Yale University Open Data Access (YODA) Project
Conflict of Interest Disclosure Form for Data Requestors

1. Identifying Information

Date: 18.4.16

Name (include degree(s)): Dr. Johannes Schneider-Thoma
Primary Employer: Department of Psychiatry and Psychotherapy, Klinikum rechts der Isar, Technical University of Munich

Title of Project: Incidence of death and other SAEs related to second generation antipsychotic or placebo treatment in RCTs - a systematic review and meta-analysis

Are you the Principal Investigator (PI)? □ Yes ☒ No
If not, who is the PI? Prof. Dr. Dr. h.c. Stefan Leucht

2. Financial Support for the Proposed Research

Place a check in the appropriate box(es) to indicate third party sources from which you or your institution will receive payment or services at any time for any aspect of the proposed research (including but not limited to study design, manuscript preparation, statistical analysis, etc.).

☒ Government entity Detail: Grant from german ministry of education and research
☐ Commercial entity Detail:
☐ Private foundation Detail:
☐ Academic institution Detail:
☐ Other Detail:

3. Intellectual Property

Do you have any patents, whether planned, pending or issued, broadly relevant to the proposed research? □ Yes (explain): ☒ No
Use one line for each entity. If additional lines are needed, attach a separate sheet.

<table>
<thead>
<tr>
<th>Name of Entity</th>
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<tbody>
<tr>
<td>Grant</td>
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<td>Fee</td>
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<tr>
<td>Support</td>
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<td>Financial</td>
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<td>Other</td>
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For the terms used can be found in Section 7.

If there is a question, it is better to disclose a relationship than not to do so.

Disclose. This should include all monies from sources with relevance to the proposed work. If paid (directly to you or your institution) or through your personal financial interests, check the appropriate box. If you receive funding from a company or other source relevant to the proposed project and the funding is in excess of $5,000, please disclosure.

The table asks about your financial relationships with entities in the biomedical arena that could be perceived to influence, or that give the appearance of influencing, your proposed research.

**Provide details in the table below.**

4. Relevant Financial Activities Outside the Proposed Research

Yale University Open Data Access (YODA) Project
5. Relationships Not Covered Above

Are there other relationships or activities that others could perceive to have influenced, or that give the appearance of potentially influencing, the research for which you are submitting this form?

☐ Yes, the following relationships/conditions/circumstances are present (explain):
☒ No other relationships/conditions/circumstances exist that present a potential conflict of interest

On occasion, the YODA Project may ask for additional information about reported relationships.

6. Signature Attesting to the Above

By signing below, you attest that the information provided above is correct.

Signature: [Signature] Date: 19.4.16

Print Name: Johannes Schneider-Thoma

Please keep a copy of this document for your records.

7. Definitions

Entity: Government agency, foundation, commercial sponsor, academic institution, etc.

Grant: Monies from an entity, generally, but not always, paid to your organization.

Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speaker bureaus, expert testimony, employment or other affiliations.

Non-financial support: Examples include reagents or equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the categories of Grant, Personal Fees and Non-financial Support.