

**LIFESPAN OFFICE OF RESEARCH ADMINISTRATION  
DISCLOSURE STATEMENT OF FINANCIAL INTERESTS AND OUTSIDE PROFESSIONAL ACTIVITIES**

Principal Investigator(s): \_\_\_\_\_

Title of Proposal: \_\_\_\_\_

**Investigator’s Name Disclosing Information:** \_\_\_\_\_

**Department:** \_\_\_\_\_

Each investigator is required to complete CITI *Lifespan* Conflict of Interest (COI) Training prior to engaging in any research and at least every four years. <https://www.lifespan.org/office-research-administration/conflict-interest>

New/Annual Disclosure: \_\_\_\_ Correction or addendum to previous report: \_\_\_\_

*Investigator means the Project Director or Principal Investigator (PD/PI) and any other person, regardless of title or position, who is **responsible** for the design, conduct or reporting of research that is conducted at Lifespan. The Principal Investigators of each sponsored project are responsible for determining which people (e.g., co-investigators, collaborators, staff, trainees, consultants, etc.) meet the definition of “investigator” and are responsible for the filing of conflict of interest disclosures for each person.*

Do you (including your spouse, domestic partner, and dependent children) have any of the financial interests described below that reasonably appear to be related to your institutional responsibilities (teaching, research, administration and clinical care):

YES	NO	Please check appropriate box for EACH line:																				
<input type="checkbox"/>	<input type="checkbox"/>	1. Any salary or payment for services (e.g., consulting fees, honoraria, paid authorship, fees from participating in speakers’ bureaus, etc.), other than through a Lifespan affiliate, from a <b>publicly</b> traded entity in the past 12 months?																				
<input type="checkbox"/>	<input type="checkbox"/>	2. Currently, any equity interest (e.g., stocks, stock options, other ownership interest) in a <b>publicly</b> traded entity?																				
<input type="checkbox"/>	<input type="checkbox"/>	3. Combined payment/income from items 1 and 2 that exceed \$5,000 for any single <b>publicly</b> traded entity?																				
<input type="checkbox"/>	<input type="checkbox"/>	4. Any salary or payment for services (e.g., consulting fees, honoraria, paid authorship, fees from participating in speakers’ bureaus, etc.) from a <b>non-publicly</b> traded entity in the preceding 12 months that exceeds \$5,000?																				
<input type="checkbox"/>	<input type="checkbox"/>	5. Currently, <b>any</b> equity interests (e.g., stocks, stock options, other ownership interest) in a <b>non-publicly</b> traded entity?																				
<input type="checkbox"/>	<input type="checkbox"/>	6. Intellectual property rights (e.g., patents, copyrights or royalties from these rights) other than through Lifespan? NOTE: must be reported upon receipt of income.																				
<input type="checkbox"/>	<input type="checkbox"/>	7. <b>Please report, (if applicable), Reimbursed or Sponsored Travel (that which is paid on behalf of the investigator and not reimbursed to the investigator so that the exact monetary value may not be readily available) – exclude</b> travel that is reimbursed or sponsored by Federal, state, or local government agencies, an 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 an institution of higher education <b>(add more lines as needed).</b>																				
		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">ENTITY/SPONSOR</th> <th style="width: 25%;">DESTINATION</th> <th style="width: 25%;">DURATION</th> <th style="width: 17%;">PURPOSE OF TRIP</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	ENTITY/SPONSOR	DESTINATION	DURATION	PURPOSE OF TRIP																
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Further information regarding Lifespan’s Research Conflict of Interest Policy (ORA GEN 003) may be found at: <http://www.lifespan.org/conflict-of-interest.html>. Further information regarding Lifespan’s Corporate Compliance Policies may be found at <http://intra.lifespan.org/policies/Corporate%20Compliance%20Policies/Corporate%20Compliance%20System-wide%20Policies/>

**I certify that the above information is true to the best of my knowledge. I know of no other potential or actual conflict of interest situations in this research. I will report any change within 30 days of occurrence.**

\_\_\_\_\_  
**Printed Name of Investigator**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

If you checked “YES” for any items on this form, please obtain the appropriate departmental chair or chief signature. In addition, you will be contacted for more specific information relating to your financial interests which will be presented to the Lifespan Research Conflicts of Interest Committee (LRCOIC). *Note that no research on this project may proceed until LRCOIC has determined whether a financial conflict of interest exists, and if it does, has established and implemented a financial conflict of interest management plan.*

\_\_\_\_\_  
**Printed Name of Chair/Chief**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**