Trinity University
Conflict of Interest Disclosure Statement (Part C)

1. Equity Interests in Related Business
Please provide the following information for any equity interest held in any related business by you or anyone in your family which could have been influenced by the exercise of your professional duties at Trinity. Also, provide the following information if you anticipate this happening. Complete a Part C for each unique interest.

1a. Business name: 
1b. Publicly traded: YES NO 
1c. Value of equity interest: 
   (1) Less than $5000 
   (2) Between $5,000-$50,000 
   (3) Over $50,000 
1d. Percentage owned or controlled: 
   (1) Less than 1% 
   (2) Between 1-4.9% 
   (3) Between 5-50% 
   (4) Over 50% 
1e. Relationship of owner to you: 
   (1) self 
   (2) family member 
   (3) other 
1f. Past period or anticipated: 
   (1) Past period 
   (2) Anticipated 
   (3) Both 
1g. Relationship of business to my research activities: (Circle all that apply) 
   a. Business sponsors Trinity Research for which I am a PI. 
   b. Business sponsors Trinity Research in which I participate but I am not the PI. 
   c. Business sponsors research outside of Trinity in which I participate 
   d. Business does not sponsor my research, but my research could have financial implications for the business. 
   e. Other (please specify) 

1h. Relationship of business to my extension activities:(Circle all that apply) 
   a. Business sponsors extension activities outside of Trinity in which I participate. 
   b. Business does not sponsor my extension activities, but these activities could have financial implications for the business. 
   c. Other (Please specify) 

1i. Relationship of business to my supervisory/administrative activities at Trinity: (Circle all that apply) 
   a. I am involved in decisions regarding services (other than sponsored research) which the business provides to/receives from Trinity. 
   b. I assign or supervise students, residents, fellows, or other faculty whose work could have financial implications for the business.
c. Other (Please specify)

2. Financial Connections with Related Businesses
Please provide the following information for any for-profit business whose activities relate to your professional area at Trinity in which you or anyone in your family has been in a policy position or from which you or anyone in your family received loans, gifts, royalties or earned income of total value greater than $500 (excluding consulting income). Also, please provide the following information if you anticipate this happening. Exclude any income that is reported in your answer to question 1.

2a. Business name:
2b. Publicly traded: YES NO
2c. Total value received:
   (1) Less than $5,000
   (2) Between $5,000-50,000
   (3) Over $50,000
2d. Financial connection with the business: (Circle all that apply)
   a. Consulting/employment
   b. Loan
   c. Gifts
   d. Honoraria for papers or lectures
   e. Director, Officer, Partner, Agent, or managerial position
   f. Royalties
   g. Other (Please specify):
2e. Your relationship to individual who has financial connection with the related business:
   (1) Self
   (2) Family member
   (3) Other
2f. Past period or anticipated:
   (1) Past period
   (2) Anticipated
   (3) Both
2g. Relationship of business to my research activities: (Circle all that apply)
   a. My research has no financial implications for the business.
   b. Business sponsors Trinity Research for which I am a PI.
   c. Business sponsors Trinity Research in which I participate but I am not the PI.
   d. Business sponsors research outside of Trinity in which I participate
   e. Business does not sponsor my research, but my research could have financial implications for the business.
   f. Other (please specify)
2h. Relationship of business to my extension activities: (Circle all that apply)
   a. My extension activities have no financial implications for the business.
   b. Business sponsors extension activities outside of Trinity in which I participate.
   c. Business does not sponsor my extension activities, but these activities could have financial implications for the business.
   d. Other (Please specify)
2i. Relationship of business to my supervisory/administrative activities at Trinity: (Circle all that apply)
   a. My Trinity supervisory/administrative activities have no financial implications for the business.
   b. I am involved in decisions regarding services (other than sponsored research) which the business provides to/receives from Trinity.
   c. I assign or supervise students, residents, fellows, or other faculty whose work could have financial implications for the business.

3. **Outside Employment of Students or Staff**
In the space below, please describe your utilization or anticipated utilization of the services, In either paid or unpaid capacities, of any Trinity students or staff for activities external to Trinity over whom you exercise supervisory or academic responsibility in your role at the University.

3a. Employment or utilization of services of staff:

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<td>Number of staff involved:</td>
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<td>Total Number of days:</td>
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<tr>
<td>Related to my Trinity Duties</td>
<td>YES  NO</td>
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<tr>
<td>Unrelated to my Trinity Duties</td>
<td>YES  NO</td>
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3b. Employment or utilization of services of graduate students:

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<td>YES  NO</td>
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<tr>
<td>Unrelated to my Trinity Duties</td>
<td>YES  NO</td>
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3c. Employment or utilization of services of undergraduate students:

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<tr>
<td>Unrelated to my Trinity Duties</td>
<td>YES  NO</td>
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4. **Use of Trinity Resources to support External Activities:**
In the space below, please describe any use that you made or anticipate making of Trinity facilities, equipment, intellectual property, or staff services to support consulting at a for-profit business or some other commercial activity.
5. **Other Financial Interests**
In the space below, please describe the financial interests that you, or anyone in your immediate family had or anticipate having in any contract, sale, or other transaction to which Trinity was or will be a party.

6. **Other Situations**
In the space below, please describe any other situations, not listed above, that may create an actual or perceived conflict of interest between your role at Trinity and an outside interest. Also, please describe any situations that anticipate arising.
The following information relates to the Trinity Administration responsibilities concerning the implementation of a university Conflict of Interest Policy concerning faculty involved in research funded by federal contracts or grants:

§50.603 Definitions
Investigator ... includes the investigator’s spouse and dependent children .......................Definitions back Part B & 3.3 (new)

§50.604 Institutional responsibility regarding SIGNIFICANT FINANCIAL INTERESTS of Investigators
(a) Each Institution must: TU Conflict Policy
1) Inform each investigator...........................................................3.4
2) Designate an institutional official(s) to solicit & review financial disclosure stmts. from each investigator who is planning to participate in funded research....................3.2 (new)
3) Investigators provide a listing of significant financial interests prior to the time an application is submitted .........................Intro & 3.7 (new)
4) ... take such actions as necessary to ensure that any such financial interest will be managed, reduced, or eliminated..................................2.3 (new)
5) Maintain records, identifiable to each award of all financial disclosures & all actions taken by the Institution with respect to each SIGNIFICANT FINANCIAL INTEREST.....................3.5 (new)
6) Establish procedures for resolving any alleged violation of the financial conflict of interest policy & establish appropriate enforcement action for failure to comply.................................................4.2
7) Certify, in each application for funding to which this subpart applies
   i) There is in effect a written & enforced administrative process to eliminate Significant Financial Interests of the type described at § 50.605 (a).................................................3.2 (new)
   ii) Certify that actions will be taken prior to the award of funding to manage, reduce or eliminate Significant Financial Interests of the type described at § 50.605 ...............Intro (new)
   iii) The Institution agrees to make info. available, upon request, to HHS regarding all Significant Financial Interest identified by the Institution of the type described at §50.605 and how those interests have been managed, reduced or eliminated.............................................3.5 (new)
   iv) The Institution will otherwise comply with this subpart.
8) i) Notify the awarding component of the identification and management, reduction or elimination of any Significant Financial
Interests of the type described at § 50.605 that originates or becomes known to the institution after the grant or cooperative agreement has been awarded, within 60 days of its becoming aware of that interest..............................................3.6 (new) & 3.8(new)

ii) The HHS may at any time request submission of, or review on site, all records pertinent to these certifications. To the extent permitted by law, all records of financial interests will be maintained confidentially..................................................... 3.5 (new)

iii) An investigator may participate in a funded research project simultaneously supported by an organization that has a commercial interest in the finding of the research project....Any direct compensation or payment to the Investigator under that support is considered a financial interest under this subpart...........................................2.1

§50.606 Management of Significant Financial Interests
(a) If the failure of an employee to comply with the policy of the institution has biased the design conduct, or reporting of the ... research, the institution must promptly notify the ... awarding component.................................................................3.9 (new)

(c) In any case in which HHS determines that a funded project of clinical research whose purpose is to evaluate the safety or effectiveness of a drug, medical device, or treatment has been designed, conducted, or reported by an investigator with a Significant Financial Interest that was not disclosed or managed as required by this subpart, The institution must require disclosure of the financial interest in each public presentation.............................3.6 (new)