

**Disclosure Supplement**

If an investigator answers “Yes” to questions #1 - 5 on the Investigator Disclosure Statement, then completion of questions #1 - 8 below are required. If an Investigator answers “Yes” to question #6 on the Investigator Disclosure Statement, then completion of question #9 below is required.

Name and Title of Investigator:

List of all Active Research Projects and Investigator Role in each:

Name of all entities in which you have a financial interest:

1. Do you hold a management position such as board member, director, officer, partner, or trustee in any of the entities listed above?

No            Yes

If Yes, position(s) held with each entity:

2. If you answered No to question #2 on the Investigator Disclosure Statement then proceed to question #3. If you, your spouse, registered domestic partner, or dependent child(ren) have: a financial interest in any publicly or non-publicly traded entity where the value of any remuneration received from the entity in the twelve months preceding this disclosure when aggregated exceeds \$5,000; and/or hold any equity in an entity, as of the date of disclosure, complete the following for each entity in which you have this level of financial interest:

A. Name of Entity:

If stock or stock options, # of shares:                      and/or estimated current dollar value: \$

If bonds, estimated current value: \$

Estimated percentage of total value of the company your interest represents, if known:                      %

List any other forms of remuneration:

B. Name of Entity:

If stock or stock options, # of shares:                      and/or estimated current dollar value: \$

If bonds, estimated current value: \$

Estimated percentage of total value of the company your interest represents, if known:                      %

List any other forms of remuneration:

3. If you answered No to question #3 on the Investigator Disclosure Statement then proceed to question #4. If you, your spouse or registered domestic partner or dependent child(ren) receive income (including any payment, such as salary or consulting fees, royalty payments (paid directly by the entity), reimbursement of expenses (including travel), etc.) of \$5,000 or more received within the last 12 months from an entity complete the following for each entity in which you have this level of financial interest:

A. Name of Entity: Amount: \$

B. Name of Entity: Amount: \$

C. Name of Entity: Amount: \$

Do you, your spouse or registered domestic partner or dependent child(ren) receive income or anticipate receiving income of \$5,000 or more during the next 12 months?

A. Name of Entity: Amount: \$

B. Name of Entity: Amount: \$

C. Name of Entity: Amount: \$

If you received income, or anticipate receiving income, please specify the type. Check all that apply:

- Consulting Income
- Honoraria Salary
- Reimbursement for travel, per diem, other
- Royalties (not from RFSUNY)
- Dividends
- Other (specify):

4. If you have you received a loan from an entity listed above for which the outstanding balance has exceeded \$5,000 in the past 12 months please list here with the following information.

A. Name of Entity: Balance: \$ Interest rate: %

B. Name of Entity: Balance: \$ Interest rate: %

C. Name of Entity: Balance: \$ Interest rate: %

5. Do you have an inventive or ownership interest in any intellectual property (IP) (e.g., inventions, tangible research materials, copyrights, etc.) that are not related to RFSUNY that will be utilized in this project?

No Yes

If Yes, please answer questions below for each piece of IP that will be utilized in this project.

- Provide a brief non-technical description of the intellectual property involved.
- Will the IP be used as a research tool or will it be further developed under the proposed research?
- Please identify the owner of the IP to be utilized in this project:

6. Do you own or have any other financial interest in an entity that is proposed as a subcontractor, consortium member, or lessor, or is otherwise involved in the project? Please describe the(se) relationship(s).

7. Do you receive reimbursed or sponsored travel related to your Institutional responsibilities? This does not include travel that is reimbursed or sponsored by a federal, state, or local government agency, an Institution of higher education, academic teaching hospital, medical center, or research institute affiliated with an Institution of higher education.

No            Yes

8. If you reported a significant financial interest related to this project, please explain, to the best of your ability, how this interest may have a direct and significant impact on the design, conduct or reporting of the proposed research or, alternatively, why you believe it will not have a direct and significant impact.

9. If you answered Yes to question #6 on the Investigator Disclosure Statement please provide more detail associated with your Foreign Affiliation ***that is related to your research*** such as: foreign component of federally-funded research; other financial support, domestic or foreign, in direct support of your research endeavors including participation in a foreign talent program; Significant Financial Interest from a foreign entity; or foreign consulting and outside business activities.

VERIFICATION: I have used all reasonable diligence in preparing this statement, and to the best of my knowledge it is true and complete.

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Signature

Date