University of Puerto Rico  
Financial Conflict of Interest Annual Disclosure Form  
Form 2.A

### PLEASE PRINT

<table>
<thead>
<tr>
<th>Name:</th>
<th>Disclosure Year:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>This is the previous calendar (January-December) year.</td>
</tr>
<tr>
<td>Rank/Title:</td>
<td>Grant ID #:</td>
</tr>
<tr>
<td>Department:</td>
<td>FTE:</td>
</tr>
<tr>
<td>Center:</td>
<td>Institute:</td>
</tr>
<tr>
<td>Email:</td>
<td>Campus Phone:</td>
</tr>
</tbody>
</table>

### When do I complete this form?

Complete this form no later than May 1st of each year.

### Question:

During the last calendar year (January through December), did you, your spouse, domestic partner and/or dependent children, alone or in combination, have **significant financial interest** in an entity that:

- **sponsors** your research or your program,
- **has made or pledged a gift** to the University of Puerto Rico that benefits your research or sponsored program,
- **has products, services, or research interests** that could reasonably appear to be affected by your research or sponsored program,
- **sells goods or services** to the University that will be used in your research or sponsored program, or
- **has another involvement in** your research or sponsored program (such as a consulting agreement)?

A **significant financial interest** involves:

- (a) receiving compensation during the year over $5,000 or
- (b) having an equity interest over $5,000 or

(This does not include ‘indirect’ equity interest or ownership through mutual funds.)

____ NO  Your disclosure is complete. Please sign and submit this form.

____ YES Sign this form **and** complete a FCOI Annual Disclosure Attachment (Form 2.B) for each external entity in which there is a significant financial interest and submit all forms together.

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I agree to abide by University of Puerto Rico’s Financial Conflict of Interest Policy and Guidelines. In submitting this form and disclosure attachments, if required, I certify that the information provided is true to the best of my knowledge. I supply this information for confidential review by University of Puerto Rico, and for such other limited purposes as are required by law, regulation, or contract. I do not authorize release of any of it for any other purpose. I understand and agree that if there is a material change (an acquisition of a significant financial interest) to this information, I must submit a new disclosure and attachment within 30 days of that change.

Signature: ___________________________________________ Date: __________________________

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