

Investigator Name: \_\_\_\_\_  
 Investigator Title: \_\_\_\_\_  
 Department and College: \_\_\_\_\_  
 Project Title: \_\_\_\_\_  
 Proposed Sponsor: \_\_\_\_\_

Please disclose all financial interests related to your institutional responsibilities for the previous 12 months, as well as those of your spouse and dependent children. An SJSU Official will review this disclosure and identify whether any financial interest constitutes a Significant Financial Interest as defined by the state or federal agency sponsoring your research. **Use one page per entity.**

Name of Entity: \_\_\_\_\_  
 Address of Entity: \_\_\_\_\_  
 Principal Business of Entity: \_\_\_\_\_  
 Is this Entity publicly traded? Yes No

With regard to this entity, are/have you, your spouse or your dependent children:

- A director, officer, partner, trustee, board member, co-founder or employee? Yes      No
- Received any remuneration in the previous 12 months that, when aggregated, exceeds \$5,000? Yes      No
- *(If this entity is publicly traded)* Owned equity interest in the previous 12 months, including any stock, stock option or other ownership interest, as determined through reference to public prices or other reasonable measures of fair market value that exceeds \$5,000 or 5% of ownership interest, whichever is less? Yes      No      NA
- *(If this entity is not publically traded)* Owned any equity interest in the previous 12 months? Yes      No      NA
- Hold any intellectual property rights and interests with the entity, such as patents or copyrights? Yes      No
- Received sponsored or reimbursed travel related to your institutional responsibilities in the previous 12 months that, when aggregated, exceeds \$5,000? Yes      No

If you indicated **Yes** regarding sponsored or reimbursed travel, please provide the information below. Add additional pages as necessary.

Start Date:	End Date:	Destination:
Purpose of Trip:		
Start Date:	End Date:	Destination:
Purpose of Trip:		
Start Date:	End Date:	Destination:
Purpose of Trip:		
Start Date:	End Date:	Destination:
Purpose of Trip:		

If you indicated **Yes** to any of the questions above, please complete and attach the Addendum Form. **Use one Addendum Form per entity.**