

#### **Entity Detail**

1.	Entity Name:				
2.	Please describe the business of this entity in detail:				
^	<b>M</b> 1				
3.	Who has interest in	·			
	Self	Spouse	Domestic Partner	Dependent Child	
4.	Is this a for-profit or non-profit entity?				
	Profit	Non-profit			
5.	. Is this entity publicly traded or privately held?				
	Publicly Tradeo	d Privately He	ld		
6.	. Was compensation made in the form of:				
	Salary				
	Consulting Fees				
	Honoraria				
	Paid authorship	0			
	Other any payn	ment type			
6	What is your/your or	oougo's/vour domos	tio partner's/vour depend	ent child's title at this entity?	
0.	what is youryour sp	oouse s/your domes	tic partiler s/ your depend	ent child's title at this entity?	
7	M/b ot is your/your or			ant abildle vale at this autitus	
1.	vviiai is your/your sp	ouse s/your domes	uc parmers/ your depend	ent child's role at this entity?	



8. What is the value of any remuneration (e.g., salary, consulting fees, honoraria or any other payments) made by this entity to you, your spouse, domestic partner or dependent child/children?

9. Please describe what services you were compensated for.



#### **Entity Relationship Detail**

1. Does this entity so or in any other way?	upport your sub-agreement related research through grants, contracts, gifts		
Yes	No		
If yes, please prothe project(s).	ovide specific details including the method of support and a description of		
	sub-agreement related research have the potential to benefit the entity?		
Yes	No		
benefits from the	elate to any of your sub-agreement related research involving Human		
Subjects?	elate to any or your sub-agreement related research involving numan		
Yes	No		
If yes, please probenefits from the	ovide specific details including a description of the project(s) and how it e entity.		
4. Do you conduct s compound of this er	ub-agreement related research involving a device, program, method or nitity?		
Yes	No		
• •	If yes, please provide specific details including a description of the project(s) and how it benefits from the entity.		



	sub-agreement related research involving a device, program, method or entity's competitors?				
Yes	No				
•	es, please provide specific details including a description of the project(s) and how it nefits from the entity.				
6. Do you make d entity?	ecisions/requests to purchase goods and services that may be related to this				
Yes	No				
	If yes, please describe in detail including the type of goods/services purchased, who uses these good/services, and how these goods/services are used.				
masters or doctor	institutions only, do you have any students you advise or you serve on their al committees who are employed by or conduct any work for this entity?				
Yes	No				
If yes, please	orovideÁs@ Ánic`å^}o©Á,æ{ ^Áæ),åÁæ}][ājq{ ^}oÁs]^ÁÇ}å^¦*¦æå`ææ^ÉĦæå`ææ^ÉAvo&ÈÈA				
	institutions only, do you have any students you advise or you serve on their al committees who are conducting research that has the potential to benefit				
Yes	No				
If yes, please	provid^Ánc@Ánc°å^}co€Ápæ(^Áæ)åÁæ)][ājq(^}oÁs]]^ÁÇ}å^¦*¦æå°ææ^ÉÄt¦æå°ææ^ÉAnc&ÈÈÈ				
•	conduct activities that relate to your research, administrative, clinical, and institutional Responsibilities at the sub-recipient organization?				
Yes	No				