1. Identifying Informati	on
Date: <b>5/12/2020</b>	
Name (include degree(s)) Primary Employer: <b>U</b> Email Address: <b>swang1</b>	niversity of San Francisco
Title of Project: Mis	sing Data Models for Ulcerative Colitis
Are you the Principal Inve If not, who is the PI?	estigator (PI)? □Yes <b>X</b> No
Vivek Rudrapatna, MD,	PhD
2. Financial Support fo	r the Proposed Research
institution will receive pay (including but not limited t	opriate box(es) to indicate third party sources from which you or your ment or services at any time for any aspect of the proposed research to study design, manuscript preparation, statistical analysis, etc.). need to include your primary employer.
□Government entity	Detail:
□Commercial entity	Detail:
□Private foundation	Detail:
□Academic institution	Detail:
□Other	Detail:
3. Intellectual Property	
	whether planned, pending or issued, broadly relevant to the proposed (es (explain):  lo

### 4. Relevant Financial Activities Outside the Proposed Research

Check only the statement that applies:

**X** I (and/or my spouse or domestic partner) have no financial relationships to disclose.

☐ I (and/or my spouse or domestic	partner) have a	financial rel	lationship or	affiliation	with the
following commercial interest(s). Pro	ovide details on	the following	g page.		

If you (and/or your spouse or domestic partner) have a financial relationship or affiliation with commercial interest(s), please provide details in the table below.

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.

Place a check in the appropriate boxes to indicate any financial or other relationships (regardless of amount of compensation). Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf during the 36 months prior to this disclosure. This should include all monies from sources with relevance to the proposed work. If there is a question, it is better to disclose a relationship than not to do so.

Use one line for each entity. If additional lines are needed, attach a separate sheet. **Definitions** of the terms used can be found in Section 7.

		Developel	Non-Fina		
Name of Entity	Grant?	Personal Fees?	ncial Support?	Other?	Comments, Detail
Traine or Entity					Comments, Detail
	Ш	Ш	Ш		

#### 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 ( <i>explain</i> ): <b>X</b> 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:
Print Name: Shan Wang

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.