by a U.S. federal, state, or local government agency, a U.S. Institution of higher education as defined by 20 U.S.C. 1001(a), an academic teaching hospital, a medical center, or a research institute affiliated with Institution of higher education. **Attach additional sheets as necessary.**

**Past Travel (last 12 months in excess of \$5,000 per entity)**

Entity	Destination	Duration	Purpose of Trip

**Planned Travel (upcoming 12 months)**

Any reimbursed or sponsored travel in excess of \$5,000 per entity *not* included below will need to be reported to the COI Office within 30 days after the travel occurs.

- Please provide information below:

Entity	Destination	Duration	Purpose of Trip
	<input type="checkbox"/> Continental U.S. <input type="checkbox"/> Other	<input type="checkbox"/> 1-5 Days <input type="checkbox"/> 6-10 Days <input type="checkbox"/> Over 10 Days	
	<input type="checkbox"/> Continental U.S. <input type="checkbox"/> Other	<input type="checkbox"/> 1-5 Days <input type="checkbox"/> 6-10 Days <input type="checkbox"/> Over 10 Days	
	<input type="checkbox"/> Continental U.S. <input type="checkbox"/> Other	<input type="checkbox"/> 1-5 Days <input type="checkbox"/> 6-10 Days <input type="checkbox"/> Over 10 Days	
	<input type="checkbox"/> Continental U.S. <input type="checkbox"/> Other	<input type="checkbox"/> 1-5 Days <input type="checkbox"/> 6-10 Days <input type="checkbox"/> Over 10 Days	
	<input type="checkbox"/> Continental U.S. <input type="checkbox"/> Other	<input type="checkbox"/> 1-5 Days <input type="checkbox"/> 6-10 Days <input type="checkbox"/> Over 10 Days	

**Acknowledgment and Certification**

I certify under penalty of perjury that this is a complete disclosure of all my significant financial 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 term of the above proposed project.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The information provided herein may be released or transmitted to the sponsor, including federal agency representatives, and according to PHS regulations may also be released to the public, upon request. These records will be retained for 3 years after termination of sponsored project or until resolution of any action by the sponsor, whichever is greater.

**Definitions**

1. **Income** includes salary, consulting fees, honoraria, paid authorship, income received related to intellectual property rights and interests, etc. not paid by or assigned to the East-West Center.
2. **Institutional Responsibilities** is defined as teaching/education, research, outreach, clinical service, training, and public service on behalf of the Center or directly related to those credentials, expertise and achievements upon which the Investigator's East-West Center position is based.
3. A **Related Significant Financial Interest** to the Investigator's institutional responsibilities may include but are not limited to: 1) income or honoraria received for activities such as providing expert testimony or consulting services, serving on a board of directors, scientific advisory board, committee, panel or commission sponsored by a for-profit or non-profit organization, including professional or scholarly societies; acting in an editorial capacity for a professional journal or reviewing journal manuscripts, book manuscripts, or grant or contract proposals for a non-profit or for-profit organization; accepting a position as a salaried employee outside the Center or receiving royalty payments for intellectual property rights held by an entity other than the Center; 2) holding stock or stock options in a company that is developing, manufacturing or selling products or providing services used in an Investigator's clinical practice, teaching, research, administrative or committee responsibilities; or 3) travel paid for or reimbursed by an outside entity.