

## PHS-Funded Project Financial Interests Report

submitted pursuant to the requirements of Lehigh University's Policy on Disclosure of Investigator Significant Financial Interests Related to Sponsored Projects and Addendum for Public Health Service (PHS) Funded Projects

Federal regulations require that greater disclosures of potential financial conflicts of interest be made to the University and the PHS when an "Investigator" (key personnel named in the proposal or award and anyone responsible, fully or in part, for the design, conduct or reporting of the research) participates in PHS-funded research than in most other sponsored research contexts. University compliance with these rules is a condition for submitting applications for, or accepting PHS funding. These disclosure rules also apply to other agencies that require compliance with PHS requirements. Notably, PHS rules require the University, not the Investigator, to make the initial judgment as to whether there is a significant financial conflict of interest as defined by PHS. For that purpose, the University must collect information regarding any sources of income and holdings (subject to a threshold of \$5,000 in any 12 month period), as well as any relationships that could reasonably be perceived as affecting your conduct of any of your responsibilities at Lehigh.

The Director of the Office of Research and Sponsored Programs and the Director of Internal Audit will review your responses. Should it be determined that there is a significant financial conflict of interest as defined by the PHS regulations, the conflict will be managed per University policies on conflicts of interest. In addition to required reporting to PHS, PHS rules require the University to disclose certain information about the nature of any PHS-defined significant financial conflicts of interest in response to a specific request for this information from a member of the public.

**Each Investigator proposing to participate in PHS-funded research, or research funded by any sponsor requiring compliance with PHS rules on financial conflicts of interest, must complete this form as part of the Office of Research and Sponsored Program's internal proposal process and must continue to do so at least annually during the period of the PHS award.**

**A revised copy of this form must be submitted within 30 days of any change in your answers to the questions below, or to the supporting details.**

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

I am reporting on activities:      for the year \_\_\_\_\_  
   as an addendum to my most recent report

As you answer these questions, please keep in mind the following:

- Your answers should pertain to the preceding 12 months.
- "Your family" refers to your spouse, domestic partner and dependent children.
- "Related to your work at Lehigh" refers to both:
  - any activities that rely upon the same expertise that you rely upon to carry out your responsibilities at Lehigh University, including teaching, research and service; and
  - any interest, activity or relationship that has the potential to influence your conduct of any of your responsibilities at Lehigh, including teaching, research and service.

<input type="checkbox"/> yes	<input type="checkbox"/> no	<p>1. Compensation (not including travel expenses). Have you or a member of your family received compensation of any kind, including conferral of equity, that, when aggregated exceeds \$5,000, from an entity other than Lehigh University for any activity related to your work at Lehigh?</p> <p>*Do not include income from the authorship of academic or scholarly works; seminars, lectures, or teaching engagements sponsored by or from advisory committees or review panels for U.S. Federal, state or local governmental agencies; U.S. institutions of higher education; research institutes affiliated with institutions of higher education, academic teaching hospitals, and medical centers.</p>
<input type="checkbox"/> yes	<input type="checkbox"/> no	<p>2. Travel expenses. Have you or a member of your family been reimbursed for travel or has travel been paid for on your or their behalf, by any entity whose business, interests or activity relates to your work at Lehigh?</p> <p>*Do not include travel expenses reimbursed or sponsored by U.S. Federal, state or local governmental agencies; U.S. institutions of higher education; research institutes affiliated with institutions of higher education, academic teaching hospitals, and medical centers.</p>
<input type="checkbox"/> yes	<input type="checkbox"/> no	<p>3. Equity in publicly-traded entity. Do you and/or a member of your family hold an equity interest (e.g., stock, stock option, other ownership interest) in a publicly-traded or privately-owned entity whose business relates to your work at Lehigh?</p> <p>*Do not include income from investment vehicles (e.g., mutual funds and retirement accounts), unless you directly control the investment decision made by such an investment vehicle.</p>
<input type="checkbox"/> yes	<input type="checkbox"/> no	<p>4. Equity in non-publicly-traded entity. Do you and/or a member of your family hold an equity interest in a non-publicly-traded or privately-owned entity whose business relates to your work at Lehigh?</p> <p>*Do not include income from investment vehicles (e.g., mutual funds and retirement accounts), unless you directly control the investment decision made by such an investment vehicle.</p>
<input type="checkbox"/> yes	<input type="checkbox"/> no	<p>5. Role. Do you or a member of your family serve as a director, trustee, officer or other key employee in a for-profit corporation, partnership, business, or other entity outside of Lehigh University whose business, interests or activities relate to your work at Lehigh?</p>
<input type="checkbox"/> yes	<input type="checkbox"/> no	<p>6. Intellectual Property. Do you or a member of your family have rights to and/or receive royalties from intellectual property (including, patents copyrights and trademarks but excluding academic or scholarly works) licensed to and/or owned by a for-profit entity?</p> <p>*Do NOT include intellectual property owned or managed by Lehigh University.</p>

If you answered “yes” to any of these questions, please attach a separate page describing the relationship or circumstances giving rise to such an answer. Include the name and address of the external entity with which you or a family member have such a relationship, the nature of the relationship (e.g., equity interest, consultant, trustee), the amount of compensation received or financial interest held in the period specified above, and information on the relationship’s connection, if any, to your participation in the PHS-funded project for which you are completing this form.

Certification:

I have read and understand Lehigh University's Policy on Disclosure of Investigator Significant Financial Interests Related to Sponsored Projects and Addendum for PHS Funded Projects and have completed this report to the best of knowledge and belief. If required, I will comply with any conditions or restrictions imposed by Lehigh University to manage any real or perceived conflicts. Should my outside financial or managerial interests, or those of my family, change in a way that results in different answers to any of the questions asked in this report, I agree to promptly submit a revision.

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(date)

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(signature)