

## COI INTELLECTUAL PROPERTY (IP) DISCLOSURE FORM

Upload with signed COI certification form into RD2K<sup>1</sup>. [See instructions](#). (FY2016)

For assistance in filling out this form, please call 713-743-9255

According to your answers on the [Conflict of Interest Certification form](#), you/your immediate family member(s) receive royalties from licensed Intellectual Property (patents, copyrights, trademarks) that may reasonably appear to be related to your institutional responsibilities on behalf of the University of Houston.

**This form should ONLY be filled out if:**

- You receive Royalty Income from an entity other than the University of Houston; **OR**
- You receive Royalty Income through UH, and you or your family have a financial interest in the entity licensing the IP **AND**
- The licensed Intellectual Property rights (e.g. patents, copyrights, trademarks) would reasonably appear to be related to your research or research collaborations

Note: This form is not used to disclose income from paid authorship/book royalties. Such interests should be disclosed as remuneration on the Significant Financial Interest Disclosure form.

A separate COI IP Disclosure Form is required **for each licensed IP** that has the perceived potential to directly and significantly affect the design, conduct, or reporting of activities related to the IP.

**COI IP Disclosures are reviewed by the University of Houston's Conflict of Interest Committee. To avoid potential delays, be as detailed and specific as possible.**

Name:

Department/College/Center:

Patent application/UH ID number or issued patent number(s):

Title:

Brief summary of the IP:

Who are the inventors?

Who is the assignee? (Who owns the IP?)

Who is the licensee?

<sup>1</sup> If you do not have access to RD2K, consult your Departmental Business Administrator to determine the Departmental process.

**Section I:**

This section does not apply

**IP Royalty Income is Received from an Entity other than UH**

Please indicate your relationship to **who receives this income:**

Self

Spouse, if UH employee, name:

Dependent, if UH employee, name:

From what entity is the income received?

Indicate the range, in U.S. Dollars, of income received:

\$1-\$4,999

\$60,000-\$79,999

\$5,000-\$9,999

\$80,000-\$99,999

\$10,000-\$19,999

\$100,000 and above. If above, specify the amount in increments of \$50,000:

\$20,000-\$39,999

\$40,000-\$59,999

**Section II:**

This section does not apply

**IP Royalty Income is Received through UH and I/my family have a Financial Interest in the Entity Licensing the IP**

**Who holds a significant financial interest** (remuneration, equity/ownership, or holds a leadership role) **in the entity the IP is licensed to?**

Self

Spouse, if UH employee, name:

Dependent, if UH employee, name:

Describe the type of financial interest:

Remuneration

Leadership Role, specify:

Equity/Ownership

Other, specify:

Indicate the range, in U.S. Dollars, of the financial interest:

\$1-\$4,999

\$60,000-\$79,999

\$5,000-\$9,999

\$80,000-\$99,999

\$10,000-\$19,999

\$100,000 and above. If above, specify the amount in increments of \$50,000:

\$20,000-\$39,999

\$40,000-\$59,999

## Section III: Summary of Potential Conflict

This section applies to all.

Please provide a DETAILED summary of how the Intellectual Property and related financial interests you have disclosed might reasonably appear to affect (or be affected by) your funded/proposed research.

## Section IV: Management Plan

This section does not apply

Describe any means by which you intend to, or are currently, managing actual or potential conflicts of interest related to this disclosure (see [policy](#) for examples). Alternately, a separate document containing this plan may be attached.

Attach this and any other applicable disclosures to your Certification form prior to routing for required signatures.

## INVESTIGATOR SIGNATURE

### INVESTIGATOR SIGNATURE:

In submitting this form, I certify that the above information is true and complete to the best of my knowledge.

\_\_\_\_\_  
Investigator

\_\_\_\_\_  
Date

## REMINDER

Updated disclosures are required annually with submission of certification, and:

- Within 30 days in the case of any new acquisitions or discovery of new significant financial interests
- At the time of application for new funding, if current financial interests could reasonably affect or be affected by the proposed research

Failure to do so can delay the submission of proposals or the release of research funding.