



Manage RPPR ?

Form Approved OMB No. 0925-0002

Expiration date: 02/28/2023

Select Grant Number link to manage the RPPR:

| Grant Applications | | | | | |
|------------------------------------------|-------------|----------------------------------------------|--------------------|------------------------|--------------------|
| 3 records found, displaying all records. | | | | | |
| Grant Number | PO/PI Name | Project Title | Due Date | Status | Current Reviewer |
| T32 CA 123456 | SMITH, JOHN | Host Genetic Factors Associated with CMS | 02/15/2015 OVERDUE | PO/PI Work in Progress | SPECTOR, STEPHEN A |
| R01 GM 123456 | SMITH, JOHN | Modulating Autophagy to Eradicate HIV | 03/15/2015 OVERDUE | Not Started | |
| R01 GM 654321 | SMITH, JOHN | HIV CENTERS FOR UNDERREPRESENTED POPULATIONS | 10/01/2015 | Not Started | |

Public reporting burden for this collection of information is estimated to average 15 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0002).



Section A – Cover Page

SaveCancel

Grant Information

Grant Number:
Project Title:

A.4 Recipient Organization Information

Organization Name:
Address:

A.1 Program Director/Principal Investigator (PD/PI) Information ?

Name:
E-mail:
Phone:

A.1.a

Is there a change of contact PD/PI on a multiple-PI award? N/A Yes No

If yes, provide the eRA Commons ID of the new contact PD/PI ?

A.1.b Not Applicable

DUNS:
EIN:
Recipient ID: ?

A.5 Notice of Award Authorized Official

Name:
Title:
Phone:
Email:

A.2 Signing Official Information

Name:

E-mail:
Phone:

Project/Grant Period

Start Date: **End Date:**

Reporting Period

Start Date: **End Date:**

Requested Budget Period

Start Date: **End Date:**
Report Frequency: Annual **Other Frequency:**

A.3 Administrative Official Information

Name:

E-mail:
Phone:

SaveCancel[A Cover Page](#) | [B Accomplishments](#) | [C Products](#) | [D Participants](#) | [E Impact](#) | [F Changes](#) | [G Special Reporting Req](#) | [H Budget](#)

Section B – Accomplishments

B. Accomplishments (full screen)

B.1 What are the major goals of the project?

List the major goals of the project as stated in the approved application or as approved by the agency. If the application lists milestones/target dates for important activities or phases of the project, identify these dates and show actual completion dates or the percentage of completion.

Generally, the goals will not change from one reporting period to the next. However, if the awarding agency approved changes to the goals during the reporting period, list the revised goals and objectives. Also explain any significant changes in approach or methods from the agency approved application or plan.

"Goals" are equivalent to "specific aims." Significant changes in objectives and scope require prior approval of the agency (e.g., NIH Grants Policy Statement, 8.1.2).

List the major goals below (NIH recommended length is up to 1 page. Limit is 8000 characters or approximately 3 pages.)

Total remaining allowed limit is 8000 characters.

B.1.a Have the major goals changed since the initial competing award or previous report? Yes No

If yes, list the revised major goals below (NIH recommended length is up to 1 page. Limit is 8000 characters or approximately 3 pages.)

Total remaining allowed limit is 8000 characters.

B.2 What was accomplished under these goals?

For this reporting period describe: 1) major activities; 2) specific objectives; 3) significant results, including major findings, developments, or conclusions (both positive and negative); and 4) key outcomes or other achievements. Include a discussion of stated goals not met. As the project progresses, the emphasis in reporting in this section should shift from reporting activities to reporting accomplishments.

Goals are equivalent to specific aims. In the response, emphasize the significance of the findings to the scientific field. Include the approaches taken to ensure robust and unbiased results. For most NIH awards the response should not exceed 2 pages.

Upload accomplishments

B.3 Competitive Revisions/Administrative Supplements

For this reporting period, is there one or more Revision/Supplement associated with this award for which reporting is required? Yes No

If yes, identify the Revision(s)/Supplement(s) by grant number (e.g., 3R01CA098765-01S1) or title and describe the specific aims and accomplishments for each Revision/Supplement funded during this reporting period. Include any supplements to promote diversity or re-entry, or other similar supplements to support addition of an individual or a discrete project.

Revision/Supplement #

or Revision/Supplement Title

Total remaining allowed limit is 255 characters.

Describe the specific aims for this Revision/Supplement below (Limit is 700 characters or approximately 1/4 of a page.)

Total remaining allowed limit is 700 characters.

Describe the accomplishments for this Revision/Supplement below (Limit is 700 characters or approximately 1/4 of a page.)

Total remaining allowed limit is 700 characters.

| Revision/Supplement # | Revision/Supplement Title | Specific Aims | Accomplishments | Action |
|---------------------------|---------------------------|---------------|-----------------|--------|
| No items found. | | | | |
| Nothing found to display. | | | | |

B.4 What opportunities for training and professional development has the project provided?

If the research is not intended to provide training and professional development opportunities or there is nothing significant to report during this reporting period, state "Nothing to Report."

Describe opportunities for training and professional development provided to anyone who worked on the project or anyone who was involved in the activities supported by the project. "Training" activities are those in which individuals with advanced professional skills and experience assist others in attaining greater proficiency. Training activities may include, for example, courses or one-on-one work with a mentor. "Professional development" activities result in increased knowledge or skill in one's area of expertise and may include workshops, conferences, seminars, study groups, and individual study. Include participation in conferences, workshops, and seminars not listed under major activities.

For all projects reporting graduate student and/or postdoctoral participants in Section D, Participant, grantees are encouraged to describe the use of Individual Development Plans (IDPs) for those participants. Do not include the actual IDP, instead include information to document that IDPs are used to help manage the training for those individuals.

For T, F, K, R25, R13, D43 and other awards or award components designed to provide training and professional development opportunities, a response is required. Do not reiterate what is reported under Accomplishments. Limit the response to this reporting period.

Nothing to Report

or

Upload Description and Diversity Report, as applicable

B.5 How have the results been disseminated to communities of interest?

Describe how the results have been disseminated to communities of interest. Include any outreach activities that have been undertaken to reach members of communities who are not usually aware of these research activities, for the purpose of enhancing public understanding and increasing interest in learning and careers in science, technology, and the humanities.

Reporting the routine dissemination of information (e.g., websites, press releases) is not required. For awards not designed to disseminate information to the public or conduct similar outreach activities, a response is not required and the grantee should select "Nothing to Report". A detailed response is only required for awards or award components that are designed to disseminate information to the public or conduct similar outreach activities. Note that scientific publications and the sharing of research sources will be reported under Products.

Nothing to Report

or enter response below (NIH recommended length is up to 1 page. Limit is 8000 characters or approximately 3 pages.)

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B.6 What do you plan to do during the next reporting period to accomplish the goals?

Describe briefly what you plan to do during the next reporting period to accomplish the goals and objectives.

Discuss efforts to ensure that the approach is scientifically rigorous and results are robust and unbiased. Remember that significant changes in objectives and scope require prior approval of the agency (e.g., NIH Grants Policy Statement, 8.1.2).

Include any important modifications to the original plans. Provide a scientific justification for any changes involving research with human subjects or vertebrate animals. A detailed description of such changes must be provided under Changes.

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B1-2

B. Accomplishments (sections B1 – B4)

Save Cancel

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Goals are equivalent to specific aims. In the response, emphasize the significance of the findings to the scientific field. Include the approaches taken to ensure robust and unbiased results. For most NIH awards the response should not exceed 2 pages.

Upload accomplishments Add Attachment Delete Attachment View Attachment

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If yes, identify the Revision(s)/Supplement(s) by grant number (e.g., 3R01CA098765-01S1) or title and describe the specific aims and accomplishments for each Revision/Supplement funded during this reporting period. Include any supplements to promote diversity or re-entry, or other similar supplements to support addition of an individual or a discrete project.

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Total remaining allowed limit is 700 characters.

Describe the accomplishments for this Revision/Supplement below (Limit is 700 characters or approximately 1/4 of a page.)

Total remaining allowed limit is 700 characters.

Add/New Clear

No items found.

| Revision/Supplement # | Revision/Supplement Title | Specific Aims | Accomplishments | Action |
|---------------------------|---------------------------|---------------|-----------------|--------|
| Nothing found to display. | | | | |

B.4 What opportunities for training and professional development has the project provided?

If the research is not intended to provide training and professional development opportunities or there is nothing significant to report during this reporting period, state "Nothing to Report."

Describe opportunities for training and professional development provided to anyone who worked on the project or anyone who was involved in the activities supported by the project. "Training" activities are those in which individuals with advanced professional skills and experience assist others in attaining greater proficiency. Training activities may include, for example, courses or one-on-one work with a mentor. "Professional development" activities result in increased knowledge or skill in one's area of expertise and may include workshops, conferences, seminars, study groups, and individual study. Include participation in conferences, workshops, and seminars not listed under major activities.

For all projects reporting graduate student and/or postdoctoral participants in Section D. Participant, grantees are encouraged to describe the use of Individual Development Plans (IDPs) for those participants. A Do not include the actual IDP; instead include information to document that IDPs are used to help manage the training for those individuals.

For T, F, K, R25, R13, D43 and other awards or award components designed to provide training and professional development opportunities, a response is required. Do not reiterate what is reported under Accomplishments. Limit the response to this reporting period.

Nothing to Report

or

Upload Description and Diversity Report, as applicable Add Attachment Delete Attachment View Attachment

B3-4

B. Accomplishments (sections B3 – B4)

B.3 Competitive Revisions/Administrative Supplements

For this reporting period, is there one or more Revision/Supplement associated with this award for which reporting is required? Yes No

If yes, identify the Revision(s)/Supplement(s) by grant number (e.g., 3R01CA098765-01S1) or title and describe the specific aims and accomplishments for each Revision/Supplement funded during this reporting period. Include any supplements to promote diversity or re-entry, or other similar supplements to support addition of an individual or a discrete project.

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Describe the accomplishments for this Revision/Supplement below (Limit is 700 characters or approximately 1/4 of a page.)

Total remaining allowed limit is 700 characters.

No items found.

| Revision/Supplement # | Revision/Supplement Title | Specific Aims | Accomplishments | Action |
|---------------------------|---------------------------|---------------|-----------------|--------|
| Nothing found to display. | | | | |

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For T, F, K, R25, R13, D43 and other awards or award components designed to provide training and professional development opportunities, a response is required. Do not reiterate what is reported under Accomplishments. Limit the response to this reporting period.

Nothing to Report

or


Upload Description and Diversity Report, as applicable

B5-6

B. Accomplishments (sections B5 – B6)

B.5 How have the results been disseminated to communities of interest?

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 Reporting the routine dissemination of information (e.g., websites, press releases) is not required. For awards not designed to disseminate information to the public or conduct similar outreach activities, a response is not required and the grantee should select "Nothing to Report". A detailed response is only required for awards or award components that are designed to disseminate information to the public or conduct similar outreach activities. Note that scientific publications and the sharing of research sources will be reported under Products.


Nothing to Report


or enter response below (NIH recommended length is up to 1 page. Limit is 8000 characters or approximately 3 pages.)

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Describe briefly what you plan to do during the next reporting period to accomplish the goals and objectives.

 Discuss efforts to ensure that the approach is scientifically rigorous and results are robust and unbiased. Remember that significant changes in objectives and scope require prior approval of the agency (e.g., NIH Grants Policy Statement, 8.1.2.).

 Include any important modifications to the original plans. Provide a scientific justification for any changes involving research with human subjects or vertebrate animals. A detailed description of such changes must be provided under Changes.

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Section C – Products

C. Products (full screen)

NIH Manuscript Submission System Status: Available

Save Cancel

C.1 Publications

Are there publications or manuscripts accepted for publication in a journal or other publication (e.g., book, one-time publication, monograph, or preprint) during the reporting period resulting directly from this award? Yes No

Publications previously reported for this project ?

| Public Access Compliance | Citation |
|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Complete | Ahmed ZM, Jaworek TJ, Sarangdhar GN, Zheng L, Gul K, Khan SN, Friedman TB, Sliak RA, Bartles JR, Riazuddin S, Riazuddin S. Inframe deletion of human ESPN is associated with deafness, vestibulopathy and vision impairment. Journal of medical genetics. 2018 July 55(7):479-488. PubMed PMID: 29572253; PubMed Central PMCID: PMC6232856; DOI: 10.1136/jmedgenet-2017-105221. |
| Complete | Richard EM, Santos-Cortez RLP, Faridi R, Rehman AU, Lee K, Shahzad M, Acharya A, Khan AA, Imtiaz A, Chakchouk I, Takia C, Abbe I, Rafeeq M, Liaqat K, Chaudhry T, Bamshad MJ, Nickerson DA, Schrauwen I, Khan SN, Morell RJ, Zafar S, Ansar M, Ahmed ZM, Ahmad W, Riazuddin S, Friedman TB, Leal SM, Riazuddin S. Global genetic insight contributed by consanguineous Pakistani families segregating hearing loss: Human mutation. 2019 January;40(1):53-72. PubMed PMID: 30303587; PubMed Central PMCID: PMC6296877; DOI: 10.1002/humu.23966 |
| Complete | Schrauwen I, Giese AP, Aziz A, Lafont DT, Chakchouk I, Santos-Cortez RLP, Lee K, Acharya A, Khan FS, Ullah A, Nickerson DA, Bamshad MJ, Ali G, Riazuddin S, Ansar M, Ahmad W, Ahmed ZM, Leal SM. FAM92A Underlies Nonsyndromic Postaxial Polydactyly in Humans and an Abnormal Limb and Digit Skeletal Phenotype in Mice. Journal of bone and mineral research : the official journal of the American Society for Bone and Mineral Research. 2019 February;34(2):375-386. PubMed PMID: 30395363; PubMed Central PMCID: PMC6489482; DOI: 10.1002/jbmr.3594. |

Sort Table Above By Then By
 Ascending Descending Ascending Descending

C.2 Website(s) or other Internet site(s)

List the URL for any Internet site(s) that disseminates the results of the research activities. A short description of each site should be provided. It is not necessary to include the publications already specified above.

A description is only required for awards designed to create or maintain one or more websites. If the website disseminates a product that falls into other product categories, please select the appropriate category(ies) from the pull-down menu (select multiple categories by holding down the Ctrl button while selecting the categories). Limit the response to this reporting period. For awards not designed to create or maintain one or more websites, select Nothing to Report.

Nothing to Report

or list URL(s) for Internet site(s) and provide description(s) below (NIH recommended length is up to 1 page. Limit is 2000 characters or approximately 3 pages.)

Audio or video
Data or Databases
Research Material
Educational aids or curricula
Evaluation Instruments
Instruments or equipment
Models
Physical collections
Protocols
Software

Total remaining allowed limit is 2000 characters.

Add/New Clear

| Category | Website(s) or other Internet site(s) | Action |
|---------------------------|--------------------------------------|--------|
| Nothing found to display. | | |

C.3 Technologies or techniques

Identify technologies or techniques that have resulted from the research activities. Describe the technologies or techniques and how they are being shared.

If the technology or technique falls into other product categories, please select the appropriate category(ies) from the pull-down menu (select multiple categories by holding down the Ctrl button while selecting the categories). If the product(s) has been reported or shared through a publication, please include the full reference and/or PubMed ID in the product description. Limit the response to this reporting period. If there are no technologies or techniques to report select Nothing to Report.

Nothing to Report

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Models
Physical collections
Protocols
Software

Total remaining allowed limit is 2000 characters.

Add/New Clear

| Category | Technologies or techniques | Action |
|---------------------------|----------------------------|--------|
| Nothing found to display. | | |

C.4 Inventions, patent applications, and/or licenses

Have inventions, patent applications and/or licenses resulted from the award during this reporting period? Yes No

If yes, has this information been previously provided to the PHS or to the official responsible for patent matters at the grantee organization? Yes No

Reporting of inventions through [Edison](#) is strongly encouraged.

C.5 Other products and resource sharing

Identify any other significant products that were developed under this project.

PD/Pis are required to report all products that arise from their NIH award in section C. If there are other products to report not covered in Sections C1 - C4, enter a description for the product and choose the appropriate product category(ies) from the pull down menu (select multiple categories by holding down the Ctrl button while selecting the categories). If there is more than one product to report, select "add product" to create a workspace to report an additional product. Limit the response to this reporting period.

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Add/New Clear

| Category | Other products and resource sharing | Action |
|---------------------------|-------------------------------------|--------|
| Nothing found to display. | | |

Save Cancel [A Cover Page](#) | [B Accomplishments](#) | [C Products](#) | [D Participants](#) | [E Imeadi](#) | [F Changes](#) | [G Social Reporting Req](#) | [H Budget](#)

C1

C. Products (section C1)

NIH Manuscript Submission System Status: Available

C.1 Publications

Are there publications or manuscripts accepted for publication in a journal or other publication (e.g., book, one-time publication, monograph, or preprint) during the reporting period resulting directly from this award? Yes No

Publications previously reported for this project ?

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| Complete | Ahmed ZM, Jaworek TJ, Sarangdhar GN, Zheng L, Gul K, Khan SN, Friedman TB, Sisk RA, Bartles JR, Riazuddin S, Riazuddin S. Inframe deletion of human ESPN is associated with deafness, vestibulopathy and vision impairment. <i>Journal of medical genetics</i> . 2018 July;55(7):479-489. PubMed PMID: 29572253; PubMed Central PMCID: PMC6232856; DOI: 10.1136/jmedgenet-2017-105221. |
| Complete | Richard EM, Santos-Cortez RLP, Faridi R, Rehman AU, Lee K, Shahzad M, Acharya A, Khan AA, Imtiaz A, Chakchouk I, Takla C, Abbe I, Rafeeq M, Liaqat K, Chaudhry T, Bamshad MJ, Nickerson DA, Schrauwen I, Khan SN, Morell RJ, Zafar S, Ansar M, Ahmed ZM, Ahmad W, Riazuddin S, Friedman TB, Leal SM, Riazuddin S. Global genetic insight contributed by consanguineous Pakistani families segregating hearing loss. <i>Human mutation</i> . 2019 January;40(1):53-72. PubMed PMID: 30303587; PubMed Central PMCID: PMC6296877; DOI: 10.1002/humu.23666. |
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Sort Table Above By

Ascending Descending

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Ascending Descending

Proposed C2-5

C. Products (sections C2-C5)

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or list URL(s) for Internet site(s) and provide description(s) below (NIH recommended length is up to 1 page. Limit is 2000 characters or approximately 3 pages.)

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Models
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Software

Total remaining allowed limit is 2000 characters.

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| Category | Other products and resource sharing | Action |
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Save Cancel [A Cover Page](#) | [B Accomplishments](#) | [C Products](#) | [D Participants](#) | [E Impact](#) | [F Changes](#) | [G Special Reporting Req](#) | [H Budget](#)

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Section D – Participants

D. Participants (full screen)

Save
Cancel

D.1 What individuals have worked on the project?

Provide or update the following information for: (1) program director(s)/principal investigator(s) (PDs/Pis); and (2) each person who has worked at least one person month per year on the project during the reporting period, regardless of the source of compensation (a person month equals approximately 160 hours or 8.3% of annualized effort).

Provide the name and identify the role the person played in the project. Indicate the nearest whole person month (Calendar, Academic, Summer) that the individual worked on the project. Show the most senior role in which the person has worked on the project for any significant length of time. For example, if an undergraduate student graduates, enters graduate school, and continues to work on the project, show that person as a graduate student.

Instructions

- An individual's Commons user ID may be used to partially populate his or her information.
- A Commons ID is required for all individuals with a postdoctoral role and/or supported by a Reentry or Diversity Supplement
- Individuals with a [postdoctoral-like role](#) should be identified as "Postdoctoral (scholar, fellow, or other postdoctoral position)."
- Do not include Other Significant Contributors who are not committing any specified measurable effort to this project.
- Do not report personnel for whom a PHS 2271 Appointment form has been submitted through xTRAIN.
- Required fields are marked with an *.

eRA Commons User ID ?

Populate from Profile

*First Name

Middle Name

*Last Name

*Senior/Key Personnel? ?

Yes No

Degree(s) *Project Role

Supplement Support (SS) ? *Person Months ?

Other (Project Role) Not Applicable Calendar Academic Summer

*Is the individual's primary affiliation with a foreign organization? Yes No

Check "no" if the individual's primary affiliation is with a foreign organization but the individual is working on this award solely while in the U.S.

If yes, provide the name of the organization and country

Organization Name Country

Add/New Clear

| List of Participants | | | | | | | | | | | |
|----------------------|-----|------------------|-------------------|-----------------|---------------|------|-----|---------------------|---------|----------------|---------------------------------------------|
| Commons ID | S/K | Name | Degree(s) | Role | Person Months | | | Foreign Affiliation | | SS | Action |
| | | | | | Cal | Acad | Sum | Org | Country | | |
| AHMEDZ | Y | Ahmed, Zubair M. | BS,MS,PHD | PD/PI | 0 | 0 | 0 | | | Not Applicable | Edit |
| RIAZUDDINS | N | Riazuddin, Saima | BS,MBA,MPH,MS,PHD | Co-Investigator | 0 | 0 | 0 | | | Not Applicable | Edit Delete |

D.2 Personnel Updates

D.2.a Level of Effort

Will there be, in the next budget period, either (1) a reduction of 25% or more in the level of effort from what was approved by the agency for the PD/PI(s) or other senior/key personnel designated in the Notice of Award, or (2) a reduction in the level of effort below the minimum amount of effort required by the Notice of Award?

Yes No

Reductions are cumulative, i.e., the 25% threshold may be reached by two or more successive reductions that total 25% or more. Once agency approval has been given for a significant change in the level of effort, then all subsequent reductions are measured against the approved adjusted level. Selecting "yes" constitutes a prior approval request to the agency and the issuance of a subsequent year of funding constitutes agency approval of the request.

If yes, provide an explanation below (Limit is 700 characters or approximately 1/4 of a page.)

Total remaining allowed limit is 700 characters.

D.2.b New Senior/Key Personnel

Are there, or will there be, new senior/key personnel? Yes No

Senior/key personnel are those identified by the grantee institution as individuals who contribute in a substantive measurable way to the scientific development or execution of the project, whether or not salaries are requested. Typically these individuals have doctoral or other professional degrees, although individuals at the masters or baccalaureate level may be considered senior/key personnel if their involvement meets this definition. Consultants may be considered senior/key personnel if they meet this definition. "Zero percent" effort or "as needed" is not an acceptable level of involvement for senior/key personnel.

If yes, upload biosketches and other support for all new senior/key personnel ?

Add Attachment Delete Attachment View Attachment

D.2.c Changes in Other Support Help ?

Has there been a change in the active other support of senior/key personnel since the last reporting period? Yes No

If yes, upload active other support for senior/key personnel whose support has changed and indicate what the change has been

Add Attachment Delete Attachment View Attachment

D.2.d New Other Significant Contributors

Are there, or will there be, new other significant contributors? Yes No

Other significant contributors are individuals who have committed to contribute to the scientific development or execution of the project, but are not committing any specified measurable effort (i.e., person months) to the project.

If yes, upload biosketches for all new other significant contributors.

Add Attachment Delete Attachment View Attachment

D.2.e Multi-PI (MPI) Leadership Plan ?

Will there be a change in the MPI Leadership Plan for the next budget period? N/A Yes No

Change in status of PD/PI requires prior approval of the agency (e.g., NIH Grants Policy Statement, 8.1.2.6).

If yes, upload a revised MPI Leadership Plan that includes a description of the change(s)

Add Attachment Delete Attachment View Attachment

Save
Cancel
[A.Cover Page](#) | [B.Accomplishments](#) | [C.Products](#) | [D.Participants](#) | [E. Impact](#) | [F.Changes](#) | [G.Social Reporting Req](#) | [H.Budget](#)

D1

D. Participants (section D1)

Save
Cancel

D.1 What individuals have worked on the project?

Provide or update the following information for: (1) program director(s)/principal investigator(s) (PDs/PIs); and (2) each person who has worked at least one person month per year on the project during the reporting period, regardless of the source of compensation (a person month equals approximately 160 hours or 8.3% of annualized effort).

Provide the name and identify the role the person played in the project. Indicate the nearest whole person month (Calendar, Academic, Summer) that the individual worked on the project. Show the most senior role in which the person has worked on the project for any significant length of time. For example, If an undergraduate student graduates, enters graduate school, and continues to work on the project, show that person as a graduate student.

Instructions

- An individual's Commons user ID may be used to partially populate his or her information.
- A Commons ID is required for all individuals with a postdoctoral role and/or supported by a Reentry or Diversity Supplement
- Individuals with a **postdoctoral-like role** should be identified as "Postdoctoral (scholar, fellow, or other postdoctoral position)."
- Do not include Other Significant Contributors who are not committing any specified measurable effort to this project.
- Do not report personnel for whom a PHS 2271 Appointment form has been submitted through xTRAIN.
- Required fields are marked with an *.

eRA Commons User ID ?

Populate from Profile

***First Name** **Middle Name** ***Last Name** ***Senior/Key Personnel?** ?

 Yes No

Degree(s) ***Project Role** **Supplement Support (SS)** ? ***Person Months** ?

Please select a role ▼
 Other (Project Role)

Not Applicable

▼
CalendarAcademicSummer

Is the individual's primary affiliation with a foreign organization? Yes No

Check "no" if the individual's primary affiliation is with a foreign organization but the individual is working on this award solely while in the U.S.

If yes, provide the name of the organization and country

Organization Name **Country**

Please select a country ▼

Add/New Clear

| List of Participants | | | | | | | | | | | |
|----------------------|-----|------------------|-------------------|-----------------|---------------|-----|-----|---------------------|---------|----------------|---------------------------------------------|
| Commons ID | S/K | Name | Degree(s) | Role | Person Months | | | Foreign Affiliation | | SS | Action |
| | | | | | Cal | Aca | Sum | Org | Country | | |
| AHMEDZ | Y | Ahmed, Zubair M. | BS,MS,PHD | PD/PI | 0 | 0 | 0 | | | Not Applicable | Edit |
| RIAZUDDINS | N | Riazuddin, Saima | BS,MBA,MPH,MS,PHD | Co-Investigator | 0 | 0 | 0 | | | Not Applicable | Edit Delete |

D2a-d

D. Participants (section D2, subsections a-d)

D.2 Personnel Updates

D.2.a Level of Effort

Will there be, in the next budget period, either (1) a reduction of 25% or more in the level of effort from what was approved by the agency for the PD/PI(s) or other senior/key personnel designated in the Notice of Award, or (2) a reduction in the level of effort below the minimum amount of effort required by the Notice of Award?

Yes No

Reductions are cumulative, i.e., the 25% threshold may be reached by two or more successive reductions that total 25% or more. Once agency approval has been given for a significant change in the level of effort, then all subsequent reductions are measured against the approved adjusted level. Selecting "yes" constitutes a prior approval request to the agency and the issuance of a subsequent year of funding constitutes agency approval of the request.

If yes, provide an explanation below (Limit is 700 characters or approximately 1/4 of a page.)

Total remaining allowed limit is 700 characters.

D.2.b New Senior/Key Personnel

Are there, or will there be, new senior/key personnel? Yes No

Senior/key personnel are those identified by the grantee institution as individuals who contribute in a substantive measurable way to the scientific development or execution of the project, whether or not salaries are requested. Typically these individuals have doctoral or other professional degrees, although individuals at the masters or baccalaureate level may be considered senior/key personnel if their involvement meets this definition. Consultants may be considered senior/key personnel if they meet this definition. "Zero percent" effort or "as needed" is not an acceptable level of involvement for senior/key personnel.

If yes, upload biosketches and other support for all new senior/key personnel ?

Add AttachmentDelete AttachmentView Attachment

D.2.c Changes in Other Support Help ?

Has there been a change in the active other support of senior/key personnel since the last reporting period? Yes No

If yes, upload active other support for senior/key personnel whose support has changed and indicate what the change has been

Add AttachmentDelete AttachmentView Attachment

D.2.d New Other Significant Contributors

Are there, or will there be, new other significant contributors? Yes No

Other significant contributors are individuals who have committed to contribute to the scientific development or execution of the project, but are not committing any specified measurable effort (i.e., person months) to the project.

If yes, upload biosketches for all new other significant contributors.

Add AttachmentDelete AttachmentView Attachment

D2e

D. Participants (section D2, subsection e)

D.2.e Multi-PI (MPI) Leadership Plan ?

Will there be a change in the MPI Leadership Plan for the next budget period? N/A Yes No

Change in status of PD/PI requires prior approval of the agency (e.g., NIH Grants Policy Statement, 8.1.2.6).

If yes, upload a revised MPI Leadership Plan that includes a description of the change(s)

[A Cover Page](#) | [B Accomplishments](#) | [C Products](#) | [D Participants](#) | [E Impact](#) | [F Changes](#) | [G Special Reporting Req](#) | [H Budget](#)

Section E - Impact

E.1 Not Applicable

E.2 What is the impact on physical, institutional, or information resources that form infrastructure?

Describe ways, if any, in which the project made an impact, or is likely to make an impact, on physical, institutional, and information resources that form infrastructure, including:

- physical resources (such as facilities, laboratories, or instruments);
- institutional resources (such as establishment or sustenance of societies or organizations); or
- information resources, electronic means for accessing such resources or for scientific communication, or the like.

If the award or award component(s) is not intended to support physical, institutional, or information resources that form infrastructure, select "Nothing to Report".

Nothing to Report

or describe impact on physical, institutional, or information resources below (NIH recommended length is up to 1 page. Limit is 8000 characters or approximately 3 pages.)

Total remaining allowed limit is 8000 characters.

E.3 Not Applicable

E.4 What dollar amount of the award's budget is being spent in foreign country(ies)?

For domestic awardees provide the dollar amount obligated to first-tier subawards to foreign entities for this reporting period. For foreign awardees provide the dollar amount of the award, excluding all first-tier subawards to U.S. entities, for this reporting period. Dollars provided should reflect total costs.

If more than one foreign country, identify the distribution between the foreign countries.

Nothing to Report(zero dollars)

or provide the following for each foreign country: Dollar Amount \$ Country

[A Cover Page](#) | [B Accomplishments](#) | [C Products](#) | [D Participants](#) | [E Impact](#) | [F Changes](#) | [G Special Reporting Req](#) | [H Budget](#)

Section F - Changes

F. Changes

SaveCancel

F.1 Not Applicable

F.2 Actual or anticipated challenges or delays and actions or plans to resolve them

Describe challenges or delays encountered during the reporting period and actions or plans to resolve them.

Describe only significant challenges that may impede the research (e.g., accrual of patients, hiring of personnel, need for resources or research tools) and emphasize their resolution.

Nothing to Report

or describe challenges or delays and plans to resolve them below (NIH recommended length is up to 1 page. Limit is 8000 characters or approximately 3 pages.)

Total remaining allowed limit is 8000 characters.

F.3 Significant changes to Human Subjects, Vertebrate Animals, Biohazards, and/or Select Agents

Describe significant deviations, unexpected outcomes, or changes in approved protocols for human subjects, vertebrate animals, biohazards, and/or select agents during this reporting period.

Remember that significant changes in objectives and scope require prior approval of the agency (e.g., NIH Grants Policy Statement, 8.1.2.). If there are changes in any of the following areas check the appropriate box and provide a description of the changes.

F.3.a Human Subjects

If human subject protocols are or will be different from the previous submission, include a description and explanation of how the protocols differ and provide a new or revised Protection of Human Subjects Section as described in the competing application instructions.

No Change

or upload description of change Add Attachment Delete Attachment View Attachment

F.3.b Vertebrate Animals

If there are or will be significant changes to the uses of vertebrate animals from the previous submission, provide a description of the changes. Examples of changes considered to be significant include, but are not limited to, changing animal species, changing from noninvasive to invasive procedures, new project/performance site(s) where animals will be used, etc. If studies involving live vertebrate animals are planned and were not part of the originally proposed research design, provide a new or revised Vertebrate Animal Section as described in the competing application instructions.

No Change

or upload description of change Add Attachment Delete Attachment View Attachment

F.3.c Biohazards

If the use of biohazards is or will be different from the previous submission, provide a description and explanation of the difference(s).

No Change

or upload description of change Add Attachment Delete Attachment View Attachment

F.3.d Select Agents

If the possession, use, or transfer of Select Agents is or will be different from that proposed in the previous submission, including any change in the select agent research location and/or the required level of biocontainment, provide a description and explanation of the differences. If the use of Select Agents was proposed in the previous submission but has not been approved by regulatory authorities, provide an explanation. If studies involving Select Agents are planned and were not part of the originally proposed research design, provide a description of the proposed use, possession, transfer, and research location as described in the competing application instructions.

U.S. Select Agent Registry information: <http://www.selectagents.gov/SelectAgentsandToxins.html>

No Change

or upload description of change Add Attachment Delete Attachment View Attachment

SaveCancel[A Cover Page](#) | [B Accomplishments](#) | [C Products](#) | [D Participants](#) | [E Impact](#) | [F Changes](#) | [G Special Reporting Req](#) | [H Budget](#)

F. Changes

Save Cancel

F.1 Not Applicable

F.2 Actual or anticipated challenges or delays and actions or plans to resolve them

Describe challenges or delays encountered during the reporting period and actions or plans to resolve them.

Describe only significant challenges that may impede the research (e.g., accrual of patients, hiring of personnel, need for resources or research tools) and emphasize their resolution.

Nothing to Report

or describe challenges or delays and plans to resolve them below (NIH recommended length is up to 1 page. Limit is 8000 characters or approximately 3 pages.)

Total remaining allowed limit is 8000 characters.

F3a-d

F. Changes

F.3 Significant changes to Human Subjects, Vertebrate Animals, Biohazards, and/or Select Agents

Describe significant deviations, unexpected outcomes, or changes in approved protocols for human subjects, vertebrate animals, biohazards, and/or select agents during this reporting period.

Remember that significant changes in objectives and scope require prior approval of the agency (e.g., NIH Grants Policy Statement, 8.1.2.). If there are changes in any of the following areas check the appropriate box and provide a description of the changes.

F.3.a Human Subjects

If human subject studies are or will be different from the previous submission, please indicate there are changes here and provide these changes in section G.4 b, including a new or revised Protection of Human Subjects Plan as described in the competing application instructions. In addition, in G.4.b, please provide any updates to enrollment, human subjects protections training as well as clinical trials milestone information (if conducting one or more clinical trials).

No Change

or upload description of change

F.3.b Vertebrate Animals

If there are or will be significant changes to the uses of vertebrate animals from the previous submission, provide a description of the changes. Examples of changes considered to be significant include, but are not limited to, changing animal species, changing from noninvasive to invasive procedures, new project/performance site(s) where animals will be used, etc. If studies involving live vertebrate animals are planned and were not part of the originally proposed research design, provide a new or revised Vertebrate Animal Section as described in the competing application instructions.

No Change

or upload description of change

F.3.c Biohazards

If the use of biohazards is or will be different from the previous submission, provide a description and explanation of the difference(s).

No Change

or upload description of change

F.3.d Select Agents

If the possession, use, or transfer of Select Agents is or will be different from that proposed in the previous submission, including any change in the select agent research location and/or the required level of biocontainment, provide a description and explanation of the differences. If the use of Select Agents was proposed in the previous submission but has not been approved by regulatory authorities, provide an explanation. If studies involving Select Agents are planned and were not part of the originally proposed research design, provide a description of the proposed use, possession, transfer, and research location as described in the competing application instructions.

No Change

or upload description of change

Section G – Special Reporting

G. Special Reporting (full screen)

[Save](#) [Cancel](#)

G.1 Special Notice of Award Terms and Funding Opportunity Announcement Reporting Requirements

Address any special reporting requirements specified in the award terms and conditions in the [Notice of Award \(NoA\)](#) or Funding Opportunity Announcement (FOA).

Nothing to Report or upload files) [Add Attachment](#)

G.2 Not Applicable

G.3 Not Applicable

G.4 Human Subjects

Please click on the Human Subjects link below to update the Human Subjects and Clinical Trials Information Form(s) for this project, including the inclusion enrollment report(s). Be sure to submit updates before submitting the RPPR. [Click here](#) for complete instructions about this requirement.

[Human Subjects](#)

G.5 Human Subjects Education Requirement

Are there personnel on this project who are or will be newly involved in the design or conduct of human subjects research?

Yes No

If yes, provide the following in the text box below (Limit is 1300 characters or approximately 1/2 of a page.)

- names of individuals,
- title of the education program completed by each individual, and
- a one sentence description of the program

Total remaining allowed limit is 1300 characters.

G.6 Human Embryonic Stem Cells (hESCs)

Does this project involve human embryonic stem cells? Yes No

Only hESC lines listed as approved in the NIH [Registry](#) may be used in NIH funded research.

If yes, identify the hESC Registration number(s) from the NIH Registry [AddNew](#) [Clear](#)

If there is a change in the use of hESCs provide an explanation below (Limit is 700 characters or approximately 1/4 of a page.)

Total remaining allowed limit is 700 characters.

G.7 Vertebrate Animals

Does the project involve vertebrate animals? Yes No

G.8 Project Performance Sites

If there are changes to the project performance site(s) displayed below, edit as appropriate. [?]

*Required field(s)

*Organization Name

*DUNS or DUNS-4

*Address 1

*Address 2

*City

*State

*Province

*Country

*Zip Code

* Congressional District (e.g. MD-03 for Maryland, 8th District)

*Is this the primary Project Performance Site? Yes No

[AddNew](#) [Clear](#)

| Organization Name | DUNS | Congressional District | Address | Action |
|----------------------------------------------------|----------------|------------------------|------------------------------------------------------------------------------------------------------|---------------------------------------------|
| Primary University of Maryland, Baltimore | 188435911-0000 | MD-007 | Office of Research and Development 620 W. Lexington St., Baltimore MD, 212011506 UNITED STATES | Edit Delete |
| University of Maryland, Baltimore | 188435911-0000 | MD-007 | UMB Biopark Building #1 800 West Baltimore Street, Baltimore MD, 212011100 UNITED STATES | Edit Delete |
| National Centre of Excellence in Molecular Biology | 645494167-0000 | | National Centre of Excellence in Molecular Biology 87-West Canal Bank Road, Lahore , 53700, PAKISTAN | Edit Delete |

G.9 Foreign Component

Foreign component is defined as significant scientific activity that was performed outside of the United States, either by the grantee or by a researcher employed by a foreign organization, whether or not grant funds were expended. The following grant-related activities are significant and must be reported:

- involvement of human subjects or research with live vertebrate animals;
- extensive foreign travel by awardee project staff to collect data, or conduct surveys or sampling activities; or
- any awardee activity that may have an impact on U.S. foreign policy.

Examples of other award-related activities that may be significant are:

- collaborations with investigators at a foreign site anticipated to result in co-authorship;
- use of facilities or instrumentation at a foreign site; or
- receipt of financial support or resources from a foreign entity.

Foreign travel for consultation does not meet the definition of foreign component.

No foreign component

or provide the organization name, country, and description of each foreign component

Organization Name Country

Description of Foreign Component (Limit is 700 characters or approximately 1/4 of a page.)

Total remaining allowed limit is 700 characters.

[AddNew](#) [Clear](#)

G.10 Estimated Unobligated Balance

G.10 a Is it anticipated that an estimated unobligated balance (including prior year carryover) will be greater than 25% of the current year's total approved budget? Yes No

[ABOQ Special Instructions](#)

The "total approved budget" equals the current fiscal year award authorization plus any approved carryover of funds from a prior year(s). The numerator equals the total amount available for carryover and the denominator equals the current year's total approved budget.

If yes, provide the estimated unobligated balance

G.10.b Provide an explanation for unobligated balance below (Limit is 700 characters or approximately 1/4 of a page.)

Total remaining allowed limit is 700 characters.

G.10.c If authorized to carryover the balance, provide a general description of how it is anticipated that the funds will be spent. To determine carryover authorization, see the [Notice of Award](#) (Limit is 1300 characters or approximately 1/2 of a page.)

Total remaining allowed limit is 1300 characters.

G.11 Program Income

Is program income anticipated during the next budget period? Yes No

If yes, use the format below to reflect the amount and source(s)

| Anticipated Amount | Source(s) |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |

[AddNew](#) [Clear](#)

G.12 F&A Costs

Is there a change in performance sites that will affect F&A costs? Yes No

If yes, provide an explanation below (Limit is 1300 characters or approximately 1/2 of a page.)

Total remaining allowed limit is 1300 characters.

G.13 Not Applicable

[Save](#) [Cancel](#) [A Clear Page](#) [B Acknowledgments](#) [C Products](#) [D Participants](#) [E Inroad](#) [F Changes](#) [G Special Reporting Req](#) [H Budget](#)

G1-3

G. Special Reporting (sections G1 – G3)

Save Cancel

G.1 Special Notice of Award Terms and Funding Opportunity Announcement Reporting Requirements

Address any special reporting requirements specified in the award terms and conditions in the [Notice of Award \(NoA\)](#) or Funding Opportunity Announcement (FOA).

Nothing to Report

or upload file(s)

G.2 Not Applicable

G.3 Not Applicable

G4-5

G. Special Reporting (sections G4 – G5)

G.4 Human Subjects ?

Please click on the Human Subjects link below to update the Human Subjects and Clinical Trials Information Form(s) for this project, including the inclusion enrollment report(s). Be sure to submit updates before submitting the RPPR. [Click here](#) for complete instructions about this requirement.

[Human Subjects](#)

G.5 Human Subjects Education Requirement

Are there personnel on this project who are or will be newly involved in the design or conduct of human subjects research?

Yes No

If yes, provide the following in the text box below (Limit is 1300 characters or approximately 1/2 of a page.)

- names of individuals,
- title of the education program completed by each individual, and
- a one sentence description of the program

Total remaining allowed limit is 1300 characters.

G6

G. Special Reporting (section G6)

G.6 Human Embryonic Stem Cells (hESCs)

Does this project involve human embryonic stem cells? Yes No

Only hESC lines listed as approved in the NIH [Registry](#), may be used in NIH funded research.

If yes, identify the hESC Registration number(s) from the NIH Registry

If there is a change in the use of hESCs provide an explanation below (Limit is 700 characters or approximately 1/4 of a page.)

Total remaining allowed limit is 700 characters.

G7-8

G. Special Reporting (sections G7 – G8)

G.7 Vertebrate Animals

Does the project involve vertebrate animals? Yes No

G.8 Project/Performance Sites

If there are changes to the project/performance site(s) displayed below, edit as appropriate. ?

*Required field(s)

*Organization Name

* UEI

*Address 1

Address 2

*City

*State

Province

County

*Country

*Zip Code

* Congressional District
(e.g. MD-08 for Maryland, 8th District)

*Is this the primary Project/Performance Site? Yes No

| Project/Performance Sites | | | | |
|----------------------------------------------------|----------------|------------------------|-----------------------------------------------------------------------------------------------------|---------------------------------------------|
| Organization Names | DUNS | Congressional District | Address | Action |
| Primary: University of Maryland, Baltimore | 188435911-0000 | MD-007 | Office of Research and Development 620 W.Lexington St., Baltimore MD, 212011508,UNITED STATES | Edit Delete |
| University of Maryland, Baltimore | 188435911-0000 | MD-007 | UMB Biopark Building #1 800 West Baltimore Street, Baltimore MD, 212011100,UNITED STATES | Edit Delete |
| National Centre of Excellence in Molecular Biology | 645494167-0000 | | National Centre of Excellence in Molecular Biology 87-West Canal Bank Road, Lahore , 53700,PAKISTAN | Edit Delete |

G9-10

G. Special Reporting (sections G9 – G10)

G.9 Foreign Component

"Foreign component" is defined as significant scientific activity that was performed outside of the United States, either by the grantee or by a researcher employed by a foreign organization, whether or not grant funds were expended. The following grant-related activities are significant and must be reported:

- involvement of human subjects or research with live vertebrate animals;
- extensive foreign travel by awardee project staff to collect data, or conduct surveys or sampling activities; or
- any awardee activity that may have an impact on U.S. foreign policy.

Examples of other award-related activities that *may* be significant are:

- collaborations with investigators at a foreign site anticipated to result in co-authorship;
- use of facilities or instrumentation at a foreign site; or
- receipt of financial support or resources from a foreign entity.

Foreign travel for consultation does not meet the definition of foreign component.

No foreign component

or provide the organization name, country, and description of each foreign component

Organization Name Country

Description of Foreign Component (Limit is 700 characters or approximately 1/4 of a page.)

Total remaining allowed limit is 700 characters.

G.10 Estimated Unobligated Balance

G.10.a Is it anticipated that an estimated unobligated balance (including prior year carryover) will be greater than 25% of the current year's total approved budget? Yes No

[AHRQ Special Instructions](#)

The "total approved budget" equals the current fiscal year award authorization plus any approved carryover of funds from a prior year(s). The numerator equals the total amount available for carryover and the denominator equals the current year's total approved budget.

If yes, provide the estimated unobligated balance.

G.10.b Provide an explanation for unobligated balance below (Limit is 700 characters or approximately 1/4 of a page.)

Total remaining allowed limit is 700 characters.

G.10.c If authorized to carryover the balance, provide a general description of how it is anticipated that the funds will be spent. To determine carryover authorization, see the [Notice of Award](#) (Limit is 1300 characters or approximately 1/2 of a page.)

Total remaining allowed limit is 1300 characters.

G11-G12

G. Special Reporting (sections G11 – G12)

G.11 Program Income ?

Is program income anticipated during the next budget period? Yes No

If yes, use the format below to reflect the amount and source(s)

| Anticipated Amount | Source(s) |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |

G.12 F&A Costs

Is there a change in performance sites that will affect F&A costs? Yes No

If yes, provide an explanation below (Limit is 1300 characters or approximately 1/2 of a page.)

Total remaining allowed limit is 1300 characters.

G.13 Not Applicable

[A Cover Page](#) | [B Accomplishments](#) | [C Products](#) | [D Participants](#) | [E Impact](#) | [F Changes](#) | G Special Reporting Req | [H Budget](#)

Section H - Budget

H. Budget

Save Cancel**Component ID: Project-7326**

H1. Budget Form

To complete the detailed budget for this Component, follow the instructions in the SF424 (R&R) Application Guide for NIH and Other PHS Agencies, Section I, 4.7 Budget Component, sections A-K. The budget justification should be uploaded as item K, and must include detailed justification for those line items and amounts that represent a significant change from previously recommended levels (e.g., total rebudgeting greater than 25 percent of the total award amount for this budget period).

Select a budget to add from the dropdown list:

PHS 398 Training Budget

| Budget Type | Funds Requested | Action |
|-------------------------|-----------------|---------------------------------------------|
| PHS 398 Training Budget | | Edit Delete |

H2. Subaward Budget Form

For awards with subaward/consortium budgets, the grantee may select up to 30 subaward budgets. To complete a detailed budget for a subaward/consortium, follow the SF424 (R&R) Application Guide for NIH and Other PHS Agencies, Section I, 4.8 Special Instructions for Preparing Applications with a Subaward/Consortium.

Select a subaward budget to add from the dropdown list:


PHS 398 Training Subaward Budget

| Budget Type | Subaward | Organization | Funds Requested | Action |
|----------------------------------|----------|--------------|-----------------|---------------------------------------------|
| PHS 398 Training Subaward Budget | 1 | | | Edit Delete |

Save Cancel[A Cover Page](#) | [B Accomplishments](#) | [C Products](#) | [D Participants](#) | [E Impact](#) | [F Changes](#) | [G Special Reporting Req](#) | H Budget

Section I - Outcomes

I. Outcomes

 For NIH Section I, Outcomes will be made publicly available, thus allowing recipients to provide the general public with a concise summary of the cumulative outcomes or findings of the project at the end of a competitive segment. For NIH awards the length should not exceed half a page. In addition, for the interim or final RPPR the summary of outcomes or findings of the award must be written in the following format:

- Is written for the general public in clear, concise, and comprehensible language;
- Is suitable for dissemination to the general public, as the information may be available electronically;
- Does not include proprietary, confidential information or trade secrets

Please refer to the following link for samples of acceptable project outcomes: https://grants.nih.gov/grants/rppr/sample_project_outcomes_RPPR.htm

Save Cancel

I.1 What were the outcomes of the award?

(NIH recommended length is up to 1/2 page. Limit is 8000 characters or approximately 3 pages.)

Total remaining allowed limit is 8000 characters.

Save Cancel[A Cover Page](#) | [B Accomplishments](#) | [C Products](#) | [D Participants](#) | [E Impact](#) | [G Special Reporting Req](#) | I Outcomes

SF424 Budget

SF424 Research & Related Budget

Component ID: Project-7326

Save Cancel

OIG Number: 905-001
 * Required field

Organizational UEI

* Organization Name

* Budget Type Project Subaward/Consortium

Budget Period 1
 * Start Date
 * End Date

A. Senior/Key Person

* Prefix * First Name Middle Name * Last Name Suffix

Base Salary Cat. Months Acad. Sum. * Requested Salary (\$) * Fringe Benefits (\$)

* Project Role Project Lead

[Add Senior/Key Person](#) [Clear](#)

| Person Name | Project Role | Base Salary (\$) | Cat. | Months Acad. | Sum. | Requested Salary (\$) | Fringe Benefits (\$) | Funds Requested (\$) | Action |
|---------------------------|--------------|------------------|------|--------------|------|-----------------------|----------------------|----------------------|--------|
| Nothing found to display. | | | | | | | | | |

Additional Senior/Key Persons

Total Funds requested for all Senior/Key Persons in the attached file

Total Funds requested for all Senior/Key Persons \$

B. Other Personnel

| * Number of Personnel | * Project Role | Cat. | Months Acad. | Sum. | * Requested Salary (\$) | * Fringe Benefits (\$) | Funds Requested (\$) |
|------------------------------|--------------------------|----------------------|----------------------|----------------------|-----------------------------------------------|------------------------|----------------------|
| <input type="text"/> | Post Doctoral Associates | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | Graduate Students | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | Undergraduate Students | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | Secretary/Clerical | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Total Number Other Personnel | | | | | Total Other Personnel | | <input type="text"/> |
| | | | | | Total Salary, Wages and Fringe Benefits (A-B) | | <input type="text"/> |

C. Equipment Description

* Equipment Item

* Funds Requested \$

[Add Equipment Item](#) [Clear](#)

| Equipment Item | Funds Requested (\$) | Action |
|---------------------------|----------------------|--------|
| Nothing found to display. | | |

Additional Equipment

Total Funds requested for all equipment listed in the attached file

Total Equipment \$

D. Travel

| | |
|-----------------------------------------------------------------------|----------------------|
| 1. Domestic Travel Costs (incl. Canada, Mexico, and U.S. Possessions) | Funds Requested (\$) |
| <input type="text"/> | <input type="text"/> |
| 2. Foreign Travel Costs | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| Total Travel Costs | <input type="text"/> |

E. Participant/Trainee Support Costs

| | |
|------------------------------------------------------|----------------------|
| 1. Tuition/Fees/Health Insurance | Funds Requested (\$) |
| <input type="text"/> | <input type="text"/> |
| 2. Stipends | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| 3. Travel | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| 4. Subsistence | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| 5. Other <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| Number of Participants/Trainees <input type="text"/> | |
| Total Participant/Trainee Support Costs | <input type="text"/> |

F. Other Direct Costs

| | |
|--------------------------------------------|----------------------|
| 1. Materials and Supplies | Funds Requested (\$) |
| <input type="text"/> | <input type="text"/> |
| 2. Publication Costs | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| 3. Consultant Services | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| 4. ADP/Computer Services | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| 5. Subawards/Consortium/ Contractual Costs | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| 6. Equipment or Facility Rental/User Fees | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| 7. Alterations and Renovations | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| 8. <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| 9. <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| 10. <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| Total Other Direct Costs | <input type="text"/> |

G. Direct Costs

Total Direct Costs (A thru F) \$

H. Indirect Costs

* Indirect Cost Type

Indirect Cost Rate %

Indirect Cost Base \$

* Funds Requested \$

[Add Indirect Cost Item](#) [Clear](#)

| Indirect Cost Type | Indirect Cost Rate (%) | Indirect Cost Base (\$) | Funds Requested (\$) | Action |
|---------------------------|------------------------|-------------------------|----------------------|--------|
| Nothing found to display. | | | | |

Total Indirect Costs \$

Compliant Federal Agency (Agency Name, POC Name and POC Phone Number)

I. Total Direct and Indirect Costs

Total Direct and Indirect Institutional Costs (G + H) \$

J. Fee

Funds Requested \$

K. Budget Justification

(Only attach one file)

[Add Attachment](#) [Delete Attachment](#) [View Attachment](#)

Save Cancel [A. Cover Page](#) [B. Accounts/Items](#) [C. Budgets](#) [D. Participants](#) [E. Impact / Classes](#) [G. Special Reporting](#) [H. Budget](#)

SF424 Research & Related Budget ?

Component ID: Project-7326

OMB Number: 0925-0001
* Required field(s)

* Organizational UEI ?

* Organization Name ?

* Budget Type Project Subaward/Consortium

Budget Period: 1

* Start Date

* End Date

A. Senior/Key Person

| | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|
| Prefix | * First Name | Middle Name | * Last Name | Suffix |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

| | | | | | |
|----------------------|----------------------|----------------------|----------------------|-------------------------|------------------------|
| Base Salary | Cal. | Months Acad. | Sum. | * Requested Salary (\$) | * Fringe Benefits (\$) |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

* Project Role

| Person Name | Project Role | Base Salary (\$) | Cal. | Months Acad. | Sum. | Requested Salary (\$) | Fringe Benefits (\$) | Funds Requested (\$) | Action |
|---------------------------|--------------|------------------|------|--------------|------|-----------------------|----------------------|----------------------|--------|
| Nothing found to display. | | | | | | | | | |

Additional Senior/Key Persons

Total Funds requested for all Senior/Key Persons in the attached file \$

Total Funds requested for all Senior/Key Persons \$

SF242 B-D

B. Other Personnel

| * Number of Personnel | * Project Role | Months | | | * Requested Salary (\$) | * Fringe Benefits (\$) | Funds Requested (\$) |
|-----------------------|-------------------------------------|----------------------|----------------------|----------------------|------------------------------------------------------|------------------------|----------------------|
| | | Cal. | Acad. | Sum. | | | |
| <input type="text"/> | Post Doctoral Associates | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | Graduate Students | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | Undergraduate Students | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | Secretarial/Clerical | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | Total Number Other Personnel | | | | Total Other Personnel | | <input type="text"/> |
| | | | | | Total Salary, Wages and Fringe Benefits (A+B) | | <input type="text"/> |

C. Equipment Description

* Equipment Item

* Funds Requested \$

| Equipment Item | Funds Requested (\$) | Action |
|----------------|----------------------|--------|
|----------------|----------------------|--------|

Nothing found to display.

Additional Equipment

Total funds requested for all equipment listed in the attached file \$

Total Equipment \$

D. Travel

| | Funds Requested (\$) |
|--------------------------------------------------------------------------|-------------------------|
| 1. Domestic Travel Costs (Incl. Canada, Mexico, and U.S. Possessions) | \$ <input type="text"/> |
| 2. Foreign Travel Costs | \$ <input type="text"/> |
| Total Travel Costs | \$ <input type="text"/> |

SF424 E-F

E. Participant/Trainee Support Costs

| | Funds Requested (\$) |
|------------------------------------------------|-------------------------|
| 1. Tuition/Fees/Health Insurance | \$ <input type="text"/> |
| 2. Stipends | \$ <input type="text"/> |
| 3. Travel | \$ <input type="text"/> |
| 4. Subsistence | \$ <input type="text"/> |
| 5. Other <input type="text"/> | \$ <input type="text"/> |
| Number of Participants/Trainees | <input type="text"/> |
| Total Participant/Trainee Support Costs | \$ <input type="text"/> |

F. Other Direct Costs

| | Funds Requested (\$) |
|--------------------------------------------|-------------------------|
| 1. Materials and Supplies | \$ <input type="text"/> |
| 2. Publication Costs | \$ <input type="text"/> |
| 3. Consultant Services | \$ <input type="text"/> |
| 4. ADP/Computer Services | \$ <input type="text"/> |
| 5. Subawards/Consortium/ Contractual Costs | \$ <input type="text"/> |
| 6. Equipment or Facility Rental/User Fees | \$ <input type="text"/> |
| 7. Alterations and Renovations | \$ <input type="text"/> |
| 8. <input type="text"/> | \$ <input type="text"/> |
| 9. <input type="text"/> | \$ <input type="text"/> |
| 10. <input type="text"/> | \$ <input type="text"/> |
| Total Other Direct Costs | \$ <input type="text"/> |

SF242 G-K

User Interface

G. Direct Costs

Total Direct Costs (A thru F) \$

H. Indirect Costs

* Indirect Cost Type

Indirect Cost Rate %

Indirect Cost Base \$

* Funds Requested \$

| Indirect Cost Type | Indirect Cost Rate (%) | Indirect Cost Base (\$) | Funds Requested (\$) | Action |
|--------------------|------------------------|-------------------------|----------------------|--------|
|--------------------|------------------------|-------------------------|----------------------|--------|

Nothing found to display.

Total Indirect Costs \$

Cognizant Federal Agency
(Agency Name, POC Name and POC Phone
Number)

I. Total Direct and Indirect Costs

Total Direct and Indirect Institutional Costs (G + H) \$

J. Fee

Funds Requested \$

K. Budget Justification

(Only attach one file)

[A Cover Page](#) | [B Accomplishments](#) | [C Products](#) | [D Participants](#) | [E Impact](#) | [F Changes](#) | [G Special Reporting Req](#) | [H Budget](#)

PHS398 Budget

PHS 398 TRAINING BUDGET ?

Component ID: Project-7326

OMB Number: 0925-0001
* Required field(s)

* Organizational DUNS ?

* Organization Name ?

* Budget Type Project Subaward/Consortium

Budget Period: 1

* Start Date

* End Date

A. Stipends Tuition/Fees

| Number of Trainees | | | | Stipends Requested (\$) | Tuition/Fees Requested (\$) | | | | | | |
|--------------------------------------------|----------------------|---------------------------|---------------|-------------------------|-----------------------------|---|---|---|---|----------------------|----------------------|
| Full Time | Short Term | | | | | | | | | | |
| | | Undergraduate: | | | | | | | | | |
| | | Number per Stipend Level: | | | | | | | | | |
| <input type="text"/> | <input type="text"/> | First-Year/Soph. | Junior/Senior | <input type="text"/> | <input type="text"/> | | | | | | |
| | | Predoctoral: | | | | | | | | | |
| <input type="text"/> | <input type="text"/> | Single Degree | | <input type="text"/> | <input type="text"/> | | | | | | |
| <input type="text"/> | <input type="text"/> | Dual Degree | | <input type="text"/> | <input type="text"/> | | | | | | |
| <input type="text"/> | <input type="text"/> | Total Predoctoral | | <input type="text"/> | <input type="text"/> | | | | | | |
| | | Postdoctoral: | | | | | | | | | |
| | | Number Per Stipend Level | | | | | | | | | |
| <input type="text"/> | <input type="text"/> | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | Non-degree Seeking | | | | | | | | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | Degree Seeking | | | | | | | | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | Total Postdoctoral | | | | | | | | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | Other | | | | | | | | <input type="text"/> | <input type="text"/> |
| Totals \$ | | | | | | | | | | <input type="text"/> | <input type="text"/> |
| Total Stipends + Tuition/Fees Requested \$ | | | | | | | | | | <input type="text"/> | <input type="text"/> |

B. Other Direct Costs

| | |
|---------------------------------------------------------|-------------------------|
| | Funds Requested (\$) |
| Trainee Travel | \$ <input type="text"/> |
| Training Related Expenses | \$ <input type="text"/> |
| Total Direct Costs from R&R Budget Form (if applicable) | \$ <input type="text"/> |
| Consortium Training Costs (if applicable) | \$ <input type="text"/> |
| Total Other Direct Costs Requested | \$ <input type="text"/> |

C. Total Direct Costs Requested (A + B)

\$

D. Indirect Costs

| Indirect Cost Type | Indirect Cost Rate (%) | Indirect Cost Base (\$) | Funds Requested (\$) |
|-----------------------------------|------------------------|-------------------------|----------------------|
| 1. <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2. <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Total Indirect Costs Requested \$ | | | <input type="text"/> |

E. Total Direct and Indirect Costs Requested (C + D)

\$

F. Budget Justification

(Only attach one file)

[A Cover Page](#) | [B Accomplishments](#) | [C Products](#) | [D Participants](#) | [E Impact](#) | [F Changes](#) | [G Special Reporting Req](#) | [H Budget](#)

Save Cancel

Component ID: Project-7326

OMB Number: 0925-0001
* Required field(s)

* Organizational DUNS ?

* Organization Name ?

* Budget Type Project Subaward/Consortium

Budget Period: 1

* Start Date

* End Date

A. Stipends Tuition/Fees

| Number of Trainees | | | | | | Stipends Requested (\$) | Tuition/Fees Requested (\$) | | | | |
|----------------------|----------------------|--------------------|---|---------------------------|---|--------------------------------------------|-----------------------------|---|---|----------------------|----------------------|
| Full Time | Short Term | | | | | | | | | | |
| | | Undergraduate: | | Number per Stipend Level: | | | | | | | |
| <input type="text"/> | <input type="text"/> | First-Year/Soph. | | Junior/Senior | | <input type="text"/> | <input type="text"/> | | | | |
| <input type="text"/> | <input type="text"/> | Predoctoral: | | Single Degree | | <input type="text"/> | <input type="text"/> | | | | |
| <input type="text"/> | <input type="text"/> | | | Dual Degree | | <input type="text"/> | <input type="text"/> | | | | |
| <input type="text"/> | <input type="text"/> | | | Total Predoctoral | | <input type="text"/> | <input type="text"/> | | | | |
| | | Postdoctoral: | | Number Per Stipend Level | | | | | | | |
| <input type="text"/> | <input type="text"/> | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | Non-degree Seeking | | | | <input type="text"/> | <input type="text"/> | | | | |
| <input type="text"/> | <input type="text"/> | Degree Seeking | | | | <input type="text"/> | <input type="text"/> | | | | |
| <input type="text"/> | <input type="text"/> | Total Postdoctoral | | | | <input type="text"/> | <input type="text"/> | | | | |
| <input type="text"/> | <input type="text"/> | Other | | | | <input type="text"/> | <input type="text"/> | | | | |
| | | | | | | Totals \$ | <input type="text"/> | | | <input type="text"/> | <input type="text"/> |
| | | | | | | Total Stipends + Tuition/Fees Requested \$ | <input type="text"/> | | | <input type="text"/> | <input type="text"/> |

PHS398 - B

B. Other Direct Costs

| | Funds Requested (\$) |
|---------------------------------------------------------|-------------------------|
| Trainee Travel | \$ <input type="text"/> |
| Training Related Expenses | \$ <input type="text"/> |
| Total Direct Costs from R&R Budget Form (if applicable) | \$ <input type="text"/> |
| Consortium Training Costs (if applicable) | \$ <input type="text"/> |
| Total Other Direct Costs Requested | \$ <input type="text"/> |

C. Total Direct Costs Requested (A + B)

\$

D. Indirect Costs

| | Indirect Cost Type | Indirect Cost Rate (%) | Indirect Cost Base (\$) | Funds Requested (\$) |
|-----------------------------------|----------------------|------------------------|-------------------------|----------------------|
| 1. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Total Indirect Costs Requested \$ | | | | <input type="text"/> |

E. Total Direct and Indirect Costs Requested (C + D)

\$

F. Budget Justification

(Only attach one file)

[A Cover Page](#) | [B Accomplishments](#) | [C Products](#) | [D Participants](#) | [E Impact](#) | [F Changes](#) | [G Special Reporting Req](#) | H Budget

PHS398 Overall Budget

PHS 398 Additional Indirect Cost Budget ?

Overall

OMB Number: 0925-0001
* Required field(s)

* Organizational DUNS ?
* Organization Name ?
* Budget Type Project Subaward/Consortium

Budget Period: 1
* Start Date
* End Date

A. Indirect Costs

* Indirect Cost Type
Indirect Cost Rate %
Indirect Cost Base \$
* Funds Requested \$

| Indirect Cost Type | Indirect Cost Rate (%) | Indirect Cost Base (\$) | Funds Requested (\$) | Action |
|--------------------|------------------------|-------------------------|----------------------|--------|
|--------------------|------------------------|-------------------------|----------------------|--------|

Nothing found to display.

Total Indirect Costs Requested \$

B. Budget Justification

(Only attach one file)

[A Cover Page](#) | [B Accomplishments](#) | [C Products](#) | [D Participants](#) | [E Impact](#) | [F Changes](#) | [G Special Reporting Req](#) | H Budget