

Michigan State University

## Conflict of Interest Entity Disclosure Form

Name:

Attach this form to your Conflict of Interest Disclosure and submit to [fcioio@msu.edu](mailto:fcioio@msu.edu) or 4000 Collins Road, Room 109, Lansing, Michigan 48910-5883. Phone: 517-884-7000 Fax: 517-432-9555. For more information, see [coi.msu.edu](http://coi.msu.edu).

### Entity (company, organization, etc.) Information:

If you, your spouse, domestic partner, dependent children and other dependents residing with you have a [significant financial interest](#) in an entity related to your MSU [institutional responsibilities](#), complete the following for each such entity. (Use additional form for each entity.)

Entity Name:

Entity Address:

City:

State:

Zip:

Country:

Entity website, if available:

What is your relationship to the entity?

What is the principal business activity of the entity?

How is the entity related to your MSU responsibilities?

1. Did you receive income or payments of any kind from a single entity related to your MSU institutional responsibilities which exceeded \$5,000 over the last 12 months?  
 No Yes If Yes, indicate self or other relation who holds the interest:  
 Indicate type of income/ reason for income:      Salary      Fee      Honorarium      Royalties      Other (investment income, etc.)
2. Do you have ownership interests (e.g., stock) in a single entity related to your MSU institutional responsibilities of more than \$5,000 or which comprise more than 1% of its equity?  
 No Yes If Yes, indicate self or other relation who holds the interest:
3. Do you serve as a trustee for a trust or estate, or have a beneficial interest in a trust or estate, with investments related to your MSU institutional responsibilities whose value exceeds \$5,000?  
 No Yes If Yes, indicate self or other relation who holds the interest:  
 Indicate which investments are related to your MSU institutional responsibilities:
4. Have you provided or received a loan from a business or company (excluding banks, credit unions, or other commercial lenders) exceeding \$5,000?  
 No Yes If Yes, indicate self or other relation making/receiving the loan:
5. Do you have intellectual property rights related to your MSU institutional responsibilities whose established fair market value exceeds \$5,000 or which generate income of any value from the above non-MSU source?  
 No Yes If Yes, indicate self or other relation who holds the interest:  
 Describe the nature of the intellectual rights and the license holders:
6. Do you have unvalued options for stock or ownership of any value in a private company related to your MSU institutional responsibilities?  
 No Yes If Yes, indicate self or other relation who holds the interest:  
 Describe the stock options:
7. Do you serve on a governing or advisory board, or in a fiduciary or managerial role, for, or as a general partner of, an entity related to your MSU institutional responsibilities with or without pay?  
 No Yes If Yes, indicate self or other relation who serves:  
 Indicate the role served (director, officer, partner, member, adviser, other):
8. Is the above organization a business or company from which you have received a gift/direct personal benefit (e.g. airline tickets, hotel or resort accommodations, cruises, etc.) of \$250 or more not paid or reimbursed through MSU?  
 No Yes If Yes, indicate self or other relation who received the gift/benefit:  
 Describe the nature of the benefit :
9. Do you have opportunity for tangible personal benefit from this entity?  
 No Yes If Yes, indicate self or other relation who has the opportunity for benefit :
10. Have you alone previously benefited, or expect to benefit in the coming year, with travel sponsored or reimbursed by the above organization of any value?  
 No Yes Please provide the actual/expected start and end dates, destination, and purpose of each trip: