

**Effective June 7, 2018**  
**Revised January 14, 2025**

## **Investigator Financial Conflict of Interest Policy**

**Background:** The Allen Institute (Institute) is committed to promoting objectivity in Research and in compliance with the United States Department of Health and Human Services (HHS), which includes the Public Health Services (PHS) and the National Institutes of Health (NIH), and National Science Foundation (NSF) regulations regarding the disclosure of Significant Financial Interests (SFIs) and the management of Financial Conflicts of Interests (FCOIs). This Investigator Financial Conflict of Interest Policy outlines how to disclose and manage these conflicts. All capitalized terms are defined in the [Definitions](#) section.

**Scope:** This policy applies to all Investigators at the Allen Institute, as well as applicable grant subrecipients (referred to as “you”). For non-Investigators, see the section Outside Financial Interest in the Allen Institute Conflict of Interest Policy for disclosure requirements.

**Responsible Department:** The Legal department is responsible for ensuring that this policy is current and compliant with the appropriate laws and regulations.

**Policy Statement:** All Investigators must disclose all SFIs (personal and those of [Family Members](#)) that are related to an Investigator's [Institute Responsibilities](#). Compliance with this policy is a condition for submitting proposals and accepting awards for federal financial support and for being an Investigator for any Research activities at the Institute.

**Investigator Obligations.** As an Investigator, you have an obligation to be familiar with and abide by the provisions of this policy, which include:

- Timely completion of required FCOI training;
- Timely disclosure of SFIs (your own and those of your Family Members); and
- Cooperating with the Institutional Official (“IO”) when you perform your duties under this policy. Each of these requirements is described in further detail in the [Definitions](#) section.

**IO Responsibilities.** The IO is responsible for reviewing SFIs, creating Management Plans, other reports, resolving disputes, and managing policy violations. The IO may delegate responsibilities to a legal department member, or others as appropriate.

**Investigator Training Requirements.** You must complete the FCOI training offered by the Institute prior to engaging in Research and retake it at least every 4 years. In addition, you must complete training within 30 days when this policy changes in a manner that affects your requirements as an Investigator or if you are not in compliance with this policy or a Management Plan. The Office of Sponsored Research will provide you with information regarding how to complete the required training and notify you when you are due to take training.

Required Disclosures by Investigators. Each Investigator is required to have an up-to-date disclosure on file prior to engaging in Research at the Institute.

*First Disclosure.* Each Investigator must identify and disclose SFIs upon being hired or upon becoming an Investigator. When a proposal is being prepared for funded Research with the HHS (which includes PHS and NIH) or NSF, the individual serving as Principal Investigator must alert any other individuals who may meet the definition of Investigator of the need to comply with these procedures. New Investigators will then be prompted to complete training and to file this initial disclosure before the funded Research application is submitted.

*Annual Disclosure.* Each Investigator must re-verify and update the previously filed disclosure annually. This disclosure needs to include SFIs that were not disclosed previously and any updated information regarding previously disclosed SFIs. The Institute will prompt you to file this disclosure on an annual basis.

*Updated Disclosure.* To ensure that disclosures are up to date, you are required to proactively identify and disclose SFIs as they arise. If you discover or acquire a new SFI during the course of the year (e.g., through purchase, sale, marriage, inheritance, or travel), or there has been a change to an SFI you have already submitted (e.g. in the value of the SFI, your Institutional Responsibilities, or the Research that may impact or relate to the SFI), you must update your disclosure within 30 days.

To file a new or updated disclosure, access the Compliance Disclosure Platform.

Disclosure Review and Management of FCOIs. The IO is responsible for reviewing disclosures and may delegate such responsibilities to a legal department member or others as appropriate. The purpose of the review is to determine whether a disclosed SFI is related to Research and, if so related, whether the SFI is an FCOI. If an FCOI does exist, then the IO, or their delegate, will work with the Investigator(s) to develop a Management Plan. An SFI is related to Research when the IO determines that the SFI could be affected by the Research or is related to an Entity whose financial interest could be affected by the Research. As the Investigator, you may be involved in this determination. An FCOI exists when the IO reasonably determines that the SFI could directly and significantly affect the design, conduct, or reporting of the Research.

*FCOI in New Research.* If the IO determines that there is an FCOI in new Research, the IO will implement a Management Plan. If federal funds are involved in the Research, this review and implementation of a Management Plan, if necessary, must be done before expenditure of such funds.

*FCOI in Ongoing Research.* If the IO determines that there is an FCOI in ongoing Research after reviewing a disclosure from an Investigator new to a Research project or currently working on a Research project, the IO will implement, on at least an interim basis, a Management Plan that will specify the actions that the Institute has taken or will take to manage the FCOI. Depending on the nature of the SFI, the IO may require additional interim measures with regard to your participation

in the Research project between the date of disclosure and the completion of the IO's review. The review and implementation of a Management Plan, if necessary, must be done within 60 business days of the disclosure or discovery.

*FCOI in NSF Funded Research.* If the IO determines that implementing the conditions and restrictions of a Management Plan for a FCOI under an NSF funded Research project would be either ineffective or inequitable, and that the potential negative impacts that may arise from the FCOI are outweighed by interests of scientific progress, technology transfer, or the public health and welfare, then the IO may allow the research to go forward without the imposition of a Management Plan.

Federally Funded Research Specifics. While this policy applies across all Research activities, there are specific requirements for research funded by the NSF and HHS.

When the Research is funded by the NSF and the IO determines an FCOI exists, the Institute must inform the NSF's Office of the General Counsel (OGC), only if, the Institute finds that it is unable to satisfactorily manage a FCOI and if the Institute allows the research to proceed without imposing conditions or restrictions.

When the Research is funded by the HHS and the IO determines that an FCOI exists, an FCOI Report will be submitted to the Awarding Agency prior to the expenditure of federal funds. The IO will implement a Management Plan and submit FCOI Reports annually, or as otherwise required by the Awarding Agency. If an FCOI is identified and eliminated prior to the expenditure of funds, an FCOI Report is not submitted to the Awarding Agency. NSF.

*Reports to the NSF's OGC.* When the NSF's OGC is notified of an unmanageable FCOI, the NSF's OGC will conduct the following review: (1) examine a copy of the Institute's FCOI policy to ascertain if the policy includes procedures for addressing unmanageable conflicts; (2) contact the Institute to determine what actions the Institute plans/has taken with respect to the reported unmanageable FCOI, ensuring consistency with their FCOI policy; and (3) request confirmation from the Institute when proposed actions have been accomplished.

*Reports to the HHS Awarding Agency.* All FCOI Reports need to include sufficient information to enable the Awarding Agency to understand the nature and extent of the FCOI and to assess the appropriateness of the Management Plan. FCOI Reports are submitted by the Institute in the manner specified by the Awarding Agency: (1) prior to expenditure of any funds under a PHS-funded Research project; and (2) within 60 days after any determination that you have an FCOI, whether you are an Investigator who is newly participating in a project or an existing Investigator who disclosed a new SFI during the period of award. Whenever you do not timely disclose a previously existing SFI or, for whatever reason, the IO failed to timely review a previously existing SFI during an ongoing HHS-funded project, the IO must conduct a FCOI review using the procedures detailed below in the Retrospective Review section.

*Updating Reported FCOIs.* The Institute will submit an annual FCOI Report to the Awarding Agency for any previously reported FCOIs for an ongoing Research project. The annual FCOI Report is a

follow-up report to the initial FCOI Report and must specify on-going management of the FCOIs or explain why it no longer exists. This report is due to the Awarding Agency annually throughout the project period (including extensions with or without funds), even if you eliminate the FCOI during that time. It is submitted at the same time as the annual progress report, multi-year progress report (if applicable), or at the time of the extension.

*Mitigation Reports.* If the IO finds bias during a Retrospective Review (as discussed below), the Institute will promptly notify the Awarding Agency and submit a Mitigation Report.

*Awarding Agency-Requested Reports.* At any time before, during, or after award, the Awarding Agency and/or HHS may inquire into any Investigator disclosure of SFIs and the Institute's review of, and response to, the disclosure, whether or not it was determined that an FCOI existed. The Institute will submit, or permit an onsite review, of all pertinent records relating to the SFI review. The Awarding Agency may determine that an enforcement action is necessary until the matter is resolved.

*Subrecipient FCOI Reports.* FCOI Reports regarding all FCOIs of subrecipient Investigators will be submitted in the same format as the Institute's, prior to the expenditure of funds, and within 60 days of any subsequently identified FCOI.

#### Failure to Disclose/Review; Retrospective Review; Mitigation Report.

*Retrospective Review.* Whenever the IO identifies any Noncompliance, the IO or its designee will complete a Retrospective Review within 120 days of determination of the Noncompliance and implement a Management Plan if an FCOI is found to exist (an interim plan can be used during the review). Following completion of a Retrospective Review, the Institute will only submit a revised FCOI Report to the Awarding Agency if: (1) there is new FCOI information that results in a change to a previously submitted FCOI Report (e.g., an increase in value of a previously reported SFI, discovery of a new SFI, or changes to the management of the FCOI, etc.); or (2) the IO finds that the Research was biased by the FCOI and the Institute needs to submit a Mitigation Report. If the funder is an HHS Awarding Agency, the Institute will update any previously submitted FCOI Report, if needed, specifying the actions that will be taken to manage the FCOI going forward based on the results of the Retrospective Review.

*Mitigation Report.* If the IO finds bias during a Retrospective Review, the Institute will notify the Awarding Agency promptly and submit a Mitigation Report, as described in the Definitions section. After the Retrospective Review, the Institute will update the FCOI Report, as applicable.

Subrecipient Requirements. A subrecipient is an individual or Entity that is conducting Research through an agreement with the Institute and is paid for that Research with funds received by an Awarding Agency. The Institute must take reasonable steps to ensure that all subrecipients that receive Awarding Agency funds from or through the Institute comply with FCOI regulations. The Institute will include any FCOI of a subrecipient in the FCOI Reports submitted prior to the expenditure of funds, and within 60 days for any subsequently identified FCOI.

*Subrecipient following its own FCOI Policy.* The Institute requires subrecipients who rely on their own FCOI policy to certify, as part of the subcontract with the Institute, that their policy complies with the regulations. Subrecipients relying on their own FCOI policy must report all FCOIs to the Allen Institute within 45 days of discovery, or such other time period as specified in the subcontract. The Allen Institute, as prime recipient, must make an initial FCOI Report to the HHS Sponsor within 60 days of discovery. The Institute will request that the subrecipient provide the Institute with a copy of the Management Plan. The subcontract will include provisions requiring subrecipients to comply with applicable regulations related to disclosure of SFIs and management of FCOIs consistent with federal requirements for covered awards, time periods to meet SFI disclosure to the Institute, and/or FCOI reporting requirements, as applicable, and will set forth requirements to make any FCOI information publicly available pursuant to the Public Accessibility provision below.

*Subrecipient using the Allen Institute's FCOI Policy.* The Institute's subcontracts require that if the subrecipient does not have its own FCOI policy (or it does not comply with the regulations), the Investigators are subject to this FCOI policy for disclosing SFIs that are directly related to their work on the Institute's Research project. The Institute will send the subrecipient Investigator a copy of the Institute's policy, training information, the Disclosure Forms, and the disclosure summary. The subrecipient Investigator will follow the same disclosure schedule as the Institute for the period of the subcontract.

*Allen Institute as Subrecipient.* The Institute will certify that it follows the Institute's written and enforced FCOI Policy when the Institute is the subcontractor to another organization for an Awarding Agency's Research project. The Institute will disclose any FCOIs to the prime awardee in accordance with the terms of the subcontract and in sufficient time for the prime awardee to report the FCOI to the Awarding Agency.

#### Violations of Policy

*HHS Remedies.* If you fail to comply with this policy in a way that appears to bias the design, conduct, or reporting of Awarding Agency-funded Research, the Institute must promptly notify the Awarding Agency of the Institute's completed or planned corrective action. The Awarding Agency will consider the situation and, as necessary, take appropriate action or refer the matter to the Institute for further action, which may include directions on how to maintain appropriate objectivity in the Research project. The Awarding Agency may impose special award conditions, suspend funding, or take other enforcement actions until the matter is resolved. If HHS determines that a HHS-funded clinical Research project whose purpose is to evaluate the safety or effectiveness of a drug, medical device, or treatment has been designed, conducted, or reported by an Investigator with an FCOI that was not managed or reported, the Investigator involved must disclose the FCOI in each public presentation of the results of the Research and request an addendum to previously published presentations.

*Internal and NSF Remedies.* In addition to any reports to or remedies required by the HHS Awarding Agency, the IO will determine other appropriate actions, which may include disciplinary action up to and including termination of employment, suspension of Research activities, and/or other remedies as appropriate for the violation.

## Public Accessibility.

*Policy on Website.* This policy is available via the Institute's publicly accessible website.

*Public Availability of Certain FCOI Information.* Prior to the expenditure of funds for Awarding Agency-funded Research, the Institute must ensure that information concerning any SFI disclosed to the Allen Institute that meets the following criteria is publicly accessible, via a publicly accessible website or written response within five business days of a request:

- The SFI was disclosed and is still held by the Senior/Key Personnel;
- The IO has determined that the SFI is related to HHS-funded Research; and
- The IO has determined that the SFI is an FCOI.

This information will remain publicly available for three (3) years from the date that the Institute last updated the information.

*SFI Information to Disclose.* For each SFI that must be made publicly accessible, the following information will be included, either on the website or in response to a written request:

- Senior/Key Personnel's name, title, and role with respect to the HHS-funded Research project;
- Name of Entity in which the SFI is held;
- Nature of the SFI;
- The approximate dollar value range of the SFI (\$0-\$4,999; \$5,000-\$9,999; \$10,000-\$19,999; amounts between \$20,000-\$100,000 by increments of \$20,000; amounts above \$100,000 by increments of \$50,000) or a statement that the SFI is one whose value cannot be readily determined through reference to public prices or other reasonable measures of fair market value.

*Updates to Publicly Accessible Information.* Whether the Institute provides this information through a website or through a written response, the Institute will update the information at least annually and within 60 days of the IO's receipt of identification of info concerning any additional Senior/Key Personnel SFIs that were not previously disclosed or are for Senior/Key Personnel new to the Research project, or in accordance with the requirements of the HHS Awarding Agency, whichever is more restrictive. When providing this information to the public, the Institute will note that it is current as of the date listed (or the date of the correspondence in the case of a written response) and is subject to updates on at least an annual basis and within 60 days of the Institute's identification of a new FCOI, which should be requested subsequently by the requestor.

## **Definitions:**

**Awarding Agency** is the organization that funds a Research project with either federal or private funds, including HHS, PHS, NIH, or NSF.

**Disclosure Forms** refers to the FCOI Questionnaire for disclosure of SFIs.

**Entity** is any domestic or foreign, public or private, organization (excluding a federal agency) from which an Investigator (or their spouse or dependent children) receives remuneration or has an ownership or **Equity** interest.

**Equity** means any interest in the ownership or profits of a business enterprise, including stock, stock options, or other Equity security.

**Family Member** is the spouse and dependent children of an Investigator.

**Financial Conflict of Interest (FCOI)** is a Significant Financial Interest that could directly and significantly affect the design, conduct, or reporting of Research.

**FCOI Report (HHS)** is the Allen Institute's report of an FCOI to the HHS. It must include the following:

- Project number;
- PD/PI or Contact PD/PI if a multiple PD/PI model is used;
- Name of the Investigator with the FCOI;
- Name of the Entity with which the Investigator has an FCOI;
- Nature of the SFI (e.g., Equity, consulting fee, travel reimbursement, honorarium);
- The value of each SFI (dollar ranges are permissible: \$0-\$4,999; \$5,000-\$9,999; \$10,000-\$19,999; amounts between \$20,000-\$100,000 by increments of \$20,000; amounts above \$100,000 by increments of \$50,000) or a statement that the SFI is one whose value cannot be readily determined through reference to public prices or other reasonable measures of fair market value;
- A description of how the SFI relates to the Agency funded Research and why the Allen Institute determined that the SFI conflicts with such Research; and
- A description of the key elements of the Management Plan. NSF only: FCOI Reports can be used as records.

**HHS** is the United States Department of Health and Human Services.

**Institutional Official (IO)** the Institute has designated the General Counsel as the Institutional Official to be responsible for reviewing and evaluating SFI disclosures to determine if an FCOI exists, preparing Management Plans for identified FCOIs, and conducting additional activities pursuant to this policy. The General Counsel may delegate these duties as needed.

**Institutional Responsibilities** are the Investigator's professional responsibilities on behalf of the Institute, including but not limited to Research, Research consultation, teaching, professional practice, clinical activities, purchasing, institutional committee membership, and service on advisory or review panels or boards.

**Investigator** is anyone who is responsible for the design, conduct, or reporting of Research, regardless of funding source (internal or external), and regardless of title or position. It especially

applies to project directors and principal investigators and may include subrecipients, collaborators, or consultants. This may be different than the Allen Institute job title of “investigator.”

**Management Plan** is the Institute’s documented plan that specifies the actions taken or to be taken to manage, reduce, or eliminate an FCOI. Management Plans will be agreed to be the Investigator, their supervisor and the executive scientific leader and must include the following:

- The role and principal duties of the conflicted Investigator in the Research project;
- Conditions or restrictions of the Management Plan;
- How the Management Plan is designed to safeguard objectivity in the Research project;
- Confirmation of the Investigator’s agreement to the Management Plan; and
- How the Management Plan will be monitored to ensure Investigator compliance
- The Management Plan may also include conditions or restrictions, such as:
  - Public disclosure of SFIs or FCOIs (e.g., when presenting or publishing the Research results);
  - For Research involving human subjects, disclosure of the FCOI directly to participants;
  - Appointment of an independent monitor capable of taking measures to protect the design, conduct, and reporting of the Research against bias resulting from the FCOI;
  - Modification of the Research plan;
  - Change of Investigator or Investigator responsibilities, or disqualification of Investigator from participation in all or a portion of the Research;
  - Reduction or elimination of the FCOI (e.g., sale of an Equity interest);
  - Severance of relationships that create the FCOI; and
  - Any additional information needed to ensure that the Awarding Agency understands the nature and extent of the FCOI.

The Investigator's manager, executive scientific leader, the IO or their designees will monitor Investigator compliance with the Management Plan on an ongoing basis until completion of the Research project. If you have an FCOI, you must remain in compliance with a Management Plan at all times during the Research project period. To implement a Management Plan, the IO or their designee will meet with you to review and discuss all requirements. You, your manager, and the executive scientific leader will be required to sign the Management Plan.

**Mitigation Report** is a report prepared by the IO or their designee for submission to the Awarding Agency after the IO has found bias during a Retrospective Review. It must include:

- The key elements documented in the Retrospective Review; A description of the impact of the bias on the Research project (i.e., extent of harm done, including any qualitative and quantitative data to support any actual or future harm; analysis of whether the Research project is salvageable); and
- The Institute’s plan of action or actions taken to eliminate or mitigate the effect of the bias.

**NIH** is the National Institutes of Health.

**Noncompliance** is whenever an FCOI has not been identified or managed in a timely manner. Examples of this include when an Investigator fails to disclose an SFI that constitutes an FCOI, the IO fails to review or manage an FCOI, or an Investigator fails to follow the Management Plan.

**PHS** is the Public Health Services.

**Research** means a systematic investigation, study or experiment designed to develop or contribute to generalizable knowledge relating broadly to public health, including behavioral and social-sciences Research. The term encompasses basic and applied Research (e.g., a published article, book or book chapter) and product development (e.g., a diagnostic test or drug), including any such activity for which Research funding is available from the NSF or a HHS funding agency through a grant or cooperative agreement, whether authorized under the PHS Act or other statutory authority, such as a Research grant, career development award, center grant, individual fellowship award, infrastructure award, institutional training grant, program project, or Research resources award. Per NSF requirements, this also pertains to educational activities.

**Retrospective Review** is the documented process where the IO determines whether there was any bias in the design, conduct or reporting of Research during a time of Noncompliance (whenever an FCOI is not identified or managed in a timely manner). It must be conducted within 120 days of the determination of Noncompliance. The Retrospective Review must include the following:

- Project number;
- Project title;
- PD/PI or contact PD/PI if a multiple PD/PI model is used;
- Name of the Investigator with the FCOI;
- Name of the Entity with which the Investigator has an FCOI;
- Reason(s) for the Retrospective Review;
- Detailed methodology used for the Retrospective Review (e.g., methodology of the review process, composition of the review panel, documents reviewed, etc.);
- Findings of the Retrospective Review; and • Conclusions of the Retrospective Review.

**Senior/Key Personnel** means the project director, principal investigator, and any other person identified as Senior/Key Personnel by the Institute in the grant application, progress report or any other report submitted to HHS.

**Significant Financial Interest (SFI)** is:

- A financial interest consisting of one or more of the following interests of an Investigator or Investigator's Family Member, when considered in aggregate, that reasonably appears to be related to the Investigator's Institutional Responsibilities:
  - With regard to any publicly traded Entity, an SF exists if the value of any remuneration received from the Entity in the twelve months preceding the disclosure and the value of any compensation and/or Equity interest in the Entity as of the date of disclosure, when aggregated, exceeds \$5,000 (Note: NSF requirement is if it exceeds \$10,000 or a 5% equity

interest, see below). For purposes of this definition, remuneration includes salary and any payment for services not otherwise identified as salary (e.g., consulting fees, honoraria, paid authorship); Equity interest includes any stock, stock option, or other ownership interest, as determined through reference to public prices or other reasonable measures of fair market value;

- With regard to any non-publicly traded Entity, an SFI exists if the value of any remuneration received from the Entity in the twelve months preceding the disclosure, when aggregated, exceeds \$5,000 (Note: NSF requirement is if it exceeds \$10,000, see below), or when the Investigator or Family Member holds any Equity interest (e.g., stock, stock option, or other ownership interest); or
- Intellectual property rights and interests (e.g., patents, copyrights, royalties), upon receipt of income related to such rights and interests.
- Each occurrence of reimbursed or sponsored travel related to an Investigator's Institutional Responsibilities must be disclosed. (Sponsored travel is travel that is paid on behalf of the Investigator and not reimbursed to the Investigator.) Reimbursed or sponsored travel does not include travel expenses reimbursed by or sponsored by a U.S. federal, state, or local government agency, an accredited, domestic institution of higher education, an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education.
- For Investigators applying for or receiving NSF Funding only: SFI includes salary, royalties or other payments related to the Investigator's Institutional Responsibilities that, when aggregated for the Investigator and the Investigator's Family Member, are expected to exceed \$10,000 during the next twelve-month period (prospectively).

*Significant Financial Interest* does not include the following types of financial interests:

- Salary, royalties or other remuneration from the Allen Institute to the Investigator if the Investigator is currently employed or otherwise appointed by the Allen Institute, including intellectual property rights assigned to the Allen Institute and agreements to share in royalties related to such rights.
- Income from investment vehicles, such as mutual funds and retirement accounts, as long as the Investigator (or Family Member, as applicable) does not directly control the investment decisions made in these vehicles.
- Income from seminars, lectures, or teaching engagements sponsored by a U.S. federal, state, or local government agency, an accredited, domestic institution of higher education, an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education.
- Income from services on advisory committees or review panels for a U.S. federal, state, or local government agency, an accredited, domestic institution of higher education, an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education.
- For NSF Funding Only: Equity interest that does not exceed \$10,000 and does not represent more than a 5% ownership interest in any single Entity when the values of the Investigator and Investigator's Family Member are considered in aggregate.

- For NSF Funding Only: Salary, royalties, or other remuneration that are not expected to exceed \$10,000 during the twelve-month period when the Investigator or Investigator’s Family Member are considered in aggregate.

**References:**

- [42 CFR 50 Subpart F](#) (grants and cooperative agreements) and [45 CFR Part 94](#) (contracts)
- [HHS Administrative and National Policy Requirements](#) (January 2025)
- [NIH FAQs on FCOI Regulation](#)
- [NSF Conflict of Interest Policy](#) (NSF 24-1)

**Records Retention:** All records relating to SFI disclosures and the Allen Institute review of or response to such disclosures (whether or not an SFI is determined to be an FCOI) and all action taken under this policy will be maintained for at least three (3) years from the date of the final expenditures report, the termination or completion of the related grant, the resolution of any action involving those records, or as otherwise required by law, whichever is longer. The legal department will maintain these records and those associated with FCOI training completion.

**Frequently Asked Questions (FAQs)**

1. Does the existence of an FCOI mean that I’ve done something wrong?
2. Who submits the reports to the Awarding Agencies?
3. Who is the Institute’s IO?

**Does the existence of an FCOI mean that I’ve done something wrong?**

SFIs often exist and can create FCOIs in the absence of any wrongdoing. The important thing is to disclose them so they can be reviewed and managed. Please refer to this [NIH slide deck](#) for examples of various FCOIs.

**Who submits the reports to the Awarding Agencies?**

The Office of Sponsored Research (OSR) team is responsible for submitting reports to the Awarding Agencies.

**Who is the Institute’s IO?**

The Allen Institute IO is the General Counsel (GC) or their delegate.

Revision Date	Description of Changes	Reviser	Approver
06.07.2018	Policy creation.		
07.31.2018	Updated instructions on how to access Convercent.		
04.19.2019	Updated IO to COO.		
07.07.2022	Updated instructions on how to access Ethics Helpline. Updated IO to GC.		

01.14.2025	Updated PHS references to HHS which includes PHS and NIH. Updated HHS and NSF regulatory requirements.	Damon Pang, AGC	Meg McClellan, General Counsel