



mb230323-d1

## Assessment of the interests declared by the members of the Management Board pursuant to Article 37(1) of the Regulation (EC) No 178/2002 of the European Parliament and of the Council

The present note provides an assessment on whether the interests declared by Board members represent a potential conflict in accordance with EFSA's internal rules and the Board Code of Conduct. Based on this assessment, the Board should reach a conclusion and where appropriate recommend a follow-up.

If an identified conflict that is substantially affecting the work of the Board or EFSA's reputation is not resolved by the proposed assessment and a member of the Board is not fulfilling his/her obligations in relation to independence in such a manner that this is substantially affecting the work of the Board, the Board, acting on a two-thirds majority, may ask for his or her replacement<sup>1</sup>.

### Herman DIRICKS – Management Board member representing Belgium

**DoI submission date:** 27 January 2023

**Assessment:** Complying with the legal requirement demanding to the members of the Management Board to submit an updated DoI on annual basis, Mr Diricks confirmed the interests declared with his previous DoI dated 21 February 2022, which the Management Board noted and cleared at the meeting held on 24 March 2022.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Mr Diricks to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

### Egidijus PUMPUTIS – Management Board member representing Lithuania

**DoI submission date:** 6 March 2023

**Assessment:** Mr Pumputis holds the position of Director of the Lithuanian National Food and Veterinary Risk Assessment at the State Food and Veterinary Service. His job entails the performance of risk assessment activities in areas pertaining to the remit of EFSA, which he carries out in the public interest. In view of the mandate of the Management Board, that primarily looks at the regularity and legality of EFSA's processes without entering into the merit of any scientific activity carried out by the other bodies of EFSA, the risk assessment activities carried out by Mr Pumputis do not represent conflicts of interest.

<sup>1</sup> Article 17 of the Rules of Procedure of the Management Board.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Mr Pumputis to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Craig SIMPSON – Management Board alternate member representing the EFTA Surveillance Authority**

**DoI submission date:** 31 January 2023

**Assessment:** Complying with the provision in Art. 5(8) of the Management Board Code of Conduct, Mr Simpson has declared his resignation from the EFSA Scientific Network for Risk Assessment in Animal Health and Welfare. He confirmed all other interests declared with his previous DoI dated 24 July 2022, which the Management Board noted and cleared at the meeting held on 6 October 2022.

**Conclusion:** No conflict of interest identified.

**Katarzyna STOŚ – Management Board member representing Poland**

**DoI submission date:** 27 February 2023

**Assessment:** Complying with the provision in Art. 5(4) and (8) of the Management Board Code of Conduct, Dr Stoś has declared her resignation from the EFSA Scientific Network on Food Consumption Data and the end of her engagement in the EFSA contract on National Dietary Surveys. She confirmed all other interests declared with her previous DoI dated 23 June 2022, which the Management Board noted and cleared at the meeting held on 6 October 2022.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared Dr Stoś to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

**Antonis ZAMPELAS – Management Board member representing Greece**

**DoI submission date:** 20 February 2023

**Assessment:** Prof. Zampelas declared a new employment activity (from Feb. to May 2023) with the United Arab Emirates University as visiting Professor. The academic activity carried out by Prof. Zampelas in favour of a public university does not represent a conflict of interest. He confirmed the interests declared with his previous DoI dated 31 August 2022, which the Management Board noted and cleared at the meeting held on 6 October 2022.

**Conclusion:** No conflict of interest identified. Ahead of the Management Board meetings, it is suggested that the Management Board re-examines the interests declared by Prof. Zampelas to assess whether any conflicts may arise when discussing specific items in agenda (e.g.: inclusion of organisations in the Art. 36 list or EFSA's outsourcing programmes).

# ANNUAL DECLARATION OF INTERESTS (ADoI)

<b>Title (Prof, Dr, Mr, Ms, Mrs)</b>	Mr
<b>Name</b>	Herman
<b>Family name</b>	DIRICKS
<b>Profession</b>	Civil servant
<b>EFSA involvement(s)</b>	Management Board member and Audit Committee chair

- Any modification made to the structure and content of the present template will make the document invalid.**
- Please fill in all fields, as appropriate.**
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.**

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<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	06/2002 - now	Federal Agency for the Safety of the Food Chain	Chief Executive Officer	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	05/2018 - now	Sciensano, Brussels, National Scientific Institute	Member of the Board of Directors	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> <i>From/To</i> (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

## IV. EMPLOYMENT

IV. Employment	Period 1 <i>From/To (Month/Year)</i>	Organisation 2	Subject matter 3	Impact on annual earnings 4
06/2002 - now	Federal Agency for the Safety of the Food Chain	Chief Executive Officer		<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period 1 <i>From/To (Month/Year)</i>	Organisation 2	Subject matter 3	Impact on annual earnings 4
		NO INTEREST		<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> <i>From/To</i> <i>(Month/Year)</i>	Organisation <sup>2</sup> <i>(Month/Year)</i>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
			NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> <i>From/To</i> (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> <i>From/To</i> (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.

3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADI.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> <i>From/To</i> (Month/Year)	Organisation <sup>2</sup> <i>(Month/Year)</i>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity  
following reasons \_\_\_\_\_ and for the \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Signature: (*either physical or electronic signature*) \_\_\_\_\_  
Date: \_\_\_\_\_  
If you need more sheets to declare your interests, do not hesitate to [REDACTED]  
to this form.

**Date: 2023.01.27**  
**11:40:32 +01'00'**

EFSA processes all Declarations of Interests (Dots) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu) <http://www.edps.europa.eu>. They are entitled to submit a complaint at any time to the European Data Protection Supervisor:

The legal basis for ADol processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

# ANNUAL DECLARATION OF INTERESTS (ADoI)

<b>Title (Prof, Dr, Mr, Ms, Mrs)</b>	Professor
<b>Name</b>	Antonis
<b>Family name</b>	Zampelas
<b>Profession</b>	President of the Management Board Hellenic Food Authority
<b>EFSA involvement(s)</b>	Member of the Management Board

- Any modification made to the structure and content of the present template will make the document invalid.**
- Please fill in all fields, as appropriate.**
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.**

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<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>

1. Please specify the relevant period of time each activity took place in month/year.
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3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
				<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
				<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
				<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
				<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	<b>01/20 to 12/24</b>	<b>Hellenic Food Authority</b>	<b>President of the Management Board</b>	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	<b>09/11 – 01/20</b>	<b>Agricultural University of Athens</b>	<b>Professor</b>	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
	<b>01/20 -</b>	<b>Agricultural University of Athens</b>	<b>Professor</b>	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	<b>08/21- 05/22</b>	<b>United Arab Emirates University</b>	<b>Visiting Faculty</b>	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input checked="" type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	<b>06/17 -</b>	<b>University College London</b>	<b>Honorary Professor</b>	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

	<b>02/23 – 05/23</b>	<b>United Arab Emirates University</b>	<b>Visiting Faculty</b>	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input checked="" type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
				<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
				<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
				<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADI.

## VI. RESEARCH FUNDING

<b>VI. Research funding</b>	<b>Period <sup>1</sup> From/To (Month/Year)</b>	<b>Organisation <sup>2</sup></b>	<b>Subject matter <sup>3</sup></b>	<b>Does the funding received from the private sector during the two years preceding the submission of the ADI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup>?</b>
				<input type="checkbox"/> YES <input type="checkbox"/> NO
				<input type="checkbox"/> YES <input type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	<b>01/17 -</b>	<b>Broken Hill Publ Comp</b>	<b>1. Writing University Textbooks 2. Scientific Translations of English Textbooks</b>	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input checked="" type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
				<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
				<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
				<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
				<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
				<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

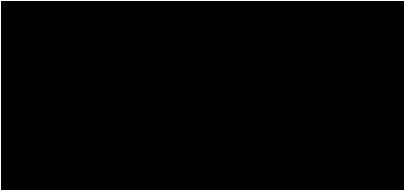
OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

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I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: \_\_\_20/02/2023\_\_\_\_\_

Signature: 

If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect

the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

# ANNUAL DECLARATION OF INTERESTS (ADoI)

<b>Title (Prof, Dr, Mr, Ms, Mrs)</b>	MR
<b>Name</b>	CRAIG
<b>Family name</b>	Simpson
<b>Profession</b>	Lawyer
<b>EFSA involvement(s)</b>	Management Board (alternate member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

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<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
	May 2013 – Current	Diageo plc, London, England	Ordinary share holding - complete control as this corresponds to ordinary shares I can sell or buy at will
	1995 – Current	Various pensions/savings and other similar investment funds, Global	No influence/control since each fund managed by a professional company with no possibility of myself or Close Family Member deciding the funds' strategy  Not all the relevant funds necessarily hold investments in entities with an interest falling within EFSA's remit

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>

			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity

carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	June 2017 – Current	EFTA Surveillance Authority, Brussels, Belgium	<p>Senior Legal Officer, Food and Veterinary Unit, Internal Market Affairs Directorate</p> <p>The EFTA Surveillance Authority monitors compliance of the EFTA States of the European Economic Area ('EEA EFTA States') with their obligations under the Agreement on the European Economic Area ('the EEA Agreement').</p> <p>My role involves:</p> <ul style="list-style-type: none"> <li>- monitoring EEA EFTA State implementation/incorporation of EEA legislation in the food, feed and veterinary areas in accordance with the EEA Agreement; and</li> <li>- pursuing infringement proceedings against EEA EFTA State laws or administrative practices in those areas which are contrary to EEA law and</li> </ul>	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

			<p>which may constitute illegal trade barriers.</p> <p>Although the EFTA Surveillance Authority may undertake risk management activities, I am not personally empowered to validate or take risk management actions/decisions and do not serve as a member of a regulatory committee advising on risk management matters.</p>	
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VI. RESEARCH FUNDING

<b>VI. Research funding</b>	<b>Period <sup>1</sup> From/To (Month/Year)</b>	<b>Organisation <sup>2</sup></b>	<b>Subject matter <sup>3</sup></b>	<b>Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup>?</b>
			NO INTEREST	<input type="checkbox"/> YES <input type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	2000 - Current	Various publishers of academic journals and conference organisers in the EU food and feed law area	Any current intellectual property rights granted to me in relation to my authorship of published articles or presentations concerning EU food and feed	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADI.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	September 2018 – 11 October 2022	European Food Safety Authority, Parma, Italy	Member of the EFSA Scientific Network for Risk Assessment in Animal Health and Welfare	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

			Contributing to drafting of EFSA Annual assessment of Echinococcus multilocularis surveillance reports submitted by certain territories in the context of Commission Delegated Regulation (EU) 2018/772	
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1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

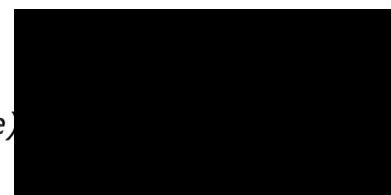
OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 31.1.2023

Signature: (either physical or electronic signature)



If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

### Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant Standard Operating Procedure.

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

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The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

# ANNUAL DECLARATION OF INTERESTS (ADoI)

<b>Title (Prof, Dr, Mr, Ms, Mrs)</b>	Dr
<b>Name</b>	Katarzyna
<b>Family name</b>	Stoś
<b>Profession</b>	Food technology and nutrition
<b>EFSA involvement(s)</b>	Management Board (member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

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<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
			NO INTEREST

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name and location of the organization on which the investment has been made.
3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	April 2011 – January 2020	Institute of Food and Nutrition, Warsaw - IFN	Deputy Director of Safety of Food and Food Supplements	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.

3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	January 2022 – present	Public Health Council at the Ministry of Health	Expert The Public Health Council has an opinion-making and advisory function for the Minister of Health	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	2017-2021	Working Group for Food Supplements established by Resolution No. 4/2017 of the Public Health Council, Ministry of Health	Member	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	2017 – present	Sanitary and Epidemiological Council at the Chief Sanitary Inspectorate	Member The advisory and opinion-making body for the Chief Sanitary Inspector in matters within the scope of activities of the State Sanitary Inspectorate (SSI)	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

	April 2015 – present	Working Group for Food Supplements within the Sanitary and Epidemiological Council at the Chief Sanitary Inspectorate	Member, Chair from October 2015 The Group has advisory and opinion-making function in the area of food supplements	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	2016 – March 2023	EFSA Scientific Network on Food Consumption Data NT/U/DATA/2017/02	Member	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the entity.
3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups. Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADoI.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	April 1993 – January 2020	Institute of Food and Nutrition, Warsaw - IFN	Head of the Unit of Safety of Foods for Special Dietary Uses (July 2002 – January 2020), Head of the Department of Food Safety (February 2008 – March 2011),	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

			<p>Head of the Department of food and food supplements (April 2011 – January 2020), Deputy Director for Food Safety and Food Supplements (April 2011 – January 2020).</p> <p>Subject matter: prevention of dietary related diseases, Dietary Reference Values, intake of vitamins, minerals, food additives, food consumption survey, opinions on foodstuffs including food supplements, food for special dietary uses, novel foods.</p>	
	<p>February 2020 – present</p>	<p>National Institute of Public Health NIH – National Research Institute – NIPH NIH-NRI</p>	<p>Head of Department of Nutrition and Nutritive Value of Food, Head of the laboratory.</p> <p>Subject matter: food consumption survey, intake of nutrients, food additives, Dietary Reference Values, nutritive value of food, opinions on foodstuffs including food supplements, food safety, risk assessment, public health.</p>	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	2008 – present	Advisory Team for Food Supplements at the Office for Registration of Medicinal Products, Medical Devices and Biocidal Products in Warsaw	Expert in the area of food supplements	<input type="checkbox"/> 0% <input checked="" type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADoI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?
	2016 – March 2023	European Food Safety Authority (Contracts between IFN and EFSA No OC/EFSA/DATA/2015/03 CT 2 (Lot 1) and OC/EFSA/DATA/2015/03 CT 3 (Lot 2))	Support to National Dietary Surveys in Compliance with the EU Menu methodology (fifth support) Lot 1 – "The children's survey", including subjects from three months up to 9 years old Lot 2 – "The adult's survey", including subjects from 10 to 74 years old	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	2018	The Ministry of Science and Higher Education in Poland (Decision No. 3876/E-220/S/2018-1 financial support for maintenance of research potential of IFN)	Support for studies on dietary habits, nutritional status and physical activity in Polish population	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	2018 – January 2020	Chief Sanitary Inspectorate (Contracts between IFN and the Chief Sanitary Inspectorate)	Monitoring of intake of the selected food additives from the diet in Polish population	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

	2020 – December 2021	Chief Sanitary Inspectorate (Contracts between NIPH NIH – NRI and the Chief Sanitary Inspectorate)	Monitoring of intake of the selected food additives from the diet in Polish population	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
	2016-2020	National Health Program – Ministry of Health (Contracts between IFN (until January 2020)/NIPH NIH-NRI (from February 2020) and Ministry of Health)	Updating of the Dietary Reference Values for the Polish population	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
	January 2019 – January 2021	Contract between IFN (January 2019-January 2020)/NIPH NIH – NRI (February 2020-January 2021) and GRANA Sp. z o.o., which implements the objective of Priority Axis 1 Knowledge Economy, Measure 1.2 research and innovation in enterprises. Sub-measure 1.2.1 Research and development projects of enterprises under the Regional Operational Program of the Małopolskie Voivodeship for 2014-2020	Development of a cereal coffee recipe for children aged 2-3 years	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
	2018	Chief Sanitary Inspectorate (Contract between IFN and the Chief Sanitary Inspectorate)	Scientific opinions on the maximum levels of selected vitamins and minerals used in food supplements	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## VIII. OTHER MEMBERSHIP OR AFFILIATION

VIII. Other membership or affiliation	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	April 2011 – present	Polish Society of Nutritional Science	Member Goals and objectives of the Society are dedicated to matters of nutritional science	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	In the 2015-2019 term and 2020-2024 term	Polish Society of Nutritional Science, Warsaw Branch	Member of the Management Board	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	September 2021 – present	Scientific Council of the 21 <sup>st</sup> term at the National Institute of Public Health NIH – National Research Institute	Member	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	2017 – January 2020	Scientific Council at the Institute of Food and Nutrition	Member	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	2021 – present	Task force on Maximum Amounts of vitamins and minerals in food supplements and fortified foods,	Member, expert	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

		European Commission		
	201-2020	Scientific Forum at the Polish Federation of Industry Union of Employers (PFFI UE)	Member of the Scientific Forum. The goal is exchange of information between science and food industry in the field of trends, solutions, technologies and research.	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	April 2020 – present	Annals of the National Institute of Hygiene	Member of the Editorial Board in the field of nutrition. The journal is dedicated to research related to the scientific issues of food and water safety, nutrition, environmental hygiene, toxicology and risk assessment, public health and other related fields. <a href="http://wydawnictwa.pzh.gov.pl/roczniki_pzh/">http://wydawnictwa.pzh.gov.pl/roczniki_pzh/</a>	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	October 2016 – December 2019	Polish Journal of Human Nutrition and Metabolism	Deputy Editor-in-chief. The journal was dedicated to research related to the scientific issues of human nutrition, dietary related diseases and dietetics	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%
	2019 – present	Polish Council for Control of Iodine Deficiency Disorders	Member The goal of the Council is to solve the problem of iodine deficiency in Poland	<input checked="" type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## IX. OTHER RELEVANT INTEREST

IX. Other relevant interest	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s).
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

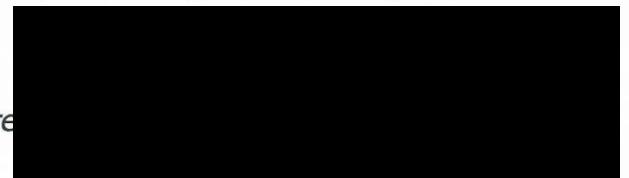
I think **I have a conflict of interest** with respect to the following EFSA

activity \_\_\_\_\_ and for  
the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 27/02/2023

Signature: (either physical or electronic signature)



If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for them, but please sign each one of them and attach them to this form.

#### Note regarding the processing of personal data:

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADoI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant [Standard Operating Procedure](#).

Certain ADoIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADoIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADoIs per category of data subjects is 10 years from the date of submission of the relevant ADoI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer [DataProtectionOfficer@efsa.europa.eu](mailto:DataProtectionOfficer@efsa.europa.eu). They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADoI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.

# ANNUAL DECLARATION OF INTERESTS (ADoI)

Title (Prof, Dr, Mr, Ms, Mrs)	Mr
Name	Egidijus
Family name	PUMPUTIS
Profession	Veterinarian
EFSA involvement(s)	Management Board (member)

- Any modification made to the structure and content of the present template will make the document invalid.
- Please fill in all fields, as appropriate.
- Please declare any interest overlapping with EFSA's complete set of responsibility that you or your close family members<sup>1</sup> currently have or have had in the past five years.

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<sup>1</sup> "Close Family Member" means: i. a spouse, meant as the person engaged in the marital relationship with the concerned individual; ii. a partner with whom a Concerned individual has contracted a registered partnership, on the basis of the legislation of the relevant legal system; iii. the direct descendants and ascendants who are financially dependent on the Concerned individual.

## I. FINANCIAL INVESTMENTS

I. Financial investments	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>
		NO INTEREST	

1. Please specify the relevant period of time each activity took place in month/year.  
 2. Please indicate name and location of the organization on which the investment has been made.  
 3. Please indicate any investment such as economic stake or share in an entity with an interest directly or indirectly falling within EFSA's remit, including its stocks, equities or bonds, or of one of its subsidiaries or of a company in which it has a holding. Please provide a description of the investment, including whether you have influence over it (e.g. "no control as it is a fund managed by a professional company with no possibility of deciding the fund's strategy"; or "complete control as this corresponds to ordinary shares I can sell or buy at will") and the field activity of the organisation on which the investment is made.

## II. MANAGERIAL ROLE

II. Managerial role	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
	05/2022 – to date	National Food and Veterinary Risk Assessment Institute – State Food and Veterinary Service	Director: Representation of the institution in relations with other persons, management of the institution, management of the quality and timeliness of the performance of the	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

			institution's functions and compliance with the requirements of the field of activity, management of the institution's resources, execution of other non-permanent assignments related to the institution's activities, performance of other functions specified in legal acts.
1. Please specify the relevant period of time each activity took place in month/year.	2. Please indicate name, legal nature and location of the organization.	3. Please indicate any participation, paid or unpaid, in the internal decision-making process (such as board membership, directorship, etc.) of an entity with an interest falling within EFSA's remit. Please describe your tasks and responsibilities, the remit of the organisation and how its activities relate to the remit of EFSA. Please indicate also whether the organisation carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions and if you serve as a member of a regulatory committee advising on risk management matters.	4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADol.

### III. MEMBER OF A SCIENTIFIC ADVISORY ENTITY

III. Member of a scientific advisory entity	Period <sup>1</sup> <i>From/To (Month/Year)</i>	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
		NO INTEREST		<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.

2. Please indicate name, legal nature and location of the entity.

3. Please indicate any participation in the works of a scientific advisory entity with an interest falling directly or indirectly within EFSA's remit and other than those organised by EFSA (such as membership of Scientific Panels, Working Groups, Peer review meetings, Networks, etc.). Please provide a description of the remit of the advisory entity, the subject matter (e.g. substances, products, guidance documents, policies, etc.), your precise role (e.g. Chair, member, etc.), the nature of the advice delivered (e.g. opinion, statement, advice, etc.), the recipient of the advice, and how the subject matter of the advisory entity relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the entity carries out risk management activities, whether you are personally empowered to validate or take management actions/decisions or not, or whether

4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication needs to be given also for past interests older than one year prior to the submission of the ADot.

you serve as member of a regulatory committee advising on risk management matters.

## IV. EMPLOYMENT

IV. Employment	Period <sup>1</sup> (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
05/2022 – to date	National Food and Veterinary Risk Assessment Institute – State Food and Veterinary Service	Director: Representation of the institution in relations with other institutions, organizations and natural persons,	management of the institution, timeliness of the performance of the institution's functions and compliance with the requirements of the field of activity, management of the institution's resources, execution of other non-permanent assignments related to the institution's activities, performance of other functions specified in legal acts.	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%
07/2021 – 05/2022	State Food and Veterinary Service	Head of the Boarder Food and Veterinary Control Department: Coordination of border food and veterinary control, implementation of border veterinary control of consignments of animals, animal products, non-animal food and feed imported or transported in transit to		<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

			the EU. Coordination of issues of export to the countries of the Eurasian Economic Union.	
08/2017 – 07/2021	Permanent Representation of Lithuania to the European Union	<p>Veterinary and Phytosanitary Attaché: Implementation of the veterinary, phytosanitary and food safety policy of the Republic of Lithuania in accordance with the regulatory areas under the competence of the Ministry of Agriculture of the Republic of Lithuania and the State Food and Veterinary Service. Representation of Lithuanian veterinary, phytosanitary and food in the EU Institutions of the safety sector. Contribution to the organization of visits to EU institutions by representatives of the Ministry and relevant institutions in its regulatory area and the State Food and Veterinary Service.</p>	<p>Veterinary and Phytosanitary Attaché: Implementation of the veterinary, phytosanitary and food safety policy of the Republic of Lithuania in accordance with the regulatory areas under the competence of the Ministry of Agriculture of the Republic of Lithuania and the State Food and Veterinary Service. Representation of Lithuanian veterinary, phytosanitary and food in the EU Institutions of the safety sector. Contribution to the organization of visits to EU institutions by representatives of the Ministry and relevant institutions in its regulatory area and the State Food and Veterinary Service.</p>	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input checked="" type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any form of regular occupation or business, part-time or full-time, paid or unpaid, including self-employment, and any consultancy activities performed in the context of employment and provided to individual business operators or other private parties and indicate their identities. Please describe the remit of the employing entity or organisation, your precise role, tasks, responsibilities and the nature or area of your work, what the activity is about (e.g. types of substances, products, guidance documents, processes or policies) and how it relates to the remit of EFSA and/or of the relevant EFSA scientific group(s). Please indicate whether the employing entity or organisation carries out risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or not, or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADol.

## V. OCCASIONAL CONSULTANCY

V. Occasional consultancy	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any consultancy activity occurring rarely so that it does not become a regular occupation, and in which the you provide advice or services, paid or unpaid, to companies, trade associations or other bodies with an interest falling directly or indirectly within EFSA's remit. Please provide a description of what the consultancy/advice is about, the topic of the delivered consultancy and the nature of the associated deliverable (e.g. study, report, assessment report, etc.). Please indicate whether the occasional consultancy implies risk management activities, whether you are personally empowered to validate or take risk management actions/decisions or whether you serve as member of a regulatory committee advising on risk management matters.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADI.

## VI. RESEARCH FUNDING

VI. Research funding	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Does the funding received from the private sector during the two years preceding the submission of the ADI exceeds 25% of the total research budget that is managed by you for the area under concern <sup>4</sup> ?

		NO INTEREST	<input type="checkbox"/> YES	<input type="checkbox"/> NO
1. Please specify the relevant period of time each activity took place in month/year.				

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization providing the research funding.
3. Please indicate any funding for research or development work received from any public or private entity either in a personal or professional capacity and falling within EFSA's entire set of responsibilities. It includes grants, rents, reimbursement of expenses, sponsorship and fellowship. Please indicate the topic of the research activity and the nature of the associated output (e.g. study, report, publication, etc.).
4. Please include also research funding received by your employing organisation.

## VII. INTELLECTUAL PROPERTY RIGHTS

VII. Intellectual property rights	Period <sup>1</sup> From/To (Month/Year)	Organisation <sup>2</sup>	Subject matter <sup>3</sup>	Impact on annual earnings <sup>4</sup>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> >0% but <5% <input type="checkbox"/> >5% but <25% <input type="checkbox"/> >25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate the all works resulting from human intellectual creativity (e.g. patents, trademarks, inventorship, etc.) for which you have been granted rights, irrespective of whether they grant a financial gain, and that fall, directly or indirectly, within EFSA's remit. Please indicate if the intellectual property is still valid or if it expired and provide a description of the topic covered by the granted right (e.g. GMO, pesticides, feed, etc.), your role (e.g. patent holder, contributor etc.) and how the intellectual property right relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.

## **VIII. OTHER MEMBERSHIP OR AFFILIATION**

<b>VIII. Other membership or affiliation</b>	<b>Period <sup>1</sup> From/To (Month/Year)</b>	<b>Organisation <sup>2</sup></b>	<b>Subject matter <sup>3</sup></b>	<b>Impact on annual earnings <sup>4</sup></b>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> > 0% but < 5% <input type="checkbox"/> > 5% but < 25% <input type="checkbox"/> > 25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any membership or affiliation with entities with an interest falling within EFSA's remit not falling under the categories defined above and relevant for the purposes of the EFSA decision on Competing Interest Management. This shall include roles and membership in professional associations, learned society, Non-Governmental-Organisations and comparable entities. Please provide a description of your precise role, tasks, responsibilities, the activities of the entity or person with whom the activity is engaged, of its remit, and when possible of its funding , and how the activity relates to the remit of EFSA and/or of the EFSA relevant scientific group.
4. Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADI.

## **IX. OTHER RELEVANT INTEREST**

<b>IX. Other relevant interest</b>	<b>Period <sup>1</sup> From/To (Month/Year)</b>	<b>Organisation <sup>2</sup></b>	<b>Subject matter <sup>3</sup></b>	<b>Impact on annual earnings <sup>4</sup></b>
			NO INTEREST	<input type="checkbox"/> 0% <input type="checkbox"/> > 0% but < 5% <input type="checkbox"/> > 5% but < 25% <input type="checkbox"/> > 25%

1. Please specify the relevant period of time each activity took place in month/year.
2. Please indicate name, legal nature and location of the organization.
3. Please indicate any interest not falling under the other eight categories above (such as prizes, gifts, awards and hospitality) and relevant for the purposes of the EFSA decision on Competing Interest Management. Please provide a description of the interest, such as the subject matter of the activity (e.g. GMO, pesticides, feed, etc.), your precise role, tasks, responsibilities, deliverables and, if any, the context in which the activity takes place, the field of activities of the organisation and how these relates to the remit of EFSA and of the EFSA relevant scientific group(s). Please indicate the impact of the activity on your annual earnings, by selecting one of the values provided. This indication has to be given also for past interests older than one year prior to the submission of the ADoI.
- 4.

I confirm that:

I think **I do not have a conflict of interest** with respect to my activity(ies) at EFSA

OR

I think **I have a conflict of interest** with respect to the following EFSA activity \_\_\_\_\_ and for the following reasons \_\_\_\_\_

I hereby declare that I have read the [EFSA Decision on Competing Interest Management](#) implementing EFSA's Policy on Independence and that the above declaration is truthful and complete.

Date: 06/03/2023  
Signature: (either physical or electronic)  
If you need more sheets to declare your interests, do not hesitate to use blank ones or to ask for this form.

**Note regarding the processing of personal data:**

EFSA processes all Declarations of Interests (DoIs) in accordance with Regulation (EU) 2018/1725. DoI processing is necessary in order to safeguard the independence of EFSA and enable the Authority to carry out its mission and comply with its obligations under Regulation (EC) No 178/2002.

The Executive Director of EFSA is the data controller with respect to the handling of DoIs.

Concerned individuals have the right to access, rectify, erase and object to the processing of their ADI at any time. Nevertheless, for certain categories of individuals (e.g., experts), it may be a mandatory requirement to submit a DoI to EFSA so as to verify the absence of conflicts of interests and thus protect the independence of EFSA. Concerned individuals will be contacted if EFSA becomes aware of information that is not consistent with the declared interest such as on the occasion of compliance monitoring activities outlined in the relevant Standard Operating Procedure.

Certain ADIs shall be made publicly available in accordance with Article 38(1)(d) of Regulation (EC) No 178/2002. Furthermore, ADIs may be transferred to bodies in charge of monitoring, auditing or inspection in conformity with EU Law.

The conservation period for ADIs per category of data subjects is 10 years from the date of submission of the relevant ADI.

Concerned individuals may direct any queries regarding personal data processing by EFSA to the data protection officer DataProtectionOfficer@efsa.europa.eu. They are entitled to submit a complaint at any time to the European Data Protection Supervisor: <http://www.edps.europa.eu>

The legal basis for ADI processing is provided for in Articles 22, 37 and 38 of Regulation (EC) No 178/2002.