

**CONFIDENTIAL**

**CENTRAL STATE UNIVERSITY  
ANNUAL SIGNIFICANT FINANCIAL INTEREST DISCLOSURE**

In accordance with CSU Policy, No. 306, you must disclose all significant financial interests (SFIs) that are related to or appear to be related to your CSU research, consultation, teaching, professional practice, and service each year. Additional information and definitions for terms (\*) used in this disclosure can be found at the end of this form.

**You DO NOT need to disclose income** from Central State University or income from investment vehicles, such as mutual funds and retirement accounts, as long as you do not directly control the investment decisions made in these vehicles.

**You DO NOT need to disclose travel** that is reimbursed through Central State University or other income sponsored or reimbursed by:

- Federal, state, or local government agencies
- Institutions of higher education
- Academic teaching hospitals
- Medical centers or research institutes that are affiliated with an Institution of higher education (e.g. Premier Health)

You must complete this form even if you have no SFIs to disclose. If your financial interest change during the year, please use this form to report those changes within 30 days.

Printed Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Are you a student that is or will be participating in a research project?  Yes  No  
If yes, what your anticipated graduate date? \_\_\_\_\_

Are you involved in the design, conduct or reporting of Public Health Service (PHS) (e.g., NIH, CDC, AHRQ, FDA, etc.) research or plan to be in the next 12 months?  Yes  No

1. Have you, your spouse or dependent children received anything of monetary value, including, but not limited to, any salary, consulting fees, honoraria, or paid authorship (i.e., remuneration) from one of more publicly traded companies or organizations in the 12 months preceding the date of this disclosure?  Yes  No

2. Do you, your spouse or dependent children own stock, stock options, or other ownership interest in one or more publicly traded companies or organizations?  
 Yes  No

**CONFIDENTIAL**

3. Have you, your spouse or dependent children engaged in any travel that is sponsored or reimbursed (not through CSU) by a publicly traded company in the past 12 months or have planned sponsored or reimbursed travel (not through CSU) in the next 12 months?

Yes  No

If “yes” for questions 1, 2, and 3, please answer the following:

Does the total value of your stock, income or travel combined for a single publicly traded company exceed \$5,000?  Yes  No

***Example 1: An Investigator\* received \$3,000 in consulting fees from General Electric (a publicly traded entity) in the past 12 months. Her husband owns \$2,500 worth of stock in General Electric. Therefore, the Investigator should indicate “yes” on the form (\$3,000 + \$2,500 = \$5,500) assuming these interest reasonably appear to be related to the Investigator’s institutional responsibilities.***

If “yes”, please provide the name of each company/entity for which you or your family member own or have received income greater than \$5,000, the total value of the financial interest, and the nature of the interest (e.g., consulting income, stock ownership, etc.).

Could this significant financial interest appear to be related to any research you are currently conducting or planning to conduct at CSU?  Yes  No

If yes, please explain below.

**CONFIDENTIAL**

4. Have you, your spouse, or dependent children received anything of monetary value including, but not limited to, any sponsored or reimbursed travel, salary, consulting fees, honoraria, or paid authorship that in combination exceeds \$5,000 from a private company or organization (e., start-up, limited liability company, sole proprietorship) in the 12 months preceding the date of this disclosure or planned travel in the next 12 months?  Yes  No

If “yes”, please provide the name of each company/entity for which you or your family member have received income greater than \$5,000, the total value of the financial interest, and the nature of the interest (e.g., consulting income, paid authorship, etc.).

Does this financial interest include sponsored or reimbursed travel?  Yes  No

If “yes”, you also need to fill out separate travel form – the form will be sent to you.

Could this significant financial interest appear to be related to any research you are currently conducting or planning to conduct at CSU?  Yes  No

If “yes”, please explain.

**CONFIDENTIAL**

5. Do you, your spouse, or dependent children own or hold any ownership interest in a private company or organization?  Yes  No

***Example 2: A faculty member consults outside of his CSU position for multiple companies through a limited liability company (LLC) he founded. The faculty member should indicate “yes” on this form because he has an ownership interest in a private company. Note: If you personally own a company, any sales income may be considered remuneration whether you make a profit or not.***

If “yes”, please provide the name of each private company/entity in which you or your family member has ownership interest; the percent ownership, if known; the value of the ownership interest, if known; the type of business (website address if applicable); **AND** any position(s) you or your family member hold in the company (i.e., CEO, President, etc.).

Could this significant financial interest appear to be related to any research you are currently conducting or planning to conduct at CSU?  Yes  No

If “yes”, please explain.

**CONFIDENTIAL**

6. Have you, your spouse, or dependent children received any income from intellectual property rights (e.g. patents, licenses, and copyrights) or interests not held by CSU in the 12 months preceding this disclosure?  Yes  No

**Example 3: An Investigator's spouse receives royalties via licensing agreement for a new electronic sensor and electronic sensors appear to be related to the Investigator's institutional responsibilities. The Investigator should indicate "yes" on the form.** If "yes", please provide the type of intellectual property (IP) rights, amount of income received in past 12 months, and general description of the IP.

Could this significant financial interest appear to be related to any research you are currently conducting or planning to conduct at CSU?  Yes  No  
If "yes", please explain.

I certify that the above information is complete and true to the best of my knowledge and that, I have read the University's policies and procedures related to conflict of interest. Appropriate Institutional Officials will review this information in confidence. By signing below, I acknowledge that the information may be disclosed to persons and entities, including but not limited to, the Vice President and Provost of Academic Affairs and Vice President and Chief Financial Officer of Administration and Finance, University personnel, research sponsors, state and federal oversight agencies, as necessary to comply with the terms of grants, contracts, or other agreements and to determine and ensure compliance with the applicable laws, regulations, policies, and procedures.

**CONFIDENTIAL**

I acknowledge my obligation to submit an updated form when there is a change in my activities or financial interests related to my institutional responsibilities. Additionally, if I am Principal Investigator/Program Director on a sponsored project, I understand that it is my responsibility to ensure that other members of the research and/or program team submit their disclosures and update those disclosures on an ongoing basis as their circumstances change.

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

Print Name: \_\_\_\_\_

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

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### DEFINITIONS YOU NEED TO KNOW TO COMPLETE THIS FORM:

**REMUNERATION:** Remuneration means anything of monetary value including, but not limited to, any salary, consulting fees, honoraria, paid authorship, and travel reimbursement.

**INVESTIGATOR:** The term Investigator means the principal investigator (PI), project director (PD), any co-investigators, collaborators, staff, fellows, residents, and student who are responsible for the design, conduct, or reporting of research, or proposed for funding such as subgrantees, contractors, collaborators, or consultants.

**INSTITUTIONAL RESPONSIBILITIES:** Institutional Responsibilities means an Investigator's professional responsibilities on behalf of Central State University including, but not limited to, activities such as research, research consultation, teaching, professional practice, institutional committee memberships, and service on panels such as Institutional Review Boards or Data and Safety Monitoring Boards.

**EQUITY:** Equity means stocks, stock options, or other ownership interests.

### WHAT DOES NOT NEED TO BE REPORTED ON THIS FORM?

Any salary or other payments for services that Central State University pays to the Investigator as long as he/she remains employed or otherwise appointed by Central State University.

Income from service on advisory committees, review panels, seminars, lectures, or teaching engagements sponsored by federal, state or local government agencies or institutions of higher education.

### SUBMIT THE COMPLETED FORM TO:

Tina Castonguay  
Grants Manager  
Office of Sponsored Programs and Research  
Carl C. Jenkins Hall, Room 100  
[tcastonguay@centralstate.edu](mailto:tcastonguay@centralstate.edu)