

Disclosure Statement

for certain Research Foundation officers or employees* upon application for federal funds

*As defined in the Conflict of Interest Policy Name Title of Position Campus Department Use additional sheets if necessary. 1. List any office, trusteeship, directorship, partnership or position of any type, whether or not compensated, held by you or your spouse or dependent children with any firm, corporation, association, partnership or other organization other than the Research Foundation State University, or State of New York. **DO NOT** LIST THE AMOUNT. Report those affiliations held by you, your spouse, or your dependent children that would reasonably appear to affect or be affected by the research or educational activities funded or proposed for funding by the sponsor and that produce annual compensation greater than \$10,000. Self/Spouse/ Name of Dependent Organization Children and Address Position **Description** 2. List name and describe the nature and source of any current employment or occupation of spouse and dependent children. Report only that employment that would reasonably appear to be affected by the research or educational activities funded or proposed for funding by the sponsor and that produces annual compensation greater than \$10,000. Name Source Nature



3.	List the name of warrants or stocks and other investment interests, including any interests in limited or general partnerships owned by you, your spouse, or your dependent children at time of filing for federal funding. DO NOT LIST AMOUNTS. Report only those interests that would reasonably appear to be affected by the research or educational activities funded or proposed for funding by the sponsor and that are valued at greater than \$10,000.	
	Self/Spouse	
	Dependent Children	Issuing Entity
I decla	re that the above information is true and correct.	
Signati	ure	Date