

RESEARCH & RELATED BUDGET - SECTION C, D, & E, BUDGET PERIOD 5

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2028

End Date*: 03-31-2029

Budget Period: 5

C. Equipment Description		Funds Requested (\$)*
List items and dollar amount for each item exceeding \$5,000		
Equipment Item		
Total funds requested for all equipment listed in the attached file		
	Total Equipment	0.00
Additional Equipment: File Name:		

D. Travel	Funds Requested (\$)*
1. Domestic Travel Costs (Incl. Canada, Mexico, and U.S. Possessions)	1,500.00
2. Foreign Travel Costs	
Total Travel Cost	1,500.00

E. Participant/Trainee Support Costs	Funds Requested (\$)*
1. Tuition/Fees/Health Insurance	
2. Stipends	
3. Travel	
4. Subsistence	
5. Other:	
Number of Participants/Trainees	Total Participant Trainee Support Costs
	0.00

RESEARCH & RELATED Budget {C-E} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTIONS F-K, BUDGET PERIOD 5

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2028

End Date*: 03-31-2029

Budget Period: 5

F. Other Direct Costs	Funds Requested (\$)*
1. Materials and Supplies	
2. Publication Costs	
3. Consultant Services	18,667.00
4. ADP/Computer Services	
5. Subawards/Consortium/Contractual Costs	
6. Equipment or Facility Rental/User Fees	
7. Alterations and Renovations	
8. Data Management and Sharing Costs	0.00
Total Other Direct Costs	18,667.00

G. Direct Costs	Funds Requested (\$)*
Total Direct Costs (A thru F)	91,327.00

H. Indirect Costs			
Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)*
1. Institutional IDC Cost On Campus	61.0	91,327.00	55,709.00
Total Indirect Costs			55,709.00
Cognizant Federal Agency			
(Agency Name, POC Name, and POC Phone Number)			

I. Total Direct and Indirect Costs	Funds Requested (\$)*
Total Direct and Indirect Institutional Costs (G + H)	147,036.00

J. Fee	Funds Requested (\$)*
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K. Total Costs and Fee	Funds Requested (\$)*
	147,036.00

L. Budget Justification*	File Name: Budget_Justification-Admin_Core.pdf
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RESEARCH & RELATED Budget {F-K} (Funds Requested)

Budget Justification: Administrative Core**A. Personnel Salaries and Wages****Senior/Key Personnel****Timothy Murphy, MD**

- Principal Investigator, NIMHD Center of Excellence in Investigator Development and Community Engagement
- Effort: 1.0 calendar months (Institutional support years 1-5: 0.50 calendar months)

Dr. Murphy is a SUNY Distinguished Professor, Founding Director of the Community Health Equity Research Institute and Director of the Clinical and Translational Science Institute in the Jacobs School of Medicine and Biomedical Sciences, University at Buffalo. He is an accomplished physician scientist who has been continuously funded by the NIH as a PI of R01 grants since 1983. His work involves T1 translational research on pathogenesis and vaccine development for respiratory tract bacterial pathogens. He has extensive experience as a mentor and is PI of a T35 training grant "Training the next generation of clinician scientists."

Responsibilities:

- Oversee the strategic planning and direction of the Center of Excellence
- Guide the overall activities of the Center of Excellence
- Chair the Leadership Team
- Responsible for assuring compliance with applicable federal regulations and NIH policies
- Manage the budget
- Oversee the DEIA Action Plan

Pastor George Nicholas, MDiv

- Co-Director, Administrative Core
- Effort: Independent Contractor

Pastor Nicholas is Senior Pastor of Lincoln Memorial United Methodist in Buffalo, NY. He has been recognized by the General Board of Global Ministries of the United Methodist for his work on urban ministries. Pastor Nicholas is an advocate for social justice and community revitalization. A founding member of the Concerned Clergy Coalition of Western New York, he is the convener of the African American Health Equity Task Force and CEO of the Buffalo Center for Health Equity (501(c)3). He is an influential and visionary community leader.

Responsibilities

- Work with the Director to:
 - o Oversee the strategic planning and direction of the Center of Excellence
 - o Guide the overall activities of the Center of Excellence
 - o Manage the budget
- Serve on Leadership Team
- Connect Buffalo Center for Health Equity with Center of Excellence initiatives
- Facilitate active involvement of community leaders and community members

Carol Van Zile Tamsen, PhD

- Evaluator
- Effort: 0.60 calendar months (Institutional support years 1-5: 0.30 calendar months)

Dr. Van Zile-Tamsen is Associate Vice Provost and Director Office of Curriculum, Assessment and Teaching Transformation Dr. Van Zile-Tamsen leads the university efforts to achieve programmatic and instructional excellence and increased student learning and success. She is a nationally recognized expert in evaluation and assessment of educational and training programs.

Responsibilities

- Oversee and implement evaluation and continuous quality improvement of the project
- Communicate progress and evaluation data to Center of Excellence Leadership
- Serve on the Center of Excellence Steering Committee

Oscar Gomez, MD, PhD

- Director, Investigator Development Core
- Center of Excellence Leadership Team
- Effort as needed

Dr. Gomez is an Associate Professor of Pediatrics, School of Medicine and an active advocate of recruiting underrepresented minorities in medical science to training programs. He is a member of the Harold Amos Medical Faculty Development Program of The Robert Wood Johnson Foundation, first as a scholar beginning 2009, and later as an alumnus beginning in 2012. This program is dedicated to career development of underrepresented minorities in medical science in the US. He is co-investigator and associate lead of the CTSI-associated KL2-mentored research award program in which he serves as a faculty advisor for early-career scholars. He conducts studies on the epidemiology of childhood diarrhea among children in low- and middle-income countries in Latin America and studies on hepatitis C- exposure and infection among infants in Buffalo, a condition that disproportionately impacts communities that experience adverse social determinants of health.

Responsibilities:

- Lead the Investigator Development Core
- Collaborate with Administrative Core in managing pilot project award announcements
- Coordinate training and mentoring activities
- Serve on Center of Excellence Leadership Team

Robert Silverman, PhD

- Director, Community Engagement and Dissemination Core
- Center of Excellence Leadership Team
- Effort as needed

Dr. Silverman is Professor of Urban and Regional Planning in the School of Architecture and Planning. He is an internationally regarded urban planning scholar whose work focuses on community development, inequity in urban communities, affordable housing, and education policy. He has worked closely with Buffalo East Side Communities since he joined the UB faculty in 2003.

Responsibilities

- Lead the Community Engagement and Dissemination Core
- Facilitate linking of pilot studies awardees with community partners
- Work with Buffalo Center for Health Equity on dissemination of research results to community
- Work with Administrative Core in reviewing and managing the Community Partnership grants

Pastor Kinzer Pointer, MM

- Co-Director, Investigator Development Core
- Center of Excellence Steering Committee
- Effort: Independent Contractor

Pastor Pointer is the pastor of Liberty Missionary Baptist Church, President and CEO of Greater Buffalo United Ministries and Chair, Erie County Poverty Committee. He is a mentor in the National Medical Association and has worked for the past five years with Drs. Murphy and Gomez on the T35 training grant "Training the Next Generation of Clinician Scientists." He co-teaches a course in the medical school with Dr. Henry Taylor, "Health in the Neighborhood," in which students review key literature and meet with and work with community members in their neighborhoods. Pastor Pointer also serves on the Board of the Community Health Equity Research Institute.

Responsibilities

- Co-Director of Investigator Development Core (IDC)
- Provide guidance and contribution to IDC
- Provide mentorship to pilot study awardees
- Serve on Center of Excellence Steering Committee

Rita Hubbard Robinson, JD

- Center of Excellence Steering Committee
- Effort: Independent Contractor

Rita Hubbard Robinson is the founder and Chief Executive Officer of NeuWater & Associates, LLC, a company focused on improving population health through projects that focus on improving access to healthy food, employment, industry development, youth development, entrepreneurial development, health and wellness initiatives, and green community redevelopment. As an influential leader she has been committed to the improvement of health and social determinants of health for over 30 years. Ms. Hubbard-Robinson works with several community-based teams to improve access to healthy produce in Buffalo neighborhoods that experience food insecurity. She is treasurer of the Buffalo Center for Health Equity, runs the First Fruits Food Pantry that serves 200 East Side families, and has won numerous awards for her work in the community.

Responsibilities

- Serve on Center of Excellence Steering Committee
- Provide a community perspective to the Center Excellence through the Steering Committee
- Connect Buffalo Center for Health Equity with Center of Excellence initiatives

Henry Taylor, PhD

- Center of Excellence Steering Committee
- Co-Investigator, Community Engagement and Dissemination Core
- Co-Investigator, Investigator Development Core
- Effort as needed

Dr. Taylor is Professor of Urban and Regional Planning, School of Architecture and Planning, Director of the Center for Urban Studies; and Associate Director, UB Community Health Equity Research Institute. His areas of expertise include urban development, housing, gentrification, underdeveloped neighborhoods, shrinking cities, race and class, and U.S.-Cuba relations. His research focuses on a historical and contemporary analysis of underdeveloped urban neighborhoods, social isolation, and race and class issues among people of color, especially African Americans and Latinos. Dr. Taylor designed and conducts the *Urban Internship Program*, which creates opportunities for graduate and undergraduate students to become involved in neighborhood redevelopment initiatives and research projects. He has trained numerous students in this program over the years. He is also the Co-leader of the CTSI Workshop series in Health Equity.

Responsibilities:

- Provide guidance and contribution to the Community Engagement and Dissemination Core
- Provide guidance and contribution to the Investigator Development Core
- Serve on Center of Excellence Steering Committee
- Serve as Center of Excellence advocate to selected pilot studies awardees
- Facilitate partnerships and collaborations in the School of Architecture and Planning
- Help identify mentors for pilot studies awardees as needed

Heather Orom, PhD

- Center of Excellence Steering Committee
- Co-Investigator, Community Engagement and Dissemination Core
- Effort as needed

Dr. Orom is Associate Professor of Community Health and Health Behavior and Associate Dean for Equity, Diversity and Inclusion in the School of Public Health. Her research focuses on the causes of health disparities with a particular interest in how discrimination influences health outcomes. Dr. Orom has led many projects and has collaborated on many projects that have advanced understanding of health inequities. She engages in applied health equity research for local community organizations, assisting with evaluation and other research needs. Dr. Orom is an Associate Director of the Community Health Equity Research Institute

Responsibilities:

- Provide guidance and contribution to the Community Engagement and Dissemination Core
- Work with the Investigator Development core to identify mentors for early career investigators
- Facilitate partnerships and collaborations in the School of Public Health and Health Professions
- Serve on Center of Excellence Steering Committee

Susan Grinslade, PhD, RN

- Center of Excellence Steering Committee
- Co-Investigator, Community Engagement and Dissemination Core
- Effort as needed

Dr. Grinslade is Clinical Professor in the School of Nursing and fellow in the American Academy of Nursing with expertise in public health nursing and a passion for health equity. She is also an Associate Director of the Community Health Equity Research Institute. She led the Million Hearts Initiative in Buffalo (a CDC program to reduce heart disease) facilitating a partnership between the School of Nursing and African American East Side communities. She has particular expertise in community based participatory research. Dr. Grinslade was an original member of the African American Health Equity Task Force and was instrumental in connecting UB faculty with the Task Force.

Responsibilities:

- Provide guidance and contribution to the Community Engagement and Dissemination Core
- Work with the Investigator Development core to identify mentors for early career investigators
- Facilitate partnerships and collaborations in the School of Nursing
- Provide guidance on community based participatory research
- Serve on Center of Excellence Steering Committee

Other Personnel

Project Manager

- To be named
- Effort: 6.0 Calendar Months

Responsibilities:

- Work with Center of Excellence leaders in implementing the many initiatives outlined in this proposal.
- Provide project management support for the solicitation and review of pilot studies letters of intent and full proposals
- Coordinate the quarterly meetings of the Community Advisory Board and the annual meetings of the External Advisory Committee
- Provide project management support for the Community Partnership grants
- Work with the Institute Administrator of the UB Community Health Equity Research Institute in organizing and coordinating the seminars, workshops and annual pilot studies symposium.

Other Direct Costs

Travel	\$1,500
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PI Murphy will attend the annual NIMHD Centers of Excellence grantees meeting, held at or near NIH, Bethesda, MD. We have approximated expenses for travel from Buffalo, NY to MD.

RESEARCH & RELATED BUDGET - Cumulative Budget

	Totals (\$)	
Section A, Senior/Key Person		344,448.00
Section B, Other Personnel		0.00
Total Number Other Personnel	0	
Total Salary, Wages and Fringe Benefits (A+B)		344,448.00
Section C, Equipment		0.00
Section D, Travel		7,500.00
1. Domestic	7,500.00	
2. Foreign	0.00	
Section E, Participant/Trainee Support Costs		0.00
1. Tuition/Fees/Health Insurance	0.00	
2. Stipends	0.00	
3. Travel	0.00	
4. Subsistence	0.00	
5. Other	0.00	
6. Number of Participants/Trainees	0	
Section F, Other Direct Costs		93,335.00
1. Materials and Supplies	0.00	
2. Publication Costs	0.00	
3. Consultant Services	93,335.00	
4. ADP/Computer Services	0.00	
5. Subawards/Consortium/Contractual Costs	0.00	
6. Equipment or Facility Rental/User Fees	0.00	
7. Alterations and Renovations	0.00	
8. Other 1	0.00	
9. Other 2	0.00	
10. Other 3	0.00	
11. Other 4	0.00	
12. Other 5	0.00	
13. Other 6	0.00	
14. Other 7	0.00	
15. Other 8	0.00	
16. Other 9	0.00	
17. Other 10	0.00	
Section G, Direct Costs (A thru F)		445,283.00
Section H, Indirect Costs		271,621.00

Section I, Total Direct and Indirect Costs (G + H)	716,904.00
Section J, Fee	0.00
Section K, Total Direct and Fee (I + J)	716,904.00

PHS 398 Cover Page Supplement

OMB Number: 0925-0001

Expiration Date: 01/31/2026

1. Vertebrate Animals Section

Are vertebrate animals euthanized?

☐

Yes

☒

No

If "Yes" to euthanasia

Is the method consistent with American Veterinary Medical Association (AVMA) guidelines?

☐

Yes

☐

No

If "No" to AVMA guidelines, describe method and provide scientific justification

.....

2. *Program Income Section

*Is program income anticipated during the periods for which the grant support is requested?

☐

Yes

☒

No

If you checked "yes" above (indicating that program income is anticipated), then use the format below to reflect the amount and source(s). Otherwise, leave this section blank.

*Budget Period *Anticipated Amount (\$) *Source(s)

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3. Human Embryonic Stem Cells Section

*Does the proposed project involve human embryonic stem cells? ☐ Yes ☒ No

If the proposed project involves human embryonic stem cells, list below the registration number of the specific cell line(s) from the following list: http://grants.nih.gov/stem_cells/registry/current.htm. Or, if a specific stem cell line cannot be referenced at this time, check the box indicating that one from the registry will be used:

☐ Specific stem cell line cannot be referenced at this time. One from the registry will be used.

Cell Line(s) (Example: 0004):

4. Human Fetal Tissue Section

*Does the proposed project involve human fetal tissue obtained from elective abortions? ☐ Yes ☒ No

If "yes" then provide the HFT Compliance Assurance

If "yes" then provide the HFT Sample IRB Consent Form

5. Inventions and Patents Section (Renewal applications)

*Inventions and Patents: ☐ Yes ☒ No

If the answer is "Yes" then please answer the following:

*Previously Reported: ☐ Yes ☐ No

6. Change of Investigator/Change of Institution Section

☐ Change of Project Director/Principal Investigator

Name of former Project Director/Principal Investigator

Prefix:

*First Name:

Middle Name:

*Last Name:

Suffix:

☐ Change of Grantee Institution

*Name of former institution:

PHS 3C8 Research Plan

LMB Number: 9C25-9991

Expiration Date: 91/31/2926

Introduction**1. Introduction to Application**

(for Resubmission and Revision applications)

Research Plan Section**2. Specific Aims**

Aims_Admin_Oore.pdf

3. Research Strategy*

Admin_Oore_Research_Strategy.pdf

0. Progress Report Publication 4ist**L ther Research Plan Section****5. Vertebrate Animals****6. Select Agent Research****7. Multiple PD/PI 4eadership Plan****8. Oonsortium/Oontractual Arrangements****C. 4etters of Support****19. Resource Sharing Plan(s)****11. L ther Plan(s)****12. Authentication of Key Biological and/or
Ochemical Resources****Appendix****13. Appendix**

B. Administrative Core: Organizational and Governance Structure

B1. Specific Aims

The mission of our NIMHD Center of Excellence in Investigator Development and Community Engagement (Center of Excellence) is to train and develop the next generation of health disparities investigators to perform innovative research in minority health and health disparities in partnership with our community and to the benefit of the community. The work will advance understanding of the root causes and develop and test innovative solutions to eliminate health inequities. Our vision is that these investigators will “move the needle” on health disparities so that wellness and social well-being become a reality for all people in Buffalo, including people of color who have serious, chronic, preventable diseases and higher mortality rates.

The Center of Excellence will be embedded in the UB Community Health Equity Research Institute (Health Equity Institute), providing an immediate connection with researchers in essentially all disciplines that bring expertise to perform innovative research to address the many social determinants of health (**Figure B1**). Estimates are that improving healthcare will reduce disparities in health outcomes by 10 to 20% (1-3). Thus, it is critical that research addresses the upstream factors that account for these disparities. Examples of important expertise include economics, urban planning, law and social justice, social services, education, big data analytics, epidemiology, health-related fields, policy development, basic sciences and more.



Figure B1. The Center of Excellence is embedded in the Community Health Equity Research Institute, facilitating seamless communication and partnerships with the community and each of the 12 schools of UB.

The Health Equity Institute has an Advisory Board that includes a leader from each of the 12 UB schools and several community leaders. The Dean of each UB school identified a representative, such as an Associate Dean or a faculty leader in health disparities research, to serve on the Board. This mechanism engages the entire university and important sectors of the community, providing an excellent resource for developing and maintaining relationships with community stakeholders and university expertise. We will include reports on the Center of Excellence to the Health Equity Institute Board to facilitate communication and collaboration.

Our Health Equity Institute also encompasses the UB Center for Urban Studies, which is a research, neighborhood planning and community development center focusing on the transformation of vulnerable, under-developed and marginalized neighborhoods into healthy communities controlled by its residents. The Center for Urban Studies is led by Dr. Henry Taylor, who is also an Associate Director of the Health Equity Institute and Co-I on this Center of Excellence.

The Administrative Core provides leadership and guides the overall vision of the Center of Excellence. Aims are:

Aim 1. Coordinate and manage Center of Excellence activities with a responsive governance and inclusive approach, engaging community participation in Center activities.

Aim 2. Organize and integrate core initiatives to ensure communication and synergy among cores, while providing expertise and support for maintaining compliance with policies and procedures.

Aim 3. Monitor progress toward milestones through evaluation and continuous quality improvement, while tracking key milestones for processes, productivity and impact of the work of the Center of Excellence.

B2. Significance and Environment

Partnering with the Health Equity Institute advances the mission of the Center of Excellence by leveraging the extensive reach of the Health Equity Institute. This administrative structure:

- strengthens communication throughout UB regarding the outstanding training and career development opportunity that the Center of Excellence brings to our environment
- facilitates communication to eligible faculty and postdocs to apply for pilot studies and work with us
- introduces early career faculty to mentors from multiple disciplines
- facilitates multidisciplinary collaborations
- enhances awareness of the research resources throughout the schools of the university
- links early career investigators with community partners and community collaborators.

B3. Innovation

- **Integrated Leadership.** The integrated leadership of the Administrative Core between community partners and the university leverages the nine-year partnership to which multiple stakeholders have made a continuing commitment. The Co-Director of the Center of Excellence, Pastor George Nicholas, is an influential community leader. The leadership team of each core includes community members.
- **Community-driven Research.** The research of the Health Equity Institute is community-driven. For example, the NIH-supported Igniting Hope conference series was conceived and has been conducted as a partnership with community co-investigators (4). This approach, guided by our shared values, will continue to be a theme of all our work and the work of the Center of Excellence.
- **Broadly Engaged Team Science** merges team science and community-engaged research (5). The Center of Excellence integrates multiple disciplines to nurture collaborations between researchers, community organizations, health service providers, public health agencies, and policymakers.
- **Addressing the Range of Social Determinants of Health (SDOH).** The participation of all 12 UB schools reflects our commitment to addressing the range of SDOH, including, for example, educational opportunity (School of Education), disinvested neighborhoods (School of Architecture and Planning), the criminal justice system (School of Law), etc.
- **Continuous Communication and Coordination.** With the African American Health Equity Task Force serving as an “umbrella” group, our well-attended monthly meetings are highly effective in ensuring continuous communication and coordination between the Center of Excellence and the community.

B4.1 Action Plan for Aim 1.

Aim 1. Coordinate and manage Center of Excellence activities with a responsive governance and inclusive approach, engaging community participation in Center activities.

The organizational and governance structure (**Figure B2**) is designed to have clear reporting lines, advisory groups representing key constituencies and expertise (gold boxes), integration and coordination of all components of the Center of Excellence and a reporting structure to the highest levels of university leadership, reflecting the value that the university places on this Center of Excellence and its goals.

Leadership. Center of Excellence leaders and participants have well-defined roles and responsibilities. The Leadership Team includes the Director, Co-Director, and the Core Directors. The Director and Co-Director oversee the strategic planning and direction of the Center of Excellence, guide its overall activities, and oversee the budget along with the Leadership Team.

Members of the Leadership Team:

- **Timothy Murphy MD, Director**, an accomplished physician scientist in the School of Medicine, serves as Director. As founding Director of the UB Clinical and Translational Science Institute (CTSI) and PI of the Clinical and Translational Science Award (CTSA), he established its vision in 2015 “to advance and accelerate research to reduce health disparities and improve the health of our community and the nation.” He has extensive experience as a mentor and is PI of a T35 training grant, *Training the Next Generation of Clinician Scientists* (T35 AI 089693), aligning with a major training focus of this Center of Excellence. In the first ten years of the T35 training grant, 37% of trainees are in NIH-designated groups that experience health disparities and 62% are women.

- **Pastor George Nicholas MDiv, Co-Director**, is an advocate for social justice and community revitalization. A founding member of the Concerned Clergy Coalition of Western New York, he is convener of the African American Health Equity Task Force and CEO of the Buffalo Center for Health Equity (501(c)3). He is an influential and visionary community leader.
- **Oscar Gomez MD PhD, Director, Investigator Development Core**, is a physician scientist with a longstanding commitment and experience in mentoring individuals underrepresented in health science. He is a member of the Harold Amos Medical Faculty Development program, which is dedicated to career development of people of color in medical science in the US. He was first a scholar in the program and is now a faculty advisor. He is a member of the UB Council on Inclusion in Medicine and Science Executive Committee and Associate Program Lead of the UB CTSA KL2 mentored career development program.



Figure B2. Governance structure of Center of Excellence

- **Robert Silverman PhD, Director, Community Engagement and Dissemination Core** is Professor of Urban and Regional Planning and an internationally regarded urban planning scholar whose work focuses on community development, inequity in urban communities, affordable housing, and education policy. He has worked with Buffalo East Side communities since he joined the UB faculty in 2003.

The **Steering Committee** of the Center of Excellence will serve as an internal advisory group and includes the Leadership Team in addition to the following accomplished faculty and community leaders:

- **Susan Grinslade PhD RN** is Clinical Professor in the School of Nursing and fellow in the American Academy of Nursing with expertise in public health nursing and a passion for health equity. She led the Million Hearts Initiative in Buffalo (a CDC program to reduce heart disease) facilitating a partnership between the School of Nursing and African American East Side communities.
- **Heather Orom PhD** is Associate Professor of Community Health and Health Behavior and Associate Dean for Equity, Diversity and Inclusion in the School of Public Health. Her research focuses on the causes of health disparities with a particular interest in how discrimination influences health outcomes.
- **Rita Hubbard Robinson JD** is an influential community leader and founder and CEO of NeuWater & Associates, LLC, a company focused on population health. Ms. Hubbard Robinson has been committed to the improvement of health and social determinants of health for over 30 years. She is treasurer of the Buffalo Center for Health Equity and has won numerous awards for her work in the community.
- **Henry Taylor PhD** is Professor of Urban and Regional Planning in the School of Architecture and Planning and is Founding Director for the UB Center for Urban Studies. He is a national authority in distressed urban neighborhoods and race and class issues among people of color. He recently released a comprehensive report on the state of Black Buffalo, "The Harder We Run" that is attracting widespread attention throughout our community, including elected leaders and business leaders (6).
- **Pastor Kinzer Pointer MM**, Co-Director, Investigator Development Core, is President and CEO of Greater Buffalo United Ministries and Chair, Erie County Poverty Committee. He is a mentor in the National Medical Association and has worked for the past five years with Drs. Murphy and Gomez on the T35 training grant "Training the Next Generation of Clinician Scientists." He co-teaches a course in the medical school with Dr. Henry Taylor, "Health in the Neighborhood," in which students review key literature and meet with and work with community members in their neighborhoods.

- **Carol Van Zile Tamsen PhD**, Evaluation Director, is Director of the UB Office of Curriculum, Assessment and Teaching Transformation. She is a nationally recognized expert in evaluation and assessment of educational and training programs.

Thus, the Steering Committee includes faculty from multiple disciplines (medicine, public health, nursing, urban planning, evaluation) in addition to well-connected community members. In addition to an advisory role, members of the Steering Committee will serve on mentoring committees of early-career investigators and will identify mentors from their schools for mentoring roles, working with the Investigator Development Core. Drs. Orom, Grinslade, and Taylor and Ms. Hubbard Robinson are Associate Directors of the Health Equity Institute, enhancing coordination with the Center of Excellence. The UB Provost provides full time salary support for a research administrator to the Health Equity Institute and will continue to do so (see Letter of Support). This administrator will work closely with the Center of Excellence Project Manager (see Budget).

Community Advisory Board (CAB). The Health Equity Institute has an active CAB that consists of a group of community members who share an identity, geography, history, or experiences and serve as a voice for the community regarding research, health care, inequities and more. Our Center of Excellence will work with the same CAB since the goals of the Center of Excellence and Health Equity Institute are well aligned. The CAB includes nine people of color, who all live in one of the five predominantly African American ZIP codes on the East Side. Board members serve staggered three-year terms, select their own chair and meet quarterly. The CAB provides feedback in ways to improve research in the community and will provide guidance and direction to the Center of Excellence in realizing its goals. CAB members are paid an hourly rate for their service.

External Advisory Committee will be comprised of three or four national experts who will visit Buffalo annually to review our progress and provide a detailed report.

B4.2 Action Plan for Aim 2

Aim 2. Organize and integrate core initiatives to ensure communication and synergy among cores, while providing expertise and support for maintaining compliance with policies and procedures.

The day-to-day activities of the Center of Excellence will be managed by the director and institute administrator with the active participation of the Leadership Team to ensure coordination of cores through biweekly meetings and regular communication. **Table B1** shows the frequency of meetings of the key leadership and oversight groups to facilitate efficient functioning, anticipation and amelioration of barriers, active partnership with community stakeholders and continuous improvement through constructively critical review by experts on the External Advisory Board. No changes in leadership are anticipated. However, if the PI needs to be replaced, with the involvement of four active, experienced associate directors of the Health Equity Institute, our leadership structure has a built-in succession plan.

The Steering Committee will meet monthly. Its roles include: 1) guide strategic priorities of the Center of Excellence; 2) work with the Investigator Development Core to identify mentors for early career investigators on pilot studies and subsequent projects; 3) facilitate resources and partnerships to support the goals of the Center of Excellence; 4) form subcommittees to plan and implement selected initiatives-- examples include, conferences, workshops, projects, new partnerships, etc; and 5) act as an initial point of contact for researchers to engage the Center of Excellence, given the broad reach of the committee throughout the university. The Leadership Team appoints members to the Steering Committee in consultation with the VP for Health Sciences to whom the Director reports.

We propose a monthly remote meeting with our Program Officer to ensure that our Center aligns with NIMHD priorities and to enhance communication. The Director, our community-based Co-Director, and administrator will attend. We can also invite Core Directors, depending on the preference of the Program Officer.

The roles of the Community Advisory Board and External Advisory Board are described above.

The Administrative Core will work closely with the Investigator Development Core in fostering research career development and enhancement for postdoctoral fellows, junior faculty and other early-stage investigators by providing support in organizing and administering a variety of educational opportunities. The administrator will

Table B1. Frequency of Meetings

Leadership or oversight group	Frequency of meetings
Leadership Team	every 2 weeks
Steering Committee	monthly
NIMHD Program Officer	monthly
Community Advisory Board	quarterly
External Advisory Board	annually

provide support in organizing and coordinating the didactic training outlined in Table C5 (Investigator Development Core), including the seminar series in minority health and health disparities that we will launch with invited outside speakers in addition to experts at UB. These also include an annual Pilot Studies Symposium and an Institute Research Day at which scholars will present their work. We will also facilitate awareness and coordination with valuable educational opportunities beyond our Institute in the university and the community.

Our Center of Excellence will serve as a central resource and point of information for the university and community on educational resources related to research in minority health and health disparities. Our Administrative Core will link faculty and trainees with educational and training resources by responding to requests and through our website, listserv, social media and word of mouth.

B4.3 Action Plan for Aim 3.

Aim 3. Monitor progress toward milestones through tracking and evaluation to identify opportunities for improvement.

Figure B3 is the overarching logic model that will guide our evaluation and continuous quality improvement.

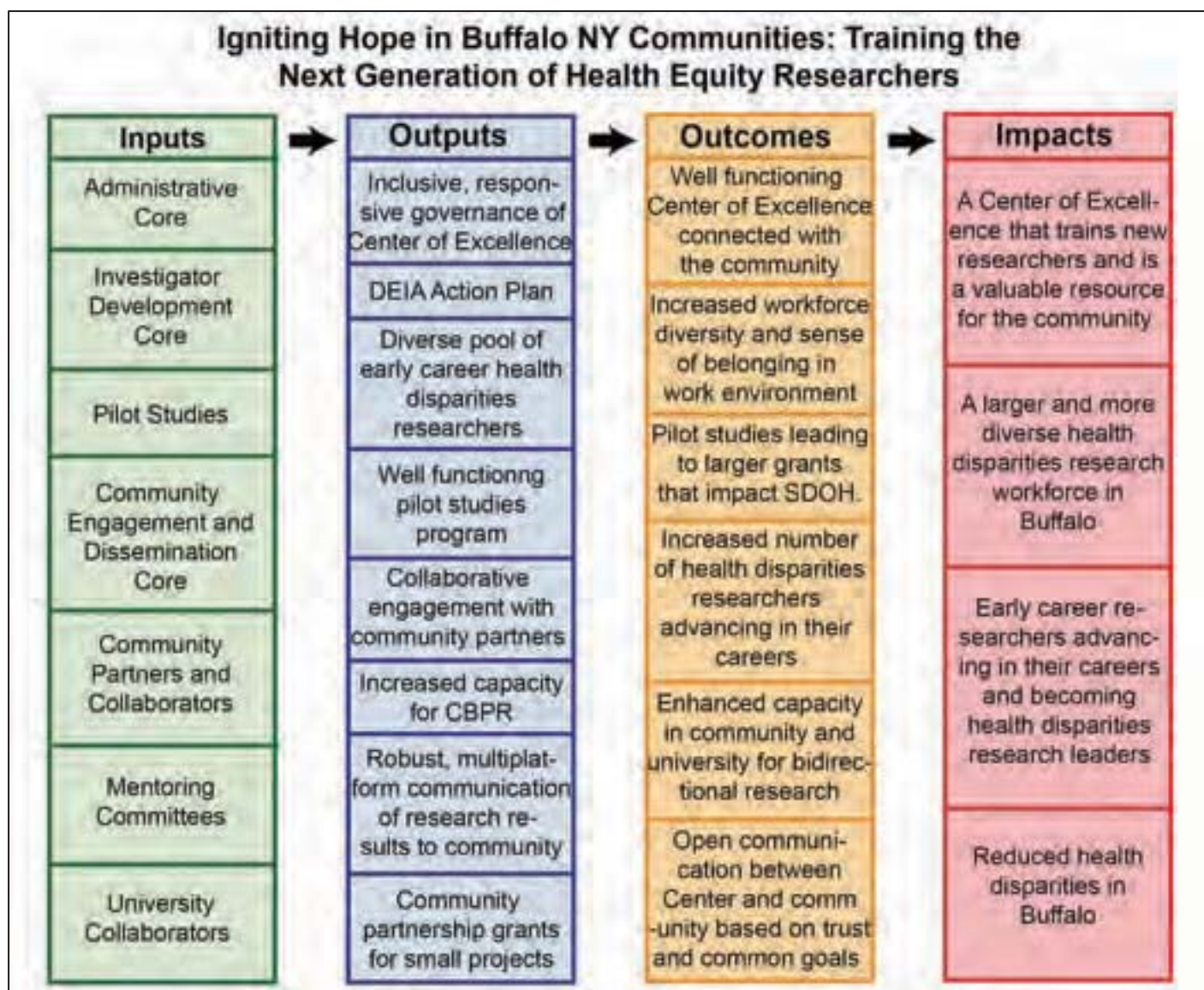


Figure B3. Logic Model for Center of Excellence. DEIA: diversity, equity, inclusion, accessibility. CBPR: community-based participatory research. SDOH: social determinants of health.

The overall evaluation of the Center of Excellence and evaluation plan for each Core are guided by the Program Evaluation Standards (3rd edition) (7). The evaluation plans have been developed using Backward Design to align aims and inputs with key project activities, milestones (short-term outcomes) and long-term impacts (8).

Through this approach, aims/inputs are aligned with desired outputs. Formative assessments of program activities are administered frequently to promote continuous improvement. Summative assessments are used to measure progress toward short-term outcomes and achievement of long-term impacts.

A detailed plan has been developed for all three cores. The evaluation plan for the Investigator Development Core is included here as an example, as page limits preclude showing the evaluation plan for each core.

This overall framework will be used to guide each pilot studies awardee to create an evaluation plan for their pilot projects (1 to 2 years), which focus on specific initiatives that will not yield the long-term impacts outlined in the overall logic model above. Thus, outcomes and impacts will be aligned with realistic goals for the projects. For example, a project may address a specific SDOH (e.g., housing). Realistic goals will be designed to measure outcomes (e.g., reduction in lead poisoning in a specific neighborhood). An effort will be made to link outcomes from work on specific SDOH with specific health outcomes to elucidate causality where possible.

Table B2. Logic Model of Investigator Development Core

Core Aims	Outputs	Short-Term Outcomes	Long-Term Impacts
Aim 1. a. Attract, mentor, and train early career investigators to perform research on health disparities and adverse SDOH. b. Fund pilot projects that address health disparities and adverse SDOH. Aim 2. a. Implement a diversity equity, inclusion, accessibility (DEIA) Action Plan. b. Increase and diversify the workforce in health disparities research. c. Create leadership pathways for early career faculty. Aim 3. Expert training/mentoring in rigorous research design that includes community-based participatory research.	1a. Recruitment of a diverse pool of early career scientists from a broad range of disciplines. 1b. Implementation of pilot studies grant program. 2a. DEIA action plan for investigators, mentors and staff. 2b. Enhanced programs to increase workforce diversity. 2c. Development of leadership pathways for early career faculty. 3. Fully trained, diverse, and effective pool of early career scientists with an established research agenda related to SDOH and interventions to benefit the local community.	Outcome 1. Fully trained, diverse, and successful junior faculty committed to DEIA. Outcome 2. Research agendas focused on solutions to health disparities and adverse SDOH, generating publications, grants and translatable knowledge/ interventions within the local community. Outcome 3. Diverse and independent scientists prepared for leadership roles in research on minority health and health disparities.	A coherent network of support to promote development of junior faculty and a culture of mentoring. Successful junior faculty engaged in research that promotes equity in health outcomes through amelioration of adverse SDOH. Diverse expert scientists in leadership roles enabling them to positively impact equity in health care and health outcomes. A body of research that addresses health disparities and adverse SDOH and includes community-based research and dissemination of findings.

Table B3. Formative Evaluation. Investigator Development Core

Activities	Measures	Timing	Use of Results
Recruit (Aim 1)	Descriptive data on number, demographics, and disciplines.	Upon recruitment.	Data that can inform improvements in faculty diversity.
Train (Aims 1 & 3)	Attendance/completion of training modules/workshops	End of each training module/workshop.	Identification of necessary improvements.
	Participant Evaluations	End of each training module or workshop.	Identification of areas for further knowledge development and faculty development. Identification of necessary improvements.
Mentor (Aims 1 & 3)	Mentoring Satisfaction and Self-Efficacy Surveys.	At the end of the first six months and the first year.	Review of efficacy of mentoring pairings. Improvement of mentoring training program.
	Interviews/focus groups with mentors and mentees.	At the end of the first year of participation.	Review of efficacy of mentoring pairings. Improvement of mentoring/training.
DEIA, Career and Leadership Development (Aim 2)	Rubric review of DEIA.	End of each year of participation.	Identification of areas for continued development.
	Survey of professional/DEIA goals and career preparation.	End of each year of participation.	Improvement of training/mentoring. Identification of areas for further development.

Fund pilot research on health disparities (Aim 1)	Number and quality of pilot proposals (rubric).	As proposals are reviewed and funded.	Improvement of training/mentoring. Identification of areas for further development.
	Number of projects that develop and assess interventions in key health disparities and adverse SDOH	Upon completion of pilot projects.	Improvement of training/mentoring. Improvement of training/support and communication of Center goals to investigators.
	Number of pilot projects that lead to publications and proposals for NIH- or other federally-funded projects.	Upon completion of pilot projects.	Improvement of training/mentoring. Identification of areas for further knowledge and career development.

Table B4. Summative Evaluation: Short-Term Outcomes. Investigator Development Core

Outcomes	Design	Measures	Timing	Analysis
Outcome 1. Fully trained, diverse, and successful junior faculty committed to DEIA.	Program Records Relevant National/Local Databases	1. Demographics of faculty engaged in relevant research. 2. Number of projects with papers and grants in preparation	Annually after completion of the pilot project.	Descriptive Statistics
Outcome 2. Research agendas focused on health disparities and adverse SDOH and generating translatable knowledge/ interventions within the local community.	Investigator Feedback Form	Number and percent of scholars with community-focused research agendas focused on health disparities and adverse SDOH (scored with rubric).	Annually after completion of the pilot project.	Descriptive Statistics
Outcome 3. Diverse and independent scientists prepared for leadership roles that will provide a platform for advancing health disparities research.	Survey CV Collection	Number and percent of participants with PI/MPI roles on relevant funded projects and established publication records.	Annually after completion of the pilot project.	Descriptive Statistics

Table B5. Summative Evaluation: Long-Term Impacts. Investigator Development Core

Impacts	Design	Measures	Timing	Analysis
A coherent network of support to promote development of early career investigators and a culture of mentoring among senior faculty.	Survey	Ratings of importance and effectiveness in training, mentoring, and professional development for career potential.	Every three years after completion of the pilot project.	Descriptive Statistics
Successful faculty engaged in research that promotes equity in research healthcare and health outcomes	National/Local Databases CV Collection	Number and percent of scholars engaged in relevant research.	Three years after completion of the pilot project.	Descriptive Statistics
A diverse group of expert scientists with strong community engagement in leadership roles that allow them to positively impact equity in research healthcare and health outcomes.	Survey CV Collection	1. Number and percent of participants in leadership roles and reporting strong community engagement. 2. Number and percent of scholars engaged in relevant research.	Every three years after completion of the pilot project.	Descriptive Statistics
A body of research that addresses health disparities and adverse SDOH and includes community-based research and dissemination of findings.	National/Local Databases CV Collection	Number and percent of scholars engaged in relevant research.	Six years after completion of the pilot project.	Descriptive Statistics

Summary and Vision

An NIMHD Center of Excellence fills a critical gap in our training environment. Our vision is the Center of Excellence will provide training, individualized mentoring, and professional development to early-stage investigators to substantially increase the number of investigators in health disparities research. Our Center will also function as a central resource and “go to” to connect research teams and community-based organizations with educational and training opportunities throughout the university and community. Thus, our Center of Excellence will have enormous impact in our environment to address root causes of health inequities and lead to sustainable system-level changes in race-based health inequities in Buffalo and nationally through sharing the innovative interventions that our investigators will develop and test.

PHS Human Subjects and Clinical Trials Information

OMB Number: 0925-0001

Expiration Date: 01/31/2026

Use of Human Specimens and/or Data

Does any of the proposed research in the application involve human specimens and/or data *

☐ Yes☒ No

Provide an explanation for any use of human specimens and/or data not considered to be human subjects research.

Are Human Subjects Involved

☐ Yes☒ No

Is the Project Exempt from Federal regulations?

☐ Yes☐ No

Exemption Number

☐ 1☐ 2☐ 3☐ 4☐ 5☐ 6☐ 7☐ 8

Other Requested Information

Delayed Onset Studies

Delayed Onset Study#	Study Title	Anticipated Clinical Trial?	Justification
The form does not have any delayed onset studies			

Bibliography: Administrative Core

1. Woolf SH. Progress In Achieving Health Equity Requires Attention To Root Causes. Health affairs. 2017;36(6):984-91. doi: 10.1377/hlthaff.2017.0197. PubMed PMID: 28583955.
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3. Hood CM, Gennuso KP, Swain GR, Catlin BB. County Health Rankings: Relationships Between Determinant Factors and Health Outcomes. Am J Prev Med. 2016;50(2):129-35. Epub 20151031. doi: 10.1016/j.amepre.2015.08.024. PubMed PMID: 26526164.
4. Murphy TF, Robinson RH, Wofford KM, Lesse AJ, Grinslade S, Taylor HL, Jr., Pointer KM, Nicholas GF, Orom H. A community-university run conference as a catalyst for addressing health disparities in an urban community. J Clin Transl Sci. 2022;6(1):e67. Epub 20220506. doi: 10.1017/cts.2022.398. PubMed PMID: 35836792; PMCID: PMC9257780.
5. Selker HP, Wilkins CH. From community engagement, to community-engaged research, to broadly engaged team science. J Clin Transl Sci. 2017;1(1):5-6. Epub 20170412. doi: 10.1017/cts.2017.1. PubMed PMID: 31660208; PMCID: PMC6798217.
6. Taylor HL, Jung, J.K., Dash, E. The Harder We Run. The State of Black Buffalo in 1990 and the Present Buffalo, NY2021. Available from: <https://right2thecity.files.wordpress.com/2021/10/taylorhl-the-harder-we-run.pdf>.
7. Yarbrough DB, Shulha LM, Hopson RK, Caruthers FA. The program evaluation standards: A guide for evaluators and evaluation users. Thousand Oaks, CA: Sage Publications, Inc.; 2010.
8. Wiggins G, McTighe, J. Understanding by Design. New York, N.Y.: Pearson; 2005.

APPLICATION FOR FEDERAL ASSISTANCE

SF 424 (R&R)

5. APPLICANT INFORMATION

UEI*: LMCJKRFW5R81

Legal Name*: The Research Foundation for SUNY on behalf of U. at Buffalo
Department: Sponsored Projects Services
Division:
Street1*: The UB Commons
Street2: 520 Lee Entrance, Suite 211
City*: Amherst
County: Erie
State*: NY: New York
Province:
Country*: USA: UNITED STATES
ZIP / Postal Code*: 14228-2567

Person to be contacted on matters involving this application

Prefix: First Name*: Middle Name: Last Name*: Suffix:
Amy Lagowski

Position/Title: Agreement Administartor
Street1*: The UB Commons
Street2: 520 Lee Entrance, Suite 211
City*: Amherst
County: Erie
State*: NY: New York
Province:
Country*: USA: UNITED STATES
ZIP / Postal Code*: 14228-2567

Phone Number*: 716-645-4419

Fax Number:

Email: amy.lagowski@buffalo.edu

7. TYPE OF APPLICANT*

X: Other (specify)

Other (Specify): Private, Non-profit

☒ Small Business Organization Type☐ Women Owned☐ Socially and Economically Disadvantaged

11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT*

Igniting Hope in Buffalo New York communities: Training the Next Generation of Health Equity Researchers

12. PROPOSED PROJECT

Start Date* Ending Date*
04/01/2024 03/31/2029

Project/Performance Site Location(s)**Project/Performance Site Primary Location**

☐ I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name: The Research Foundation for SUNY on behalf of U. at Buffalo
UEI: LMCJKRFW5R81
Street1*: The UB Commons
Street2: 520 Lee Entrance, Suite 211
City*: Amherst
County: Erie
State*: NY: New York
Province:
Country*: USA: UNITED STATES
Zip / Postal Code*: 14228-2567
Project/Performance Site Congressional District*: NY-026

Project/Performance Site Location 1

☐ I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name: UB Clinical and Translational Research Center
UEI:
Street1*: 875 Ellicott Street Buffalo
Street2:
City*: Buffalo
County:
State*: NY: New York
Province:
Country*: USA: UNITED STATES
Zip / Postal Code*: 14203-1034
Project/Performance Site Congressional District*: NY-026

Project/Performance Site Location 2

☐ I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name: UB Jacobs School of Medicine and Biomedical Sciences
UEI:
Street1*: 955 Main Street
Street2:
City*: Buffalo
County:
State*: NY: New York
Province:
Country*: USA: UNITED STATES
Zip / Postal Code*: 14203-1034
Project/Performance Site Congressional District*: NY-026

Project/Performance Site Location 3

☐ I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name: UB School of Public Health and Health Professions
UEI:
Street1*: 3435 Main Street
Street2:
City*: Buffalo
County:
State*: NY: New York
Province:
Country*: USA: UNITED STATES
Zip / Postal Code*: 14214-3099
Project/Performance Site Congressional District*: NY-026

Project/Performance Site Location 4

☐ I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name: UB School of Nursing
UEI:
Street1*: 3435 Main Street- Wende Hall
Street2:
City*: Buffalo
County:
State*: NY: New York
Province:
Country*: USA: UNITED STATES
Zip / Postal Code*: 14214-3010
Project/Performance Site Congressional District*: NY-026

Project/Performance Site Location 5

☐ I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name: UB School of Architecture and Plannning
UEI:
Street1*: 3435 Main Street- Hayes Hall
Street2:
City*: Buffalo
County:
State*: NY: New York
Province:
Country*: USA: UNITED STATES
Zip / Postal Code*: 14214-3015
Project/Performance Site Congressional District*: NY-026

Project/Performance Site Location 6

☐ I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name: UB Community Health Equity Research Institute
UEI:
Street1*: 875 Ellicott Street
Street2:
City*: Buffalo
County:
State*: NY: New York
Province:
Country*: USA: UNITED STATES
Zip / Postal Code*: 14203-1070
Project/Performance Site Congressional District*: NY-026

Project/Performance Site Location 7

☐ I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name: Buffalo Center for Health Equity
UEI:
Street1*: 257 West Genesee Street
Street2:
City*: Buffalo
County:
State*: NY: New York
Province:
Country*: USA: UNITED STATES
Zip / Postal Code*: 14202-2657
Project/Performance Site Congressional District*: NY-026

Additional Location(s)

File Name:

RESEARCH & RELATED Other Project Information

1. Are Human Subjects Involved?* ☐ Yes ☒ No	
1.a. If YES to Human Subjects Is the Project Exempt from Federal regulations? ☐ Yes ☐ No If YES, check appropriate exemption number: — 1 — 2 — 3 — 4 — 5 — 6 — 7 — 8 If NO, is the IRB review Pending? ☐ Yes ☐ No IRB Approval Date: Human Subject Assurance Number	
2. Are Vertebrate Animals Used?* ☐ Yes ☒ No	
2.a. If YES to Vertebrate Animals Is the IACUC review Pending? ☐ Yes ☐ No IACUC Approval Date: Animal Welfare Assurance Number	
3. Is proprietary/privileged information included in the application?* ☐ Yes ☒ No	
4.a. Does this project have an actual or potential impact - positive or negative - on the environment?* ☐ Yes ☒ No	
4.b. If yes, please explain: 4.c. If this project has an actual or potential impact on the environment, has an exemption been authorized or an environmental assessment (EA) or environmental impact statement (EIS) been performed? ☐ Yes ☐ No 4.d. If yes, please explain:	
5. Is the research performance site designated, or eligible to be designated, as a historic place?* ☐ Yes ☒ No	
5.a. If yes, please explain:	
6. Does this project involve activities outside the United States or partnership with international collaborators?* ☐ Yes ☒ No	
6.a. If yes, identify countries: 6.b. Optional Explanation:	
7. Project Summary/Abstract*	Filename Abstract_Comm_Engage.pdf
8. Project Narrative*	
9. Bibliography & References Cited Bibliography_CEDC.pdf	
10. Facilities & Other Resources	
11. Equipment	

The Community Engagement and Dissemination Core (CEDC) will facilitate equitable collaborative and sustainable relationships with community partners and other stakeholders. Universities have long considered community engagement as a social responsibility. A more comprehensive approach to working with communities is required to shift the narrative from viewing communities as groups of people who have needs to recognizing them as assets. Engaged communities can show institutional leaders and researchers how to better understand and address social determinants of health and increase the impact of research discoveries. This is the approach that our NIMHD Center of Excellence in Investigator Development and Community Engagement will take. Our activities will be undertaken in collaboration with our community-university-government partnership, a collaboration established in 2014 involving multiple sectors of the community. The active participation of community and elected leaders will be particularly impactful in translating the results of our research into measurable impact in health disparities in Buffalo. The CEDC will aid investigators and community co-investigators during the planning and conduct of research to build community-based participatory research capacity (Aim 1). Working with the Investigator Development Core the CEDC will work with each pilot study awardee to 1) provide training in working with the community, 2) link scholars with key community partners in the planning stages of their project, 3) develop a dissemination plan for their project to be implemented during the project and after it is completed, and 4) plan and implement an approach for their work to lead to actual benefit to the community. This often involves the planning of a larger project facilitated by the pilot study, which in many cases provides key preliminary data for the larger project. The CEDC will work with research teams in sharing results of research for diverse audiences, including non-scientific community members, policy makers and community-based stakeholders in translating research findings to promote sustainable community- and system-level change (Aim 2). We will work closely with the community-based Buffalo Center for Health Equity who have an extensive communications network with broad reach into the community. The CEDC will offer small Community Partnership Grants to African American led community-based organizations to support neighborhood projects designed to mitigate health inequities (Aim 3). This initiative arose from planning discussions with community members who expressed a clear interest in working with the Center of Excellence to build capacity and develop critical infrastructure in community-based organizations and bring immediate visible benefit to community members. Our five-year vision is that the Center of Excellence will catalyze a transformation of community-based research by expanding our research workforce, training future leaders in the field, and creating a culture change by influencing UB researchers to design research to address root causes of health inequities and work toward translating findings into sustainable, system-level changes.

RESEARCH & RELATED Senior/Key Person Profile (Expanded)

PROFILE - Project Director/Principal Investigator				
Prefix:	First Name*: Robert	Middle Name	Last Name*: Silverman	Suffix: Ph.D
Position/Title*:	Professor			
Organization Name*:	SUNY at Buffalo			
Department:	Urban and Regional Planning			
Division:				
Street1*:	329 Hayes Hall			
Street2:				
City*:	Buffalo			
County:				
State*:	NY: New York			
Province:				
Country*:	USA: UNITED STATES			
Zip / Postal Code*:	14214-8030			
Phone Number*:	(716) 829-5882		Fax Number:	
E-Mail*:	rms35@buffalo.edu			
Credential, e.g., agency login:	SILVERMAN35			
Project Role*:	Co-Investigator		Other Project Role Category:	
Degree Type:	PhD		Degree Year:	
Attach Biographical Sketch*:	File Name:			
Attach Current & Pending Support:	File Name:			

PROFILE - Senior/Key Person				
Prefix:	First Name*: Heather	Middle Name	Last Name*: Orom	Suffix: Ph.D
Position/Title*:	Associate Professor			
Organization Name*:	SUNY at Buffalo			
Department:	Community Health and Health Behavior			
Division:	School of Public Health and Health Professions			
Street1*:	304 Kimball Tower			
Street2:				
City*:	Buffalo			
County:				
State*:	NY: New York			
Province:				
Country*:	USA: UNITED STATES			
Zip / Postal Code*:	14214-8028			
Phone Number*: (716) 829-6682		Fax Number:		
E-Mail*: horom@buffalo.edu				
Credential, e.g., agency login: ay6457				
Project Role*: Co-Investigator		Other Project Role Category:		
Degree Type: PhD		Degree Year:		
Attach Biographical Sketch*:		File Name:		
Attach Current & Pending Support:		File Name:		

PROFILE - Senior/Key Person				
Prefix:	First Name*: Susan	Middle Name	Last Name*: Grinslade	Suffix: Ph.D
Position/Title*:	Associate Director			
Organization Name*:	SUNY at Buffalo			
Department:	UB Community Health Equity Research Institute			
Division:	School of Nursing			
Street1*:	210 Wende Hall			
Street2:				
City*:	Buffalo			
County:				
State*:	NY: New York			
Province:				
Country*:	USA: UNITED STATES			
Zip / Postal Code*:	14214-3079			
Phone Number*: 716-829-2234		Fax Number:		
E-Mail*: msgrinsl@buffalo.edu				
Credential, e.g., agency login: MGRINSLADE				
Project Role*: Co-Investigator		Other Project Role Category:		
Degree Type: PhD		Degree Year:		
Attach Biographical Sketch*:		File Name:		
Attach Current & Pending Support:		File Name:		

PROFILE - Senior/Key Person				
Prefix:	First Name*: Henry	Middle Name Louis	Last Name*: Taylor	Suffix: Ph.D
Position/Title*:	Professor			
Organization Name*:	SUNY at Buffalo			
Department:	Urban and Regional Planning			
Division:				
Street1*:	330A Hayes Hall			
Street2:				
City*:	Buffalo			
County:				
State*:	NY: New York			
Province:				
Country*:	USA: UNITED STATES			
Zip / Postal Code*:	14214-8030			
Phone Number*:	(716) 829-5458		Fax Number:	
E-Mail*:	htaylor@buffalo.edu			
Credential, e.g., agency login:	HLTAYLOR			
Project Role*:	Co-Investigator		Other Project Role Category:	
Degree Type:	PhD		Degree Year:	
Attach Biographical Sketch*:	File Name:			
Attach Current & Pending Support:	File Name:			

PROFILE - Senior/Key Person				
Prefix:	First Name*: Christopher	Middle Name	Last Name*: St. Vil	Suffix: Ph.D
Position/Title*:	Assistant Professor			
Organization Name*:	SUNY at Buffalo			
Department:				
Division:	UB School of Social Work			
Street1*:	625 Baldy Hall			
Street2:				
City*:	Buffalo			
County:				
State*:	NY: New York			
Province:				
Country*:	USA: UNITED STATES			
Zip / Postal Code*:	14260-1000			
Phone Number*:	716-645-9091		Fax Number:	
E-Mail*:	cstvil@buffalo.edu			
Credential, e.g., agency login:	CSTVIL			
Project Role*:	Co-Investigator		Other Project Role Category:	
Degree Type:	PhD		Degree Year:	
Attach Biographical Sketch*:	File Name:			
Attach Current & Pending Support:	File Name:			

RESEARCH & RELATED BUDGET - SECTION A & B, BUDGET PERIOD 1

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium *

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2024 End Date*: 03-31-2025 Budget Period: 1

A. Senior/Key Person									
Prefix	First Name*	Middle	Last Name*	Suffix	Project Role*	Base Salary (\$)	Calendar Months	Academic Months	Summer Months
	Name								
1.	Robert		Silverman	Ph.D	Co-investigator	129,394.00	1.0		
2.	Christopher		St. Vil	Ph.D	Co-investigator	94,057.00	0.6		
3.	Heather		Orom	Ph.D	Co-Investigator	145,349.00	0.6		
4.	Henry		Taylor	Ph.D	Co-Investigator	186,567.00	0.6		
5.	Margaret		Grinslade	Ph.D	Co-Investigator	158,472.00	0.6		
Total Funds Requested for all Senior Key Persons in the attached file									
Additional Senior Key Persons:						Total Senior/Key Person			
File Name:						37,365.00			

B. Other Personnel									
Number of Personnel*	Project Role*	Calendar Months	Academic Months	Summer Months	Requested Salary (\$)*	Fringe Benefits*	Funds Requested (\$)*		
	Post Doctoral Associates								
	Graduate Students								
	Undergraduate Students								
	Secretarial/Clerical								
0	Total Number Other Personnel	Total Other Personnel				0.00			
		Total Salary, Wages and Fringe Benefits (A+B)				37,365.00			

RESEARCH & RELATED Budget (A-B) (Funds Requested)

RESEARCH & RELATED BUDGET - SECTION C, D, & E, BUDGET PERIOD 1

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2024

End Date*: 03-31-2025

Budget Period: 1

C. Equipment Description

List items and dollar amount for each item exceeding \$5,000

Equipment Item**Funds Requested (\$)*****Total funds requested for all equipment listed in the attached file****Total Equipment 0.00****Additional Equipment:** File Name:**D. Travel****Funds Requested (\$)***

1. Domestic Travel Costs (Incl. Canada, Mexico, and U.S. Possessions)

2. Foreign Travel Costs

Total Travel Cost 0.00**E. Participant/Trainee Support Costs****Funds Requested (\$)***

1. Tuition/Fees/Health Insurance

2. Stipends

3. Travel

4. Subsistence

5. Other:

Number of Participants/Trainees**Total Participant Trainee Support Costs****0.00**

RESEARCH & RELATED Budget {C-E} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTIONS F-K, BUDGET PERIOD 1

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2024

End Date*: 03-31-2025

Budget Period: 1

F. Other Direct Costs			Funds Requested (\$)*
1. Materials and Supplies			
2. Publication Costs			
3. Consultant Services			14,000.00
4. ADP/Computer Services			
5. Subawards/Consortium/Contractual Costs			
6. Equipment or Facility Rental/User Fees			
7. Alterations and Renovations			
8. Communication Expenses			10,000.00
Total Other Direct Costs			24,000.00

G. Direct Costs	Funds Requested (\$)*
Total Direct Costs (A thru F)	61,365.00

H. Indirect Costs			
Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)*
1. Institutional IDC Cost On Campus	61.0	61,365.00	37,434.00
Total Indirect Costs			37,434.00
Cognizant Federal Agency			
(Agency Name, POC Name, and POC Phone Number)			

I. Total Direct and Indirect Costs	Funds Requested (\$)*
Total Direct and Indirect Institutional Costs (G + H)	98,799.00

J. Fee	Funds Requested (\$)*

K. Total Costs and Fee	Funds Requested (\$)*
	98,799.00

L. Budget Justification*	File Name: Budget_Justification-Community_Engagement.pdf
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RESEARCH & RELATED Budget {F-K} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTION A & B, BUDGET PERIOD 2

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium *

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2025 End Date*: 03-31-2026 Budget Period: 2

A. Senior/Key Person													
Prefix	First Name*	Middle	Last Name*	Suffix	Project Role*	Base	Calendar	Academic	Summer	Requested	Fringe	Funds Requested (\$)*	
		Name				Salary (\$)	Months	Months	Months	Salary (\$)*	Benefits (\$)*		
1.	Robert		Silverman	Ph.D	Co-investigator	131,981.00		1.0		7,189.00	4,805.00	11,994.00	
2.	Christopher		St. Vil	Ph.D	Co-investigator	95,939.00		0.6		3,135.00	2,095.00	5,230.00	
3.	Heather		Orom	Ph.D	Co-Investigator	148,256.00	0.6			3,634.00	2,429.00	6,063.00	
4.	Henry		Taylor	Ph.D	Co-investigator	190,298.00	0.6			4,664.00	3,117.00	7,781.00	
5.	Margaret	Susan	Grinslade	Ph.D	Co-investigator	161,641.00	0.6			3,962.00	2,648.00	6,610.00	
Total Funds Requested for all Senior Key Persons in the attached file													
Additional Senior Key Persons:											Total Senior/Key Person		37,678.00
File Name:													

B. Other Personnel									
Number of Personnel*	Project Role*	Calendar Months	Academic Months	Summer Months	Requested Salary (\$)*	Fringe Benefits*	Funds Requested (\$)*		
	Post Doctoral Associates								
	Graduate Students								
	Undergraduate Students								
	Secretarial/Clerical								
0	Total Number Other Personnel				Total Other Personnel		0.00		
					Total Salary, Wages and Fringe Benefits (A+B)		37,678.00		

RESEARCH & RELATED Budget (A-B) (Funds Requested)

RESEARCH & RELATED BUDGET - SECTION C, D, & E, BUDGET PERIOD 2

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2025

End Date*: 03-31-2026

Budget Period: 2

C. Equipment Description

List items and dollar amount for each item exceeding \$5,000

Equipment Item

Funds Requested (\$)*

Total funds requested for all equipment listed in the attached file

Total Equipment 0.00

Additional Equipment: File Name:

D. Travel

Funds Requested (\$)*

1. Domestic Travel Costs (Incl. Canada, Mexico, and U.S. Possessions)

2. Foreign Travel Costs

Total Travel Cost 0.00

E. Participant/Trainee Support Costs

Funds Requested (\$)*

1. Tuition/Fees/Health Insurance

2. Stipends

3. Travel

4. Subsistence

5. Other:

Number of Participants/Trainees

Total Participant Trainee Support Costs

0.00

RESEARCH & RELATED Budget {C-E} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTIONS F-K, BUDGET PERIOD 2

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2025

End Date*: 03-31-2026

Budget Period: 2

F. Other Direct Costs	Funds Requested (\$)*
1. Materials and Supplies	
2. Publication Costs	
3. Consultant Services	14,000.00
4. ADP/Computer Services	
5. Subawards/Consortium/Contractual Costs	
6. Equipment or Facility Rental/User Fees	
7. Alterations and Renovations	
8. Communication Expenses	10,000.00
Total Other Direct Costs	24,000.00

G. Direct Costs	Funds Requested (\$)*
Total Direct Costs (A thru F)	61,678.00

H. Indirect Costs			
Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)*
1. Institutional IDC Cost On Campus	61.0	61,564.00	37,624.00
Total Indirect Costs			37,624.00
Cognizant Federal Agency			
(Agency Name, POC Name, and POC Phone Number)			

I. Total Direct and Indirect Costs	Funds Requested (\$)*
Total Direct and Indirect Institutional Costs (G + H)	99,302.00

J. Fee	Funds Requested (\$)*

K. Total Costs and Fee	Funds Requested (\$)*
	99,302.00

L. Budget Justification*	File Name: Budget_Justification-Community_Engagement.pdf
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RESEARCH & RELATED Budget {F-K} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTION A & B, BUDGET PERIOD 3

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium *

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2026 End Date*: 03-31-2027 Budget Period: 3

A. Senior/Key Person												
Prefix	First Name*	Middle	Last Name*	Suffix	Project Role*	Base	Calendar	Academic	Summer	Requested	Fringe	Funds Requested (\$)*
		Name				Salary (\$)	Months	Months	Months	Salary (\$)*	Benefits (\$)*	
1.	Robert		Silverman	Ph.D	Co-investigator	134,621.00		1.0		7,189.00	4,909.00	12,098.00
2.	Christopher		St. Vil	Ph.D	Co-investigator	97,857.00		0.6		3,135.00	2,141.00	5,276.00
3.	Heather		Orom	Ph.D	Co-Investigator	151,221.00	0.6			3,634.00	2,481.00	6,115.00
4.	Henry		Taylor	Ph.D	Co-investigator	194,104.00	0.6			4,664.00	3,185.00	7,849.00
5.	Margaret	Susan	Grinslade	Ph.D	Co-investigator	164,874.00	0.6			3,962.00	2,705.00	6,667.00
Total Funds Requested for all Senior Key Persons in the attached file												
Additional Senior Key Persons: File Name:												38,005.00
Total Senior/Key Person												

B. Other Personnel									
Number of Personnel*	Project Role*	Calendar Months	Academic Months	Summer Months	Requested Salary (\$)*	Fringe Benefits*	Funds Requested (\$)*		
	Post Doctoral Associates								
	Graduate Students								
	Undergraduate Students								
	Secretarial/Clerical								
0	Total Number Other Personnel				Total Other Personnel		0.00		
					Total Salary, Wages and Fringe Benefits (A+B)		38,005.00		

RESEARCH & RELATED Budget (A-B) (Funds Requested)

RESEARCH & RELATED BUDGET - SECTION C, D, & E, BUDGET PERIOD 3

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2026

End Date*: 03-31-2027

Budget Period: 3

C. Equipment Description

List items and dollar amount for each item exceeding \$5,000

Equipment Item

Funds Requested (\$)*

Total funds requested for all equipment listed in the attached file

Total Equipment 0.00

Additional Equipment: File Name:

D. Travel

Funds Requested (\$)*

1. Domestic Travel Costs (Incl. Canada, Mexico, and U.S. Possessions)

2. Foreign Travel Costs

Total Travel Cost 0.00

E. Participant/Trainee Support Costs

Funds Requested (\$)*

1. Tuition/Fees/Health Insurance

2. Stipends

3. Travel

4. Subsistence

5. Other:

Number of Participants/Trainees

Total Participant Trainee Support Costs

0.00

RESEARCH & RELATED Budget {C-E} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTIONS F-K, BUDGET PERIOD 3

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2026

End Date*: 03-31-2027

Budget Period: 3

F. Other Direct Costs	Funds Requested (\$)*
1. Materials and Supplies	
2. Publication Costs	
3. Consultant Services	14,000.00
4. ADP/Computer Services	
5. Subawards/Consortium/Contractual Costs	
6. Equipment or Facility Rental/User Fees	
7. Alterations and Renovations	
8. Communication Expenses	10,000.00
Total Other Direct Costs	24,000.00

G. Direct Costs	Funds Requested (\$)*
Total Direct Costs (A thru F)	62,005.00

H. Indirect Costs			
Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)*
1. Institutional IDC Cost On Campus	61.0	62,005.00	37,823.00
Total Indirect Costs			37,823.00
Cognizant Federal Agency			
(Agency Name, POC Name, and POC Phone Number)			

I. Total Direct and Indirect Costs	Funds Requested (\$)*
Total Direct and Indirect Institutional Costs (G + H)	99,828.00

J. Fee	Funds Requested (\$)*

K. Total Costs and Fee	Funds Requested (\$)*
	99,828.00

L. Budget Justification*	File Name: Budget_Justification-Community_Engagement.pdf
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RESEARCH & RELATED Budget {F-K} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTION A & B, BUDGET PERIOD 4

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium *

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2027 End Date*: 03-31-2028 Budget Period: 4

A. Senior/Key Person									
Prefix First Name*	Middle Name	Last Name*	Suffix	Project Role*	Base Salary (\$)	Calendar Months	Academic Months	Summer Months	Funds Requested (\$)*
1. Robert		Silverman	Ph.D	Co-investigator	137,313.00	1.0		7,189.00	12,098.00
2. Christopher		St. Vil	Ph.D	Co-investigator	99,814.00	0.6		3,135.00	5,276.00
3. Heather		Orom	Ph.D	Co-Investigator	154,246.00	0.6		3,634.00	6,115.00
4. Henry		Taylor	Ph.D	Co-Investigator	197,986.00	0.6		4,664.00	7,849.00
5. Margaret		Grinslade	Ph.D	Co-Investigator	168,171.00	0.6		3,962.00	6,667.00
Total Funds Requested for all Senior Key Persons in the attached file									
Additional Senior Key Persons: File Name:									38,005.00

B. Other Personnel						
Number of Personnel*	Project Role*	Calendar Months	Academic Months	Summer Months	Requested Salary (\$)*	Fringe Benefits* Funds Requested (\$)*
	Post Doctoral Associates					
	Graduate Students					
	Undergraduate Students					
	Secretarial/Clerical					
0	Total Number Other Personnel				Total Other Personnel	0.00
					Total Salary, Wages and Fringe Benefits (A+B)	
					38,005.00	

RESEARCH & RELATED Budget (A-B) (Funds Requested)

RESEARCH & RELATED BUDGET - SECTION C, D, & E, BUDGET PERIOD 4

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2027

End Date*: 03-31-2028

Budget Period: 4

C. Equipment Description		Funds Requested (\$)*
List items and dollar amount for each item exceeding \$5,000		
Equipment Item		
Total funds requested for all equipment listed in the attached file		
Total Equipment		0.00
Additional Equipment: File Name:		

D. Travel	Funds Requested (\$)*
1. Domestic Travel Costs (Incl. Canada, Mexico, and U.S. Possessions)	
2. Foreign Travel Costs	
Total Travel Cost	0.00

E. Participant/Trainee Support Costs	Funds Requested (\$)*
1. Tuition/Fees/Health Insurance	
2. Stipends	
3. Travel	
4. Subsistence	
5. Other:	
Number of Participants/Trainees	
Total Participant Trainee Support Costs	0.00

RESEARCH & RELATED Budget {C-E} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTIONS F-K, BUDGET PERIOD 4

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2027

End Date*: 03-31-2028

Budget Period: 4

F. Other Direct Costs	Funds Requested (\$)*
1. Materials and Supplies	
2. Publication Costs	
3. Consultant Services	14,000.00
4. ADP/Computer Services	
5. Subawards/Consortium/Contractual Costs	
6. Equipment or Facility Rental/User Fees	
7. Alterations and Renovations	
8. Communication Expenses	10,000.00
Total Other Direct Costs	24,000.00

G. Direct Costs	Funds Requested (\$)*
Total Direct Costs (A thru F)	62,005.00

H. Indirect Costs			
Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)*
1. Institutional IDC Cost On Campus	61.0	62,005.00	37,823.00
Total Indirect Costs			37,823.00
Cognizant Federal Agency			
(Agency Name, POC Name, and POC Phone Number)			

I. Total Direct and Indirect Costs	Funds Requested (\$)*
Total Direct and Indirect Institutional Costs (G + H)	99,828.00

J. Fee	Funds Requested (\$)*

K. Total Costs and Fee	Funds Requested (\$)*
	99,828.00

L. Budget Justification*	File Name: Budget_Justification-Community_Engagement.pdf
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RESEARCH & RELATED Budget {F-K} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTION A & B, BUDGET PERIOD 5

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2028 End Date*: 03-31-2029 Budget Period: 5

A. Senior/Key Person												
Prefix	First Name*	Middle	Last Name*	Suffix	Project Role*	Base	Calendar	Academic	Summer	Requested	Fringe	Funds Requested (\$)*
		Name				Salary (\$)	Months	Months	Months	Salary (\$)*	Benefits (\$)*	
1.	Robert		Silverman	Ph.D	Co-investigator	137,313.00	1.0			7,189.00	4,909.00	12,098.00
2.	Christopher		St. Vil	Ph.D	Co-investigator	99,814.00	0.6			3,135.00	2,141.00	5,276.00
3.	Heather		Orom	Ph.D	Co-Investigator	154,246.00	0.6			3,634.00	2,481.00	6,115.00
4.	Henry		Taylor	Ph.D	Co-investigator	197,986.00	0.6			4,664.00	3,185.00	7,849.00
5.	Margaret	Susan	Grinslade	Ph.D	Co-investigator	168,171.00	0.6			3,962.00	2,705.00	6,667.00
Total Funds Requested for all Senior Key Persons in the attached file												
Additional Senior Key Persons: File Name:												38,005.00
Total Senior/Key Person												

B. Other Personnel									
Number of Personnel*	Project Role*	Calendar Months	Academic Months	Summer Months	Requested Salary (\$)*	Fringe Benefits*	Funds Requested (\$)*		
	Post Doctoral Associates								
	Graduate Students								
	Undergraduate Students								
	Secretarial/Clerical								
0	Total Number Other Personnel				Total Other Personnel		0.00		
					Total Salary, Wages and Fringe Benefits (A+B)		38,005.00		

RESEARCH & RELATED Budget (A-B) (Funds Requested)

RESEARCH & RELATED BUDGET - SECTION C, D, & E, BUDGET PERIOD 5

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2028

End Date*: 03-31-2029

Budget Period: 5

C. Equipment Description

List items and dollar amount for each item exceeding \$5,000

Equipment Item**Funds Requested (\$)*****Total funds requested for all equipment listed in the attached file****Total Equipment 0.00****Additional Equipment:** File Name:**D. Travel****Funds Requested (\$)***

1. Domestic Travel Costs (Incl. Canada, Mexico, and U.S. Possessions)

2. Foreign Travel Costs

Total Travel Cost 0.00**E. Participant/Trainee Support Costs****Funds Requested (\$)***

1. Tuition/Fees/Health Insurance

2. Stipends

3. Travel

4. Subsistence

5. Other:

Number of Participants/Trainees**Total Participant Trainee Support Costs****0.00**

RESEARCH & RELATED Budget {C-E} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTIONS F-K, BUDGET PERIOD 5

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2028

End Date*: 03-31-2029

Budget Period: 5

F. Other Direct Costs	Funds Requested (\$)*
1. Materials and Supplies	
2. Publication Costs	
3. Consultant Services	14,000.00
4. ADP/Computer Services	
5. Subawards/Consortium/Contractual Costs	
6. Equipment or Facility Rental/User Fees	
7. Alterations and Renovations	
8. Communication Expenses	10,000.00
Total Other Direct Costs	24,000.00

G. Direct Costs	Funds Requested (\$)*
Total Direct Costs (A thru F)	62,005.00

H. Indirect Costs			
Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)*
1. Institutional IDC Cost On Campus	61.0	62,005.00	37,823.00
Total Indirect Costs			37,823.00
Cognizant Federal Agency			
(Agency Name, POC Name, and POC Phone Number)			

I. Total Direct and Indirect Costs	Funds Requested (\$)*
Total Direct and Indirect Institutional Costs (G + H)	99,828.00

J. Fee	Funds Requested (\$)*

K. Total Costs and Fee	Funds Requested (\$)*
	99,828.00

L. Budget Justification*	File Name: Budget_Justification-Community_Engagement.pdf
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RESEARCH & RELATED Budget {F-K} (Funds Requested)

Budget Justification: Community Engagement and Dissemination Core

NOTE: We share, with approval of the NIH grants management specialist, that we have committed \$794,696 in institutional support vis personnel efforts. It was our intent to include key personnel from multiple disciplines as well as compensate community partners equally to faculty. With this purpose, and \$300,000 committed to pilot awards, we sought support from the university to maintain a balanced and robust budget.

A. Personnel Salaries and Wages

Senior/Key Personnel

Robert Silverman, PhD

- Director, Community Engagement and Dissemination Core
- Effort: 1.0 academic months (Institutional support years 1-5: 0.50 academic months)

Dr. Silverman is Professor of Urban and Regional Planning in the School of Architecture and Planning. He is an internationally regarded urban planning scholar whose work focuses on community development, inequity in urban communities, affordable housing, and education policy. He has worked closely with Buffalo East Side Communities since he joined the UB faculty in 2003.

Responsibilities

- Lead the Community Engagement and Dissemination Core
- Facilitate linking of pilot studies awardees with community partners
- Work with Buffalo Center for Health Equity on dissemination of research results to community
- Work with Administrative Core in reviewing and managing the Community Partnership grants

Stan Martin, MM

- Co-Director, Community Engagement and Dissemination Core
- Effort: Independent Contractor

Stan Martin is Co-Director, Buffalo Office Director and Senior Trainer at Ciccattelli Associates Inc. He directs a five-year Racial and Ethnic Approaches to Community Health (REACH) grant from the CDC that focuses on the promotion of tobacco-free living, improved nutrition and community support for breastfeeding, and increased access to health care in Buffalo East Side neighborhoods. His group holds frequent community events, workshops, and informational sessions with community members.

Responsibilities:

- Co-Director of Community Engagement and Dissemination Core (CEDC)
- Provide guidance and contribution to CEDC
- Facilitate community conversations to help guide pilot studies program
- Serve on Center of Excellence Steering Committee

Henry Taylor, PhD

- Co-Investigator, Community Engagement and Dissemination Core
- Co-Investigator, Investigator Development Core
- Effort: 0.60 calendar months (Institutional support years 1-5: 0.30 calendar months)

Dr. Taylor is Professor of Urban and Regional Planning, School of Architecture and Planning, Director of the Center for Urban Studies; and Associate Director, UB Community Health Equity Research Institute. His areas of expertise include urban development, housing, gentrification, underdeveloped neighborhoods, shrinking cities, race and class, and U.S.-Cuba relations. His research focuses on a historical and contemporary analysis of underdeveloped urban neighborhoods, social isolation, and race and class issues among people of color, especially African Americans and Latinos. Dr. Taylor designed and conducts the *Urban Internship Program*, which creates opportunities for graduate and undergraduate students to become involved in neighborhood redevelopment initiatives and research projects. He has trained

numerous students in this program over the years. He is also the Co-leader of the CTSI Workshop series in Health Equity.

Responsibilities:

- Provide guidance and contribution to the Community Engagement and Dissemination Core
- Provide guidance and contribution to the Investigator Development Core
- Serve on Center of Excellence Steering Committee
- Serve as Center of Excellence advocate to selected pilot studies awardees
- Facilitate partnerships and collaborations in the School of Architecture and Planning
- Help identify mentors for pilot studies awardees as needed

Heather Orom, PhD

- Co-Investigator, Community Engagement and Dissemination Core
- Effort: 0.60 calendar months (Institutional support years 1-5: 0.30 calendar months)

Dr. Orom is Associate Professor of Community Health and Health Behavior and Associate Dean for Equity, Diversity and Inclusion in the School of Public Health. Her research focuses on the causes of health disparities with a particular interest in how discrimination influences health outcomes. Dr. Orom has led many projects and has collaborated on many projects that have advanced understanding of health inequities. She engages in applied health equity research for local community organizations, assisting with evaluation and other research needs. Dr. Orom is an Associate Director of the Community Health Equity Research Institute

Responsibilities:

- Provide guidance and contribution to the Community Engagement and Dissemination Core
- Work with the Investigator Development core to identify mentors for early career investigators
- Facilitate partnerships and collaborations in the School of Public Health and Health Professions
- Serve on Center of Excellence Steering Committee

Susan Grinslade, PhD, RN

- Co-Investigator, Community Engagement and Dissemination Core
- Effort: 0.60 calendar months (Institutional support years 1-5: 0.30 calendar months)

Dr. Grinslade is Clinical Professor in the School of Nursing and fellow in the American Academy of Nursing with expertise in public health nursing and a passion for health equity. She is also an Associate Director of the Community Health Equity Research Institute. She led the Million Hearts Initiative in Buffalo (a CDC program to reduce heart disease) facilitating a partnership between the School of Nursing and African American East Side communities. She has particular expertise in community based participatory research. Dr. Grinslade was an original member of the African American Health Equity Task Force and was instrumental in connecting UB faculty with the Task Force.

Responsibilities:

- Provide guidance and contribution to the Community Engagement and Dissemination Core
- Work with the Investigator Development core to identify mentors for early career investigators
- Facilitate partnerships and collaborations in the School of Nursing
- Provide guidance on community based participatory research
- Serve on Center of Excellence Steering Committee

Christopher St. Vil, PhD

- Co-Investigator, Community Engagement and Dissemination Core
- Effort: 0.60 academic months (Institutional support years 1-5: 0.30 academic months)

Dr. St.Vil is Associate Professor in the School of Social Work. He is an expert on trauma and victims of violent injury, masculinities and health, gun violence, risk-taking attitudes and social welfare inequities in

African American communities. Dr. St. Vil leads the SNUG program at Erie County Medical Center, the safety net hospital in Buffalo. SNUG is an evidence-based street outreach program, which treats gun violence like a disease by identifying its causes and interrupting its transmission. The SNUG team develops and implements risk-reduction strategies to reduce involvement with gun violence with the goal of saving lives and helping individuals turn their lives around.

Responsibilities:

- Provide guidance and contribution to the Community Engagement and Dissemination Core
- Work with the Investigator Development core to identify mentors for early career investigators
- Facilitate partnerships and collaborations in the School of Social Work

Kelly Wofford, MS

- Collaborator, Community Engagement and Dissemination Core
- Effort: Independent Contractor

Kelly Wofford is Director, Office of Health Equity in the Erie County Department of Health. Before joining the Erie County Department of Health, she was the Community Engagement Coordinator of the UB School of Nursing and the Director of Community Relations for the Erie County Medical Center. She has a particular interest in mental health equity and is an active participant in the African American Health Equity Task Force.

Responsibilities:

- Provide guidance and contribution to the Community Engagement and Dissemination Core
- Work with the Investigator Development core to identify mentors for early career investigators
- Facilitate partnerships with community members and organizations
- Work with the Center of Excellence on developing strategies to implement policy changes based on results of research as appropriate based on results

Other Personnel

Other Direct Costs

Communication expenses \$10,000

Dissemination of research results and communication with community members is a critical goal of our community Engagement and Dissemination Core. Expenses will be for printed material and online and social media strategies of reaching our community audience.

Data Management and Sharing

No costs to be incurred. Campus resources will be utilized.

Fringe Benefits

Fringe benefit rates are based on the applicable state and federally negotiated rates."

Indirect Costs

The indirect costs are calculated at the University at Buffalo predetermined Facilities and Administrative (F&A) cost rate of MTDC per DHHS agreement dated 04/27/2023.

RESEARCH & RELATED BUDGET - Cumulative Budget

	Totals (\$)	
Section A, Senior/Key Person		18. ,058k00
Section B, Other Personnel		0k00
Total Number of Other Personnel	0	
Total Salary, Wages and Fringe Benefits (A+B)		18. ,058k00
Section C, Equipment		0k00
Section D, Travel		0k00
1. Domestic	0k00	
2. Foreign	0k00	
Section E, Participant/Trainee Support Costs		0k00
1. Tuition/Fees/Health Insurance	0.00	
2. Stipends	0k00	
3. Travel	0k00	
4. Subsistence	0k00	
5. Other	0k00	
6. Number of Participants/Trainees	0	
Section F, Other Direct Costs		120,000k00
1. Materials and Supplies	0k00	
2. Publication Costs	0k00	
3. Consultant Services	90,000k00	
4. ADP/Computer Services	0k00	
5. Subgrants/Consortium /Contractual Costs	0k00	
6. Equipment or Facility Rental/User Fees	0k00	
9. Alterations and Renovations	0k00	
8. Other 1	50,000k00	
. Other 2	0k00	
10. Other 3	0k00	
11. Other 4	0k00	
12. Other 5	0k00	
13. Other 6	0k00	
14. Other 9	0k00	
15. Other 8	0k00	
16. Other .	0k00	
19. Other 10	0k00	
Section G, Direct Costs (A thru F)		30. ,058k00
Section H, Indirect Costs		188,529k00

Section I, Total Direct and Indirect Costs (G q H)	4. 9,585,000
Section J, Fee	0.00
Section K, Total Direct and Fee (I q J)	4. 9,585,000

PHS 398 Cover Page Supplement

OMB Number: 0925-0001

Expiration Date: 01/31/2026

1. Vertebrate Animals Section

Are vertebrate animals euthanized? ☐ Yes ☒ No

If "Yes" to euthanasia

Is the method consistent with American Veterinary Medical Association (AVMA) guidelines?

☐ Yes ☐ No

If "No" to AVMA guidelines, describe method and provide scientific justification

.....

2. *Program Income Section

*Is program income anticipated during the periods for which the grant support is requested?

☐ Yes ☒ No

If you checked "yes" above (indicating that program income is anticipated), then use the format below to reflect the amount and source(s). Otherwise, leave this section blank.

*Budget Period	*Anticipated Amount (\$)	*Source(s)
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PHS 398 Cover Page Supplement

3. Human Embryonic Stem Cells Section

*Does the proposed project involve human embryonic stem cells? ☐ Yes ☒ No

If the proposed project involves human embryonic stem cells, list below the registration number of the specific cell line(s) from the following list: http://grants.nih.gov/stem_cells/registry/current.htm. Or, if a specific stem cell line cannot be referenced at this time, check the box indicating that one from the registry will be used:

☐ Specific stem cell line cannot be referenced at this time. One from the registry will be used.

Cell Line(s) (Example: 0004):

4. Human Fetal Tissue Section

*Does the proposed project involve human fetal tissue obtained from elective abortions? ☐ Yes ☒ No

If "yes" then provide the HFT Compliance Assurance

If "yes" then provide the HFT Sample IRB Consent Form

5. Inventions and Patents Section (Renewal applications)

*Inventions and Patents: ☐ Yes ☒ No

If the answer is "Yes" then please answer the following:

*Previously Reported: ☐ Yes ☐ No

6. Change of Investigator/Change of Institution Section

☐ Change of Project Director/Principal Investigator

Name of former Project Director/Principal Investigator

Prefix:

*First Name:

Middle Name:

*Last Name:

Suffix:

☐ Change of Grantee Institution

*Name of former institution:

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Introduction

1. Introduction to Application

(for Resubmission and Revision applications)

Research Plan Section

2. Specific Aims

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AppendiH

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D. Community Engagement and Dissemination Core

D1. Specific Aims

The Community Engagement and Dissemination Core (CEDC) will facilitate equitable collaborative and sustainable relationships with community partners and other stakeholders. Our approach to community-based participatory research (CBPR) is informed by the broad literature on participatory action research and CEDC team members' experience with praxis. The CEDC will have two foci encapsulated in Aims 1 and 2. Aim 1 activities are designed to aid university-based and community-based investigators (pilot studies PIs and Co-Is) to build CBPR capacity. Simultaneously, in Aim 2 the CEDC will coordinate dissemination of activities with investigators, community members, community-based organizations, service organizations, policymakers, and the scientific community with a goal to facilitate the translation of findings into sustainable community and system-level changes. To do this, the CEDC will use community organizing techniques to link the dissemination of research results to grassroots efforts to translate those results into policy change at the local level and beyond. Aim 3 resulted directly from the planning discussions for this proposal to fund small grants to community-based organizations to support neighborhood projects designed to mitigate specific inequities.

Our activities will be done in collaboration with the African American Health Equity Task Force (Task Force), a collaboration established in 2014 involving multiple sectors of the community (**Figure D1**). The active participation of community and elected leaders will be particularly impactful in translating the results of our research into measurable impact in health disparities in Buffalo, NY (see Overall).



Figure D1. African American Health Equity Task Force

The CEDC will accomplish the following Aims:

Aim 1. Aid investigators and community co-investigators during the planning and conduct of research to build community-based participatory research (CBPR) capacity.

Aim 2. Work with research teams in sharing results of research for diverse audiences, including non-scientific community members, policy makers and community-based stakeholders in translating research findings to promote sustainable community- and system-level change.

Aim 3. Offer small Community Partnership Grants to African American led community-based organizations to support neighborhood projects designed to mitigate health inequities.

- This initiative arose from planning discussions with community members who expressed a clear interest in working with the Center of Excellence to build capacity and develop critical infrastructure in community-based organizations and bring immediate visible benefit to community members.

D2. Significance

The traditional tripartite mission of academic health centers of education, clinical care and research does not address the most important factors accounting for shorter life expectancy and poorer health in communities of color. Socioeconomic, environmental and geographic factors play vital roles in population health. Thus, addressing the social determinants of health (SDOH) and equity where their patients live, work and play is the fourth fundamental component of the mission of academic health centers. For far too long, academic health centers and universities viewed communities as people who have needs and working with communities was viewed as solely a social responsibility. Our proposal takes a comprehensive approach to working with communities, wherein we recognize the community is an asset to show institutional leaders and researchers how to understand and address SDOH, advance trainees' ability to provide care, and increase the impact of our research discoveries (2, 3). Our approach is based on this principle.

The Community Engagement and Dissemination Core (CEDC) has three particularly distinctive features. First, the CEDC team's work is guided by the *participatory action research (PAR) paradigm*, which focuses on linking community-based research to community organizing activities (4). The goal of PAR is to use collaborative, non-hierarchical research designs to promote social change and eradicate inequality in society. This philosophy where community engagement is built into empirical research methods and community organizing activities growing out of them is embedded in the CEDC's work (5). We view research projects and community organizing activities as iterative, a distinguishing feature of our approach to community-based participatory research (CBPR). We view the PAR paradigm as a guiding principle (6-9).

The second distinguishing feature of the CEDC is an *intentionally interdisciplinary composition*, including members from academia, professional practice and the broad community. Members of the team come from the health sciences, public health, social work, urban planning and aligned fields. An interdisciplinary team facilitates communication between researchers, practitioners, community members and other stakeholders. This type of 'participatory interdisciplinarity' has been identified as a critical dimension of research and program design to break down barriers to translating knowledge into policy interventions (10). In essence, the existence of an interdisciplinary team facilitates the dissemination of research results and other products from the CEDC's work in a format devoid of jargon and technical language and accessible to a broad audience.

The third distinguishing feature of the CEDC is a commitment to *empowering members of the African American community* in Buffalo across research and community organizing activities. A central tenant is to embed community members as co-investigators and collaborators on research and leverage results to enhance community organizing efforts. We draw from community organizing techniques focused on community empowerment and grassroots leadership development (9,10,11,12) to pursue this goal. The partnership of the Center of Excellence with the community-based Buffalo Center for Health Equity is a key asset in this regard in view of the broad reach into many sectors of the Buffalo community enabling effective advocacy for change.

D3. Innovation

Our model is based on a three-pronged approach to community engagement.

- ***Infusing members of the African American community into the research process*** is the first prong (Aim 1) to strengthen research design by grounding it in the context of the African American experience. Fostering bidirectional conversations between university and community investigators adds dimension to research design, analysis, and strategies for disseminating research results. The CEDC will play a central role in building CBPR capacity and bidirectional interactions between investigators and community co-investigators.
- ***Building community organizing capacity in the African American community*** is the second prong (Aim 2), which focuses on linking the dissemination of research results to policy change to address race-based health inequities in Buffalo. This goal extends beyond immediate benefits from research results and has broader implications for capacity building and leadership development in African American civic organizations, enhancing levels of empowerment and community control in local policy domains. The broad reach of the Buffalo Center for Equity into the community and their experience in advocacy will substantially increase the likelihood that our work will lead to changes in policy and ultimately systemic change.
- ***Building the capacity of African American led community-based organizations*** is the third prong (Aim 3), which focuses on. small Community Partnership Grants awarded to these organizations to support the implementation of applied neighborhood projects designed to reduce health inequities. Small grants will bridge an important gap in the implementation of projects and programs aimed at addressing health inequities and bring visible benefit directly to people living East Side neighborhoods.

These three prongs are iterative and mutually reinforcing. The fusion of CBPR capacity building in research, community organizing in the African American community and the development of projects in African American led community-based organizations answers the call for methodological innovations that improve the translation and dissemination of research on health inequities (2, 11, 12).

Evaluation tools for community-based research on health inequities. There is a lack of in-depth analysis of the social transformative potential of CBPR (13). Our focus on wedding CBPR capacity-building in health equity research with dissemination and advocacy through community organizing in the African American community provides an opportunity for innovations in evaluation research. We will build on past research (14, 15) and develop a model for evaluation of the social transformative potential of public deliberations in health inequities.

D4. Action Plan for Aims

D4.1. Action Plan for Aim 1

Aim 1. Aid investigators and co-investigators from the community during the planning and conduct of research to build community-based participatory research (CBPR) capacity.

Investigators: We will work with investigators in the project planning stages to link them with community partners and refine CBPR elements of their projects. We will provide consultation to investigators who are preparing letters of intent for pilot studies and those applicants whose letters of intent were chosen to submit full proposals. We will also work with postdocs and junior faculty who are interested in pursuing research in health disparities but are new to the discipline. We will work with the Investigator Development Core to link them with faculty mentors with well-established research programs in health disparities. We view this as an excellent strategy for bringing new investigators into the field of health disparities research.

Other research and training resources. Multiple other UB groups offer valuable research and educational opportunities in the form of seminars, workshops, courses, certificates, digital badges, micro-credentials, degree-granting programs and others. The Center for Urban Studies and CTSI are especially relevant:

- **Center for Urban Studies**, founded by Dr. Henry Taylor (CEDC Co-I) in 1987, became formally affiliated with the Community Health Equity Research Institute in 2021. This Center's vision is "to build healthy communities and to create just cities and metropolitan regions" and engaged in community-based research for over three decades. Many graduate students in urban planning completed thesis projects in this Center.
- **Clinical Translational Science Institute (CTSI)** supported by an NIH clinical and translational science award and led by Dr. Murphy (PI of this program) has a vision "to advance and accelerate research to reduce health disparities and improve the health of our community and the nation." The CTSI offers expert support available to faculty at no charge, including biostatistics, epidemiology and research design; regulatory support (e.g., writing IRB protocols); and more. The CTSI workshops on research design, biostatistics; responsible conduct of research; community engagement; community-university collaborations; health equity; and others are open to all. Pilot studies awardees are required to complete the series on health equity.

In addition, numerous other relevant resources are available to scholars (**Table D1**). The Center of Excellence will connect researchers with resources based on individual needs. The Health Equity Institute website will serve as a central point of information for seminars, workshops, etc. for the UB community and wider Buffalo community.

Table D1. Examples of Relevant University Resources Available to Scholars

Resource	Description	UB Home
Community for Global Health Equity	Scholarly community with an aim to improve peoples' lives around the world	VP for Research and Economic Development
Office of Inclusive Excellence	Students, faculty, & staff partner to build a culture of diversity, social justice, inclusion	Office of the Provost
Center for Diversity Innovation	Translates research on DEI to best practices through educational materials, trainings and consultations	Office of the Provost
Micro-credential in Strategies for Eliminating Health Inequities	Micro-credentials differentiate students and appear on digital resumés, Linked-In accounts and e-portfolios	School of Public Health and Health Professions
Buffalo HealthCast	Weekly health equity podcast by students and faculty	School of Public Health and Health Professions
Center for Inclusive Design and Environmental Access	Develop knowledge & tools to improve health, wellness & participation of groups marginalized by traditional design.	School of Architecture and Planning
Immigrant and Refugee Research Institute	Create and share knowledge on immigrants and refugees to improve their lives with a focus on WNY newcomers	School of Social Work

Community Co-Investigators: We will assist with project specific training for co-investigators from the community who are engaged in pilot study projects. The CEDC will link early career investigators with existing resources at UB for CBPR capacity-building that augments the proposed work of this program. We anticipate a substantial proportion of pilot studies applicants will be new faculty and will benefit from learning and leveraging existing resources at UB to enhance their research over and above the UB Community Health Equity Research Institute in which our Center of Excellence is embedded.

D4.2 Action Plan for Aim 2

Aim 2. Work with research teams in sharing results of research for diverse audiences, including non-scientific community members, policy makers, and community-based stakeholders in translating research findings to promote sustainable community- and system-level- change.

Overall dissemination strategy. Simply defined, dissemination is getting research results to people who can benefit from the findings (16). Dissemination by researchers most often occurs through scientific publications and presentations at scientific conferences. While these approaches are important to ensure that the science withstands peer review, these venues limit the reach to many who could benefit from knowing the results, such as research participants, policy makers and the general public. Communicating research results beyond the traditional academic and scientific audience is a critical component of research dissemination, especially if the results are going to lead to changes in practice. We view dissemination of our research results to the community as an ethical responsibility.

We will reach out to each pilot studies PI to create a well thought out dissemination plan. To be most effective, a dissemination plan should begin during the planning stages of the study (17). Participants in clinical studies consistently express a strong interest in hearing updates on the project in which they are participating. We will work with investigators to develop plans to provide project updates to study participants and other key stakeholders, being careful to adhere to guidelines regarding communicating main study results prior to publication. Maintaining stakeholder engagement during a study is an important component of a comprehensive dissemination plan.

Disseminating research findings. Upon study completion, the CEDC will work with the research team to write a “research summary document” that clearly and concisely summarizes the main findings of a study. This document is a key component of the dissemination strategy which can summarize a single study or may combine several studies performed by the same investigator. The research summary document generally includes key findings using three to five bullet points. Each bullet point can link to more detailed information. The CTSI has an active plain language initiative with tip sheets and experts who work with research teams on developing clear communication materials for lay audiences. We will make liberal use of engaging infographics and illustrations using best practices (18). In addition, the UB Artificial Intelligence (AI) Institute developed innovative AI approaches to creating plain language communications. We will partner with the UB CTSI and AI Institute on selected projects. In addition, we will work with UB Communications, which is active in disseminating research results to lay audiences.

Table D2. Strategies to disseminate research findings to communities

- Press release
- Research summary document
- Flyers, posters, brochures
- Social media
- Policy briefs
- Study newsletters
- Websites and listservs
- Community agency publications
- Local events and community meetings
- Letter of thanks to participants

The strategy for dissemination of findings will be guided by the study. The overall strategy is to distill complex research findings into accessible pieces of relevant information delivered by multiple avenues (**Table D2**). For studies to be published in high impact journals (e.g., JAMA, New England Journal of Medicine, etc.), the CEDC will work with UB Communications on a press release. For studies with immediate potential for policy change, we will work with the PI in composing policy briefs and communicating with the appropriate government agency or elected leader (see Administrative Core and Letters from partner elected leaders).

Social media will play a prominent role in our communication strategy (**Table D3**). Black individuals use social media at a higher rate than other racial groups globally (19). We will work with the research team

Table D3. Strategies to communicate research results through social media

- Understand target audience
- Clear and concise message
- Use visual content
- Tell stories
- Encourage questions
- Use diverse social media platforms
- Harness hashtags for visibility
- Track analytics

to understand key target audiences to tailor content and strategy. We work closely in communication strategies with the Buffalo Center for Equity, which has extensive reach throughout the Buffalo community, including an active social media network. They have a social media expert on staff with whom we work. **Table D3** shows an overview of approaches that we will use.

During the course of the pilot studies projects, the CEDC will reach out proactively to research teams and discuss the potential impact of the project and an implementation plan. We will connect the research team with the appropriate stakeholder to discuss and develop a strategy for next steps in translating the research results into meaningful community change. In some circumstances, this may involve reaching out to government, businesses, community groups, etc., depending on the nature of the research. Our community-university-government partnership will be especially valuable in facilitating these relationships and discussions (see Overall).

A Successful Dissemination Strategy

The Center for Urban Studies released a report by Dr. Henry Taylor (Co-I) entitled “The Harder We Run: The State of Black Buffalo in 1990 and the Present” in 2021 (1). The report examined socioeconomic conditions in Black neighborhoods in Buffalo, including their relationship to health inequities. The dissemination strategy included a press release from the UB Office of Communications, stories on multiple UB online newsletters, circulation of the report, and an in-person/remote community forum hosted by the Buffalo Center for Health Equity. The report generated enormous media coverage, including editorial articles in print media and interviews and coverage on local and national news broadcasts. Working groups including community- and university-based leaders were formed to address the recommendations and Dr. Taylor has written a proposed detailed comprehensive strategic plan “This Time It Will Be Different, The Good Neighborhood Demonstration Project” The draft is under review by community leaders.

Translation of research into sustainable changes through partnerships with government, intermediaries, and local policy makers. In addition to disseminating results of our research to communities, accomplishing our overall goal of reducing health disparities requires that the results of our research be implemented into real-world clinical, community, and public health settings. However, implementation of policy changes in healthcare is often slow, undervalued, incomplete, and inefficient, with the populations most impacted by health disparities typically being the last to have access to innovations, despite having the greatest need. The CEDC team and community partners cultivated a powerful network of partnerships with local government, intermediary organizations, and other local policy makers for the translation of research results. The African American Health Equity Task Force has especially broad reach (**Figure D1**). We sustain a partnership with the Local Initiative Support Corporation (LISC) of Western New York, a national nonprofit intermediary organization that assists in the planning, implementation, and capacity building of public-private community development projects. The Community Health Equity Research Institute has well established community partnerships that are each represented on the Board, along with a leader of each of the 12 UB schools (see Administrative Core). These partnerships are particularly important since they provide avenues for disseminating and translating research results in community and clinical settings.

The inclusion and active participation of public officials and elected leaders, in the African American Health Equity Task Force (Director of the Erie County Health Equity Office, a representative of the office of state Senator Tim Kennedy and the Deputy Mayor of the city of Buffalo) provides a direct line of communication to influential policy makers. We will leverage these partnerships in engaging in critical discussions regarding the research results of our pilot studies awardees with potential to lead to policy changes. Two examples in which these partnerships led to community changes:

- Zeneta Everhart, Director of Community Engagement in the office of State Senator Tim Kennedy, attends monthly Task Force meetings and also the annual *Igniting Hope* conferences on health disparities (see Overall) and participates in breakout discussions. A fines and fees breakout group identified discriminatory policies by the city of Buffalo in ticketing for routine traffic violations in African American East Side Buffalo neighborhoods, leading to driver’s license suspensions for unpaid tickets. Ms. Everhart brought this discriminatory policy to the attention of Senator Kennedy leading to a new state law that he authored and sponsored, which led to policy change in traffic ticketing in the East Side of Buffalo (20).
- In 2023, the shocking revelation that the Water Board of the City of Buffalo had not been adding fluoride to its drinking water for the last 7.5 years came to light, explaining the recent increase in dental decay in children living in Buffalo, noted by area pediatric dentists. Following this revelation, Kelly Wofford, Director of the Erie County Office of Health Equity, contacted PI Murphy asking for advice regarding experts who could help with

a mitigation plan until water was again fluoridated. PI Murphy engaged Dr. Joseph Giambacorta, Associate Dean for Community Engagement in the UB School of Dental Medicine and an expert in fluoride and tooth decay. The three met along with other team members to develop a plan, which will involve the participation of UB dentists, to mitigate this disturbing inequity until the Buffalo water supply is properly re-fluoridated (which is now in progress). While this is not technically a result of research, it is an example of community benefit enabled by our enduring partnership, trust, and bidirectional communication.

D4.3 Action Plan for Aim 3

Aim 3. Offer small, Community Partnership Grants to African American led community-based organizations to support neighborhood projects designed to mitigate health inequities.

During the discussions of pilot studies in the planning of this proposal, community members expressed a clear interest in support for small pilot grants that 1) are in direct response to a community need, 2) are visible to the community and 3) have an immediate positive effect on day-to-day life of the people impacted by the grant. Examples might be purchasing curricular materials and supplies to support the work of a tutor in an after-school program, recreational supplies used in health programming based in a church or community center, among others. Community members value the impact of larger research projects. However, the impacts are not immediately visible. Small projects in response to community requests will go a long way in building trust and facilitating ongoing collaborations.

Accordingly, the CEDC will offer small grants up to \$2,000 per award and up to five one-year awards annually under the Community Partnership Grant program. Community-based organizations in East Side ZIP codes are eligible to apply. We will circulate information about this opportunity through neighborhood churches, community centers, block clubs and the Buffalo Center for Health Equity, which has broad reach to Buffalo community groups. We will hold informational sessions with community organizations. For example, Project REACH (Stan Martin, Buffalo Office Director, CEDC Co-I) holds regular meetings and small events reaching community groups and members.

Applications will be accepted on a rolling basis. The application process is designed to be simple and straightforward with appropriate oversight and accountability. The applicant will write and submit a two-page application indicating applicant name, address, title of project, and a description of the project, including background, goal, activity to be conducted, expected outcomes and how the project will directly benefit the community. Additionally, a budget justification will be required to describe how the funds will be used. CEDC faculty will be available to assist community groups in writing their applications.

A review committee composed of three community members and three faculty will review proposals based on potential impact and benefit to the community, feasibility and alignment with Center of Excellence goals for community engagement. The review committee will decide whether to invite the leader(s) to meet in-person to discuss. Options include funding the proposal, recommending revisions and re-review or deciding against funding.

Funded projects will be assigned a faculty coach/advisor whose interest and experience align with the project. The coach will communicate regularly with the leaders, serve as a liaison to the Center of Excellence, advise as needed to optimize success and report back to CEDC leadership. At a minimum, the project leader(s) will check-in with the coach/advisor every three months for updates and to troubleshoot any obstacles. A one-page interim report will be submitted to the CEDC summarizing progress, obstacles, the budget, plans for the next six months and any other pertinent issues. A two-page final report with similar subheadings will be submitted at the end of the project. This report will be used to disseminate efforts, reference for future requests from the organization, help assess the Community Partnership Grant program and inform changes to enhance quality and impact.



Figure D2. Flow chart of solicitation, review, and support for Community Partnership Grants

D5. CEDC Leadership Team

Our approach to CBPR is informed by the PAR paradigm. The CEDC team was assembled because of the individual member's unique experiences engaging in the community and with praxis. Members of the team were selected because of their knowledge of Buffalo and a broader understanding of the nexus between health inequities and African American experiences with institutional barriers to community empowerment. Each member of the team offers complementary insights about building CBPR capacity (Aim 1) and the use of community organizing techniques to promote sustainable community- and system-level- change (Aim 2).

- **Robert Silverman PhD**, Core Director, Professor of Urban and Regional Planning. Professor Silverman is an internationally regarded urban planning scholar whose work focuses on community development, affordable housing, and education policy. He has worked closely with Buffalo East Side communities since he joined the UB faculty in 2003.
- **Stan Martin MM**, Co-Director, Buffalo Office Director and Senior Trainer at Ciccattelli Associates Inc. He directs the Racial and Ethnic Approaches to Community Health (REACH) program funded by the CDC. that focuses on the promotion of tobacco-free living, improved nutrition and community support for breastfeeding, and increased access to health care in Buffalo East Side neighborhoods. His group holds frequent community events, workshops, and informational sessions with community members.
- **Heather Orom PhD**, Associate Professor of Community Health and Health Behavior and Associate Dean for Equity, Diversity and Inclusion in the School of Public Health and Health Professions. Her research focuses on the causes of health disparities with a particular interest in how discrimination influences health outcomes.
- **Christopher St. Vil PhD**, Associate Professor in the School of Social Work. He is an expert on trauma and victims of violent injury, masculinity and health, gun violence, risk-taking attitudes and social welfare inequities in African American communities.
- **Henry Taylor PhD**, Professor of Urban and Regional Planning in the School of Architecture and Planning and Founding Director of the Center for Urban Studies. He is a national authority in the area of distressed urban neighborhoods and race and class issues among people of color. He recently published a landmark report on the state of Black Buffalo that has generated extensive discussion and planning among community stakeholders.
- **Susan Grinslade PhD RN** is a Clinical Professor in the School of Nursing and Fellow in the National Academy of Nursing with expertise in public health nursing and a passion for health equity. She played a key leadership role in launching the Million Hearts Initiative in Buffalo (a CDC program to reduce heart disease) facilitating the current close partnership between UB and the African American East Side communities in its earliest stages.
- **Kelly Wofford MS**, Director, Health Equity Office, Erie County Department of Health. Before joining the Erie County Department of Health, she was the Community Engagement Coordinator of the UB School of Nursing and the Director of Community Relations for the Erie County Medical Center.

D6. Summary and Five-Year Vision

The CEDC of our Center of Excellence is guided by the *participatory action research paradigm*, which focuses on linking community-based research to community organizing activities. We will train and mentor early career scholars to perform research using the principles of CBPR, in which the community guides the research agenda, participate as active partners in planning the study from the outset, are part of the research team, and benefit from the results of the research. Our strong partnerships with the community are the foundation on which the CEDC will grow. A priority of our Center of Excellence is that our research will translate into sustainable community and system-level changes. Our active collaborations with city (Mayor's office), county (County Executive), state (State Senate) and federal (Congressmember) governments with a history of working with each (see letters), position us to influence legislation and policies guided by research results that develop and assess effective approaches to impact health disparities and SDOH. Our five-year vision is that the support and impact of the Center of Excellence will catalyze a transformation of our community-based research by expanding our research workforce, training future leaders in the field, and creating a culture change by influencing researchers within and outside the Center of Excellence to design research to address root causes of health inequities and work toward translating findings into sustainable, system-level changes.

PHS Human Subjects and Clinical Trials Information

OMB Number: 0925-0001

Expiration Date: 01/31/2026

Use of Human Specimens and/or Data

Does any of the proposed research in the application involve human specimens and/or data *

☐ Yes☒ No

Provide an explanation for any use of human specimens and/or data not considered to be human subjects research.

Are Human Subjects Involved

☐ Yes☒ No

Is the Project Exempt from Federal regulations?

☐ Yes☐ No

Exemption Number

☐ 1☐ 2☐ 3☐ 4☐ 5☐ 6☐ 7☐ 8

Other Requested Information

Delayed Onset Studies

Delayed Onset Study#	Study Title	Anticipated Clinical Trial?	Justification
The form does not have any delayed onset studies			

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APPLICATION FOR FEDERAL ASSISTANCE

SF 424 (R&R)

5. APPLICANT INFORMATION

UEI*: LMCJKRFW5R81

Legal Name*: The Research Foundation for SUNY on behalf of U. at Buffalo
Department: Sponsored Projects Services
Division:
Street1*: The UB Commons
Street2: 520 Lee Entrance, Suite 211
City*: Amherst
County: Erie
State*: NY: New York
Province:
Country*: USA: UNITED STATES
ZIP / Postal Code*: 14228-2567

Person to be contacted on matters involving this application

Prefix: First Name*: Middle Name: Last Name*: Suffix:
Amy Lagowski

Position/Title: Agreement Administartor
Street1*: The UB Commons
Street2: 520 Lee Entrance, Suite 211
City*: Amherst
County: Erie
State*: NY: New York
Province:
Country*: USA: UNITED STATES
ZIP / Postal Code*: 14228-2567

Phone Number*: 716-645-4419 Fax Number: Email: amy.lagowski@buffalo.edu

7. TYPE OF APPLICANT*

X: Other (specify)

Other (Specify): Private, Non-profit

☒ Small Business Organization Type☐ Women Owned☐ Socially and Economically Disadvantaged

11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT*

Igniting Hope in Buffalo New York communities: Training the Next Generation of Health Equity Researchers

12. PROPOSED PROJECT

Start Date* Ending Date*
04/01/2024 03/31/2029

Project/Performance Site Location(s)**Project/Performance Site Primary Location**

☐ I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name: The Research Foundation for SUNY on behalf of
U. at Buffalo
UEI: LMCJKRFW5R81
Street1*: The UB Commons
Street2: 520 Lee Entrance, Suite 211
City*: Amherst
County: Erie
State*: NY: New York
Province:
Country*: USA: UNITED STATES
Zip / Postal Code*: 14228-2567
Project/Performance Site Congressional District*: NY-026

Project/Performance Site Location 1

☐ I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name: UB Clinical and Translational Research Center
UEI:
Street1*: 875 Ellicott Street
Street2:
City*: Buffalo
County:
State*: NY: New York
Province:
Country*: USA: UNITED STATES
Zip / Postal Code*: 14203-1034
Project/Performance Site Congressional District*: NY-026

Project/Performance Site Location 2

☐ I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name: UB Jacobs School of Medicine and Biomedical Sciences
UEI: LMCJKRFW5R81
Street1*: 955 Main Street
Street2:
City*: Buffalo
County: Erie
State*: NY: New York
Province:
Country*: USA: UNITED STATES
Zip / Postal Code*: 14203-1034
Project/Performance Site Congressional District*: NY-026

Project/Performance Site Location 3

☐ I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name: UB School of Public Health and Health Professions
UEI:
Street1*: 3435 Main Street
Street2:
City*: Buffalo
County:
State*: NY: New York
Province:
Country*: USA: UNITED STATES
Zip / Postal Code*: 14214-3099
Project/Performance Site Congressional District*: NY-026

Project/Performance Site Location 4

☐ I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name: UB School of Nursing
UEI:
Street1*: 3435 Main Street- Wende Hall
Street2:
City*: Buffalo
County:
State*: NY: New York
Province:
Country*: USA: UNITED STATES
Zip / Postal Code*: 14214-3010
Project/Performance Site Congressional District*: NY-026

Project/Performance Site Location 5

☐ I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name: UB School of Architecture and Planning
UEI:
Street1*: 3435 Main Street- Hayes Hall
Street2:
City*: Buffalo
County:
State*: NY: New York
Province:
Country*: USA: UNITED STATES
Zip / Postal Code*: 14214-3015
Project/Performance Site Congressional District*: NY-026

Project/Performance Site Location 6

☐ I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name: UB Community Health Equity Research Institute
UEI:
Street1*: 875 Ellicott Street
Street2:
City*: Buffalo
County:
State*: NY: New York
Province:
Country*: USA: UNITED STATES
Zip / Postal Code*: 14203-1070
Project/Performance Site Congressional District*: NY-026

Project/Performance Site Location 7

☐ I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name: Buffalo Center for Health Equity
UEI:
Street1*: 257 West Genesee Street
Street2:
City*: Buffalo
County:
State*: NY: New York
Province:
Country*: USA: UNITED STATES
Zip / Postal Code*: 14202-2657
Project/Performance Site Congressional District*: NY-026

Additional Location(s)

File Name:

RESEARCH & RELATED Other Project Information

1. Are Human Subjects Involved?* ☒ Yes ☐ No	
1.a. If YES to Human Subjects Is the Project Exempt from Federal regulations? ☐ Yes ☒ No If YES, check appropriate exemption number: — 1 — 2 — 3 — 4 — 5 — 6 — 7 — 8 If NO, is the IRB review Pending? ☐ Yes ☐ No IRB Approval Date: Human Subject Assurance Number	
2. Are Vertebrate Animals Used?* ☐ Yes ☒ No	
2.a. If YES to Vertebrate Animals Is the IACUC review Pending? ☐ Yes ☐ No IACUC Approval Date: Animal Welfare Assurance Number	
3. Is proprietary/privileged information included in the application?* ☐ Yes ☒ No	
4.a. Does this project have an actual or potential impact - positive or negative - on the environment?* ☐ Yes ☒ No	
4.b. If yes, please explain: 4.c. If this project has an actual or potential impact on the environment, has an exemption been authorized or an environmental assessment (EA) or environmental impact statement (EIS) been performed? ☐ Yes ☐ No 4.d. If yes, please explain:	
5. Is the research performance site designated, or eligible to be designated, as a historic place?* ☐ Yes ☒ No	
5.a. If yes, please explain:	
6. Does this project involve activities outside the United States or partnership with international collaborators?* ☐ Yes ☒ No	
6.a. If yes, identify countries: 6.b. Optional Explanation:	
7. Project Summary/Abstract*	Filename Abstract_IDCφ. f
8. Project Narrative*	
9. Bibliography & References Cited Bibliography_Investigator_Developmentφ. f	
10. Facilities & Other Resources	
11. Equipment	

The University at Buffalo (UB) NIMHD Center of Excellence in Investigator Development and Community Engagement will provide well-coordinated, careful mentoring, didactic training, and professional development individually tailored to each scholar's needs. The education and training components of the Center of Excellence will fill a critical gap in our minority health and health disparities research environment by bringing comprehensive and rigorous training and mentoring in the discipline. This Center of Excellence will be the only formal training program in minority health and health disparities research at UB, bringing an enormously important resource to our training environment. The Center of Excellence will function as a centralized training center bringing coordination and communication to this key element of advancing health disparities research locally and nationally. The Investigator Development Core (IDC) will attract, mentor and train early-career investigators from a broad range of disciplines in transdisciplinary research in minority health and health disparities, including offering the opportunity to apply for pilot studies awards addressing health inequities and social determinants of health in the Buffalo region (Aim 1). Two of the most important elements for early-stage investigators to successfully establish their own independent research program are 1) training and mentoring, and 2) funding to support the development of preliminary results to be competitive for larger extramural grants. Our IDC is designed with these goals in mind. Because of lack of diversity in the health disparities research workforce, many researchers lack the insight that lived experiences bring to understanding systemic racism and the effects of discrimination and their impact on health disparities. A diverse workforce is more successful in engaging people from underrepresented groups in research and relevant stakeholders in policy making. Research related to racism and discrimination requires a multidisciplinary, broadly engaged, team science approach, which merges team science and community engagement. With this in mind, we will implement a diversity, equity, inclusion, and accessibility (DEIA) Action Plan and leverage the resources and expertise of the proposed Center of Excellence to increase and diversify our workforce, especially in health disparities research (Aim 2). Our IDC will provide expert training and mentoring in rigorous research design, methodology, statistical analysis, and community-based participatory research to early-career investigators to support their research and advance their careers in minority health and health disparities research (Aim 3). One theme of our Center of Excellence is integration of community throughout. We will assist early-career researchers in engaging community members on their research team and/or as a member of their mentoring team. Our vision for the next five years is that our Center of Excellence will facilitate the training of a more diverse faculty from more disciplines to perform innovative research in minority health and health disparities to advance their careers to independence and to create systemic change to reduce health inequities in Buffalo and beyond.

RESEARCH & RELATED Senior/Key Person Profile (Expanded)

PROFILE - Project Director/Principal Investigator			
Prefix:	First Name*: Oscar	Middle Name	Last Name*: Gómez
	Suffix: Ph.D		
Position/Title*:	Associate Professor and Division Chief		
Organization Name*:	SUNY at Buffalo		
Department:	Pediatrics		
Division:	Jacobs School of Medicine & Biomedical Sciences		
Street1*:	1001 Main Street		
Street2:			
City*:	Buffalo		
County:			
State*:	NY: New York		
Province:			
Country*:	USA: UNITED STATES		
Zip / Postal Code*:	14203-1009		
Phone Number*:	(716) 323-0150	Fax Number:	
E-Mail*:	oscargom@buffalo.edu		
Credential, e.g., agency login:	GOMEZOSCAR		
Project Role*:	Co-Investigator	Other Project Role Category:	
Degree Type:	PhD and MD	Degree Year:	
Attach Biographical Sketch*:	File Name:		
Attach Current & Pending Support:	File Name:		

PROFILE - Senior/Key Person			
Prefix: Rev.	First Name*: Kinzer	Middle Name	Last Name*: Pointer
Suffix:			
Position/Title*:			
Organization Name*: Concerned Clergy Coalition of Western New York			
Department:			
Division:			
Street1*: 347 Peckham Street			
Street2:			
City*: Buffalo			
County:			
State*: NY: New York			
Province:			
Country*: USA: UNITED STATES			
Zip / Postal Code*: 14206-1716			
Phone Number*: 716-563-1609		Fax Number:	
E-Mail*: kinzerpo@buffalo.edu			
Credential, e.g., agency login: KINZERPO			
Project Role*: Other (Specify)		Other Project Role Category: Co-Director of Investigator Dev. Core	
Degree Type:		Degree Year:	
Attach Biographical Sketch*:		File Name:	
Attach Current & Pending Support:		File Name:	

PROFILE - Senior/Key Person			
Prefix:	First Name*: Gregory	Middle Name	Last Name*: Wilding
Suffix: Ph.D			
Position/Title*: Professor			
Organization Name*: SUNY at Buffalo			
Department: Biostatistics			
Division: School of Public Health and Health Professions			
Street1*: 719 Kimball Tower			
Street2:			
City*: Buffalo			
County:			
State*: NY: New York			
Province:			
Country*: USA: UNITED STATES			
Zip / Postal Code*: 14214-8028			
Phone Number*: (716) 829-2594		Fax Number:	
E-Mail*: gwilding@buffalo.edu			
Credential, e.g., agency login: gewilding			
Project Role*: Co-Investigator		Other Project Role Category:	
Degree Type: PhD		Degree Year:	
Attach Biographical Sketch*:		File Name:	
Attach Current & Pending Support:		File Name:	

PROFILE - Senior/Key Person				
Prefix:	First Name*: Ekaterina	Middle Name	Last Name*: Noyes	Suffix: Ph.D
Position/Title*:	Professor			
Organization Name*:	SUNY at Buffalo			
Department:	Surgery			
Division:				
Street1*:	270C Farber Hall			
Street2:				
City*:	Buffalo			
County:				
State*:	NY: New York			
Province:				
Country*:	USA: UNITED STATES			
Zip / Postal Code*:	14214-8001			
Phone Number*: (716) 829-5386		Fax Number:		
E-Mail*: enoyes@buffalo.edu				
Credential, e.g., agency login: Knoyes17				
Project Role*: Co-Investigator		Other Project Role Category:		
Degree Type: PhD		Degree Year:		
Attach Biographical Sketch*:		File Name:		
Attach Current & Pending Support:		File Name:		

PROFILE - Senior/Key Person				
Prefix:	First Name*: Henry	Middle Name Louis	Last Name*: Taylor	Suffix: Ph.D
Position/Title*:	Professor			
Organization Name*:	SUNY at Buffalo			
Department:				
Division:				
Street1*:	330A Hayes Hall			
Street2:				
City*:	Buffalo			
County:				
State*:	NY: New York			
Province:				
Country*:	USA: UNITED STATES			
Zip / Postal Code*:	14214-8030			
Phone Number*: (716) 829-5458		Fax Number:		
E-Mail*: htaylor@buffalo.edu				
Credential, e.g., agency login: HLTAYLOR				
Project Role*: Co-Investigator		Other Project Role Category:		
Degree Type:		Degree Year:		
Attach Biographical Sketch*:		File Name:		
Attach Current & Pending Support:		File Name:		

RESEARCH & RELATED BUDGET - SECTION A & B, BUDGET PERIOD 1

UEI*: LMCJKR5R81
Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2024 End Date*: 03-31-2025 Budget Period: 1

A. Senior/Key Person									
Prefix	First Name*	Middle	Last Name*	Suffix	Project Role*	Base Salary (\$)	Calendar Months	Academic Months	Summer Months
	Name								
1.	Oscar		Gomez	Ph.D	Co-investigator	129,381.00	1.0		
2.	Gregory		Wilding	Ph.D	Co-investigator	212,100.00	0.6		
3.	Ekatarina		Noyes	Ph.D	Co-investigator	212,100.00	0.6		
4. Rev.	Kinzer		Pointer		Collaborator	15,606.00	1.2		
Total Funds Requested for all Senior Key Persons in the attached file									
Additional Senior Key Persons: File Name:									Total Senior/Key Person
									40,971.00

B. Other Personnel									
Number of Personnel*	Project Role*	Calendar Months	Academic Months	Summer Months	Requested Salary (\$)*	Fringe Benefits*	Funds Requested (\$)*		
	Post Doctoral Associates								
	Graduate Students								
	Undergraduate Students								
	Secretarial/Clerical								
0	Total Number Other Personnel				Total Other Personnel		0.00		
					Total Salary, Wages and Fringe Benefits (A+B)		40,971.00		

RESEARCH & RELATED Budget (A-B) (Funds Requested)

RESEARCH & RELATED BUDGET - SECTION C, D, & E, BUDGET PERIOD 1

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2024 End Date*: 03-31-2025 Budget Period: 1

C. Equipment Description	
List items and dollar amount for each item exceeding \$5,000	
Equipment Item	Funds Requested (\$)*
Total funds requested for all equipment listed in the attached file	
Total Equipment	0.00
Additional Equipment: File Name:	

D. Travel	Funds Requested (\$)*
1. Domestic Travel Costs (Incl. Canada, Mexico, and U.S. Possessions)	
2. Foreign Travel Costs	
Total Travel Cost	0.00

E. Participant/Trainee Support Costs	Funds Requested (\$)*
1. Tuition/Fees/Health Insurance	
2. Stipends	
3. Travel	
4. Subsistence	
5. Other: Pilot Studies	300,000.00
Number of Participants/Trainees	Total Participant Trainee Support Costs
	300,000.00

RESEARCH & RELATED Budget {C-E} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTIONS F-K, BUDGET PERIOD 1

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2024

End Date*: 03-31-2025

Budget Period: 1

F. Other Direct Costs	Funds Requested (\$)*
1. Materials and Supplies	
2. Publication Costs	
3. Consultant Services	
4. ADP/Computer Services	
5. Subawards/Consortium/Contractual Costs	
6. Equipment or Facility Rental/User Fees	
7. Alterations and Renovations	
8. Seminars	11,169.00
Total Other Direct Costs	11,169.00

G. Direct Costs	Funds Requested (\$)*
Total Direct Costs (A thru F)	352,140.00

H. Indirect Costs			
Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)*
1. Institutional IDC Cost On Campus	61.0	352,140.00	214,806.00
Total Indirect Costs			214,806.00
Cognizant Federal Agency			
(Agency Name, POC Name, and POC Phone Number)			

I. Total Direct and Indirect Costs	Funds Requested (\$)*
Total Direct and Indirect Institutional Costs (G + H)	566,946.00

J. Fee	Funds Requested (\$)*

K. Total Costs and Fee	Funds Requested (\$)*
	566,946.00

L. Budget Justification*	File Name: Budget_Justification- Investigator_Development_Core.pdf
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RESEARCH & RELATED Budget {F-K} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTION A & B, BUDGET PERIOD 2

UEI*: LMCJKRFW5R81
Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2025End Date*: 03-31-2026Budget Period: 2

A. Senior/Key Person										
Prefix	First Name*	Middle	Last Name*	Suffix	Project Role*	Base	Calendar	Academic	Summer	Funds Requested (\$)*
		Name				Salary (\$)	Months	Months	Months	
						Salary (\$)*				Benefits (\$)*
1.	Oscar		Gomez	Ph.D	Co-investigator	131,969.00	1.0		8,838.00	5,907.00
2.	Gregory		Wilding	Ph.D	Co-investigator	216,342.00	0.6		5,303.00	3,545.00
3.	Ekatarina		Noyes	Ph.D	Co-investigator	216,342.00	0.6		5,303.00	3,545.00
4. Rev.	Kinzer		Pointer		Collaborator	15,918.00	1.2		6,367.00	2,642.00
Total Funds Requested for all Senior Key Persons in the attached file										
Additional Senior Key Persons:										
File Name:										Total Senior/Key Person
										41,450.00

B. Other Personnel									
Number of Personnel*	Project Role*	Calendar Months	Academic Months	Summer Months	Requested Salary (\$)*	Fringe Benefits*	Funds Requested (\$)*		
	Post Doctoral Associates								
	Graduate Students								
	Undergraduate Students								
	Secretarial/Clerical								
0	Total Number Other Personnel				Total Other Personnel		0.00		
					Total Salary, Wages and Fringe Benefits (A+B)		41,450.00		

RESEARCH & RELATED Budget (A-B) (Funds Requested)

RESEARCH & RELATED BUDGET - SECTION C, D, & E, BUDGET PERIOD 2

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2025 End Date*: 03-31-2026 Budget Period: 2

C. Equipment Description	
List items and dollar amount for each item exceeding \$5,000	
Equipment Item	Funds Requested (\$)*
Total funds requested for all equipment listed in the attached file	
Total Equipment	0.00
Additional Equipment: File Name:	

D. Travel	Funds Requested (\$)*
1. Domestic Travel Costs (Incl. Canada, Mexico, and U.S. Possessions)	
2. Foreign Travel Costs	
Total Travel Cost	0.00

E. Participant/Trainee Support Costs	Funds Requested (\$)*
1. Tuition/Fees/Health Insurance	
2. Stipends	
3. Travel	
4. Subsistence	
5. Other: Pilot Studies	300,000.00
Number of Participants/Trainees	Total Participant Trainee Support Costs
	300,000.00

RESEARCH & RELATED Budget {C-E} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTIONS F-K, BUDGET PERIOD 2

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2025

End Date*: 03-31-2026

Budget Period: 2

F. Other Direct Costs			Funds Requested (\$)*
1. Materials and Supplies			
2. Publication Costs			
3. Consultant Services			
4. ADP/Computer Services			
5. Subawards/Consortium/Contractual Costs			
6. Equipment or Facility Rental/User Fees			
7. Alterations and Renovations			
8. Seminars			9,122.00
Total Other Direct Costs			9,122.00

G. Direct Costs		Funds Requested (\$)*
Total Direct Costs (A thru F)		350,572.00

H. Indirect Costs			
Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)*
1. Institutional IDC Cost On Campus	61.0	350,572.00	213,849.00
Total Indirect Costs			213,849.00
Cognizant Federal Agency			
(Agency Name, POC Name, and POC Phone Number)			

I. Total Direct and Indirect Costs		Funds Requested (\$)*
Total Direct and Indirect Institutional Costs (G + H)		564,421.00

J. Fee	Funds Requested (\$)*

K. Total Costs and Fee	Funds Requested (\$)*
	564,421.00

L. Budget Justification*	File Name: Budget_Justification- Investigator_Development_Core.pdf
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RESEARCH & RELATED Budget {F-K} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTION A & B, BUDGET PERIOD 3

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2026End Date*: 03-31-2027Budget Period: 3

A. Senior/Key Person									
Prefix	First Name*	Middle	Last Name*	Suffix	Project Role*	Base Salary (\$)	Calendar Months	Academic Months	Summer Months
		Name				Requested Salary (\$)*	Requested Salary (\$)*	Fringe Benefits (\$)*	Funds Requested (\$)*
1.	Oscar		Gomez	Ph.D	Co-investigator	134,608.00	1.0	8,838.00	6,035.00
2.	Gregory		Wilding	Ph.D	Co-investigator	220,669.00	0.6	5,303.00	3,621.00
3.	Ekatarina		Noyes	Ph.D	Co-investigator	220,669.00	0.6	5,303.00	3,621.00
4. Rev.	Kinzer		Pointer		Collaborator	16,236.00	1.2	6,495.00	2,793.00
Total Funds Requested for all Senior Key Persons in the attached file									
Additional Senior Key Persons: File Name:									42,009.00

B. Other Personnel						
Number of Personnel*	Project Role*	Calendar Months	Academic Months	Summer Months	Requested Salary (\$)*	Fringe Benefits* Funds Requested (\$)*
	Post Doctoral Associates					
	Graduate Students					
	Undergraduate Students					
	Secretarial/Clerical					
0	Total Number Other Personnel				Total Other Personnel	0.00
Total Salary, Wages and Fringe Benefits (A+B)						42,009.00

RESEARCH & RELATED Budget (A-B) (Funds Requested)

RESEARCH & RELATED BUDGET - SECTION C, D, & E, BUDGET PERIOD 3

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2026

End Date*: 03-31-2027

Budget Period: 3

C. Equipment Description		Funds Requested (\$)*
List items and dollar amount for each item exceeding \$5,000		
Equipment Item		
Total funds requested for all equipment listed in the attached file		
Total Equipment		0.00
Additional Equipment: File Name:		

D. Travel	Funds Requested (\$)*
1. Domestic Travel Costs (Incl. Canada, Mexico, and U.S. Possessions)	
2. Foreign Travel Costs	
Total Travel Cost	0.00

E. Participant/Trainee Support Costs	Funds Requested (\$)*
1. Tuition/Fees/Health Insurance	
2. Stipends	
3. Travel	
4. Subsistence	
5. Other: Pilot Studies	300,000.00
Number of Participants/Trainees	Total Participant Trainee Support Costs
	300,000.00

RESEARCH & RELATED Budget {C-E} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTIONS F-K, BUDGET PERIOD 3

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2026

End Date*: 03-31-2027

Budget Period: 3

F. Other Direct Costs	Funds Requested (\$)*
1. Materials and Supplies	
2. Publication Costs	
3. Consultant Services	
4. ADP/Computer Services	
5. Subawards/Consortium/Contractual Costs	
6. Equipment or Facility Rental/User Fees	
7. Alterations and Renovations	
8. Seminars	6,615.00
Total Other Direct Costs	6,615.00

G. Direct Costs	Funds Requested (\$)*
Total Direct Costs (A thru F)	348,624.00

H. Indirect Costs			
Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)*
1. Institutional IDC Cost On Campus	61.0	348,624.00	212,661.00
Total Indirect Costs			212,661.00
Cognizant Federal Agency			
(Agency Name, POC Name, and POC Phone Number)			

I. Total Direct and Indirect Costs	Funds Requested (\$)*
Total Direct and Indirect Institutional Costs (G + H)	561,285.00

J. Fee	Funds Requested (\$)*

K. Total Costs and Fee	Funds Requested (\$)*
	561,285.00

L. Budget Justification*	File Name: Budget_Justification- Investigator_Development_Core.pdf
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RESEARCH & RELATED Budget {F-K} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTION A & B, BUDGET PERIOD 4

UEI*: LMCJKR5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2027End Date*: 03-31-2028Budget Period: 4

A. Senior/Key Person									
Prefix	First Name*	Middle	Last Name*	Suffix	Project Role*	Base Salary (\$)	Calendar Months	Academic Months	Summer Months
		Name				Requested Salary (\$)*	Requested Salary (\$)*	Fringe Benefits (\$)*	Funds Requested (\$)*
1.	Oscar		Gomez	Ph.D	Co-investigator	137,300.00	1.0	8,838.00	6,035.00
2.	Gregory		Wilding	Ph.D	Co-investigator	225,082.00	0.6	5,303.00	3,621.00
3.	Ekatarina		Noyes	Ph.D	Co-investigator	225,082.00	0.6	5,303.00	3,621.00
4. Rev.	Kinzer		Pointer		Collaborator	16,561.00	1.2	6,624.00	2,848.00
Total Funds Requested for all Senior Key Persons in the attached file									
Additional Senior Key Persons: File Name:									42,193.00

B. Other Personnel									
Number of Personnel*	Project Role*	Calendar Months	Academic Months	Summer Months	Requested Salary (\$)*	Fringe Benefits*	Funds Requested (\$)*		
	Post Doctoral Associates								
	Graduate Students								
	Undergraduate Students								
	Secretarial/Clerical								
0	Total Number Other Personnel				Total Other Personnel		0.00		
							Total Salary, Wages and Fringe Benefits (A+B)		
							42,193.00		

RESEARCH & RELATED Budget (A-B) (Funds Requested)

RESEARCH & RELATED BUDGET - SECTION C, D, & E, BUDGET PERIOD 4

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2027

End Date*: 03-31-2028

Budget Period: 4

C. Equipment Description

List items and dollar amount for each item exceeding \$5,000

Equipment Item

Funds Requested (\$)*

Total funds requested for all equipment listed in the attached file

Total Equipment 0.00

Additional Equipment: File Name:

D. Travel

Funds Requested (\$)*

1. Domestic Travel Costs (Incl. Canada, Mexico, and U.S. Possessions)

2. Foreign Travel Costs

Total Travel Cost 0.00

E. Participant/Trainee Support Costs

Funds Requested (\$)*

1. Tuition/Fees/Health Insurance

2. Stipends

3. Travel

4. Subsistence

5. Other: Pilot Studies

300,000.00

Number of Participants/Trainees

Total Participant Trainee Support Costs

300,000.00

RESEARCH & RELATED Budget {C-E} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTIONS F-K, BUDGET PERIOD 4

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2027

End Date*: 03-31-2028

Budget Period: 4

F. Other Direct Costs	Funds Requested (\$)*
1. Materials and Supplies	
2. Publication Costs	
3. Consultant Services	
4. ADP/Computer Services	
5. Subawards/Consortium/Contractual Costs	
6. Equipment or Facility Rental/User Fees	
7. Alterations and Renovations	
8. Seminars	5,463.00
Total Other Direct Costs	5,463.00

G. Direct Costs	Funds Requested (\$)*
Total Direct Costs (A thru F)	347,656.00

H. Indirect Costs			
Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)*
1. Institutional IDC Cost On Campus	61.0	347,656.00	212,070.00
		Total Indirect Costs	212,070.00
Cognizant Federal Agency			
(Agency Name, POC Name, and POC Phone Number)			

I. Total Direct and Indirect Costs	Funds Requested (\$)*
Total Direct and Indirect Institutional Costs (G + H)	559,726.00

J. Fee	Funds Requested (\$)*

K. Total Costs and Fee	Funds Requested (\$)*
	559,726.00

L. Budget Justification*	File Name: Budget_Justification- Investigator_Development_Core.pdf
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RESEARCH & RELATED Budget {F-K} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTION A & B, BUDGET PERIOD 5

UEI*: LMCJKR5W5R81
Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2028 End Date*: 03-31-2029 Budget Period: 5

A. Senior/Key Person									
Prefix	First Name*	Middle	Last Name*	Suffix	Project Role*	Base Salary (\$)	Calendar Months	Academic Months	Summer Months
		Name				Requested Salary (\$)*	Requested Salary (\$)*	Fringe Benefits (\$)*	Funds Requested (\$)*
1.	Oscar		Gomez	Ph.D	Co-investigator	140,046.00	1.0	8,838.00	6,035.00
2.	Gregory		Wilding	Ph.D	Co-investigator	229,584.00	0.6	5,303.00	3,621.00
3.	Ekatarina		Noyes	Ph.D	Co-investigator	229,584.00	0.6	5,303.00	3,621.00
4. Rev.	Kinzer		Pointer		Collaborator	16,892.00	1.2	6,757.00	2,906.00
Total Funds Requested for all Senior Key Persons in the attached file									
Additional Senior Key Persons: File Name:									Total Senior/Key Person
									42,384.00

B. Other Personnel									
Number of Personnel*	Project Role*	Calendar Months	Academic Months	Summer Months	Requested Salary (\$)*	Fringe Benefits*	Funds Requested (\$)*		
	Post Doctoral Associates								
	Graduate Students								
	Undergraduate Students								
	Secretarial/Clerical								
0	Total Number Other Personnel				Total Other Personnel		0.00		
							Total Salary, Wages and Fringe Benefits (A+B)		
							42,384.00		

RESEARCH & RELATED Budget (A-B) (Funds Requested)

RESEARCH & RELATED BUDGET - SECTION C, D, & E, BUDGET PERIOD 5

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2028

End Date*: 03-31-2029

Budget Period: 5

C. Equipment Description		Funds Requested (\$)*
List items and dollar amount for each item exceeding \$5,000		
Equipment Item		
Total funds requested for all equipment listed in the attached file		
Total Equipment		0.00
Additional Equipment: File Name:		

D. Travel	Funds Requested (\$)*
1. Domestic Travel Costs (Incl. Canada, Mexico, and U.S. Possessions)	
2. Foreign Travel Costs	
Total Travel Cost	0.00

E. Participant/Trainee Support Costs	Funds Requested (\$)*
1. Tuition/Fees/Health Insurance	
2. Stipends	
3. Travel	
4. Subsistence	
5. Other: Pilot Studies	300,000.00
Number of Participants/Trainees	Total Participant Trainee Support Costs
	300,000.00

RESEARCH & RELATED Budget {C-E} (Funds Requested)

RESEARCH & RELATED BUDGET - SECTIONS F-K, BUDGET PERIOD 5

UEI*: LMCJKRFW5R81

Budget Type*: ☒ Project ☐ Subaward/Consortium

Enter name of Organization: The Research Foundation for SUNY on behalf of U. at Buffalo

Start Date*: 04-01-2028

End Date*: 03-31-2029

Budget Period: 5

F. Other Direct Costs	Funds Requested (\$)*
1. Materials and Supplies	
2. Publication Costs	
3. Consultant Services	
4. ADP/Computer Services	
5. Subawards/Consortium/Contractual Costs	
6. Equipment or Facility Rental/User Fees	
7. Alterations and Renovations	
8. Seminars	4,283.00
Total Other Direct Costs	4,283.00

G. Direct Costs	Funds Requested (\$)*
Total Direct Costs (A thru F)	346,667.00

H. Indirect Costs			
Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)*
1. Institutional IDC Cost On Campus	61.0	346,667.00	211,466.00
		Total Indirect Costs	211,466.00
Cognizant Federal Agency			
(Agency Name, POC Name, and POC Phone Number)			

I. Total Direct and Indirect Costs	Funds Requested (\$)*
Total Direct and Indirect Institutional Costs (G + H)	558,133.00

J. Fee	Funds Requested (\$)*

K. Total Costs and Fee	Funds Requested (\$)*
	558,133.00

L. Budget Justification*	File Name: Budget_Justification- Investigator_Development_Core.pdf
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RESEARCH & RELATED Budget {F-K} (Funds Requested)

Budget Justification: Investigator Development Core

A. Personnel Salaries and Wages

Senior/Key Personnel

Oscar Gomez, MD, PhD

- Director, Investigator Development Core
- Effort: 1.0 academic months (Institutional support years 1-5: 0.50 academic months)

Dr. Gomez is an Associate Professor of Pediatrics, School of Medicine and an active advocate of recruiting underrepresented minorities in medical science to training programs. He is a member of the Harold Amos Medical Faculty Development Program of The Robert Wood Johnson Foundation, first as a scholar beginning 2009, and later as an alumnus beginning in 2012. This program is dedicated to career development of underrepresented minorities in medical science in the US. He is co-investigator and associate lead of the CTSI-associated KL2-mentored research award program in which he serves as a faculty advisor for early-career scholars. He conducts studies on the epidemiology of childhood diarrhea among children in low- and middle-income countries in Latin America and studies on hepatitis C- exposure and infection among infants in Buffalo, a condition that disproportionately impacts communities that experience adverse social determinants of health.

Responsibilities:

- Lead the Investigator Development Core
- Collaborate with Administrative Core in managing pilot project award announcements
- Coordinate training and mentoring activities
- Serve on Center of Excellence Leadership Team

Pastor Kinzer Pointer, MM

- Co-Director, Investigator Development Core
- Effort: Independent Contractor

Pastor Pointer is the pastor of Liberty Missionary Baptist Church, President and CEO of Greater Buffalo United Ministries and Chair, Erie County Poverty Committee. He is a mentor in the National Medical Association and has worked for the past five years with Drs. Murphy and Gomez on the T35 training grant "Training the Next Generation of Clinician Scientists." He co-teaches a course in the medical school with Dr. Henry Taylor, "Health in the Neighborhood," in which students review key literature and meet with and work with community members in their neighborhoods. Pastor Pointer also serves on the Board of the Community Health Equity Research Institute.

Responsibilities

- Co-Director of Investigator Development Core (IDC)
- Provide guidance and contribution to IDC
- Provide mentorship to pilot study awardees
- Serve on Center of Excellence Steering Committee

Henry Taylor, PhD

- Co-Investigator, Investigator Development Core
- Co-Investigator, Community Engagement and Dissemination Core
- Effort as needed

Dr. Taylor is Professor of Urban and Regional Planning, School of Architecture and Planning, Director of the Center for Urban Studies; and Associate Director, UB Community Health Equity Research Institute. His areas of expertise include urban development, housing, gentrification, underdeveloped neighborhoods, shrinking cities, race and class, and U.S.-Cuba relations. His research focuses on a historical and contemporary analysis of underdeveloped urban neighborhoods, social isolation, and race and class issues among people of color, especially African Americans and Latinos. Dr. Taylor designed and conducts the *Urban Internship Program*, which creates opportunities for graduate and undergraduate students to

become involved in neighborhood redevelopment initiatives and research projects. He has trained numerous students in this program over the years. He is also the Co-leader of the CTSI Workshop series in Health Equity.

Responsibilities:

- Provide guidance and contribution to the Community Engagement and Dissemination Core
- Provide guidance and contribution to the Investigator Development Core
- Serve on Center of Excellence Steering Committee
- Serve as Center of Excellence advocate to selected pilot studies awardees
- Facilitate partnerships and collaborations in the School of Architecture and Planning
- Help identify mentors for pilot studies awardees as needed

Ekaterina Noyes, PhD, MPH

- Co-Investigator, Investigator Development Core
- Effort: 0.60 calendar months (Institutional support years 1-5: 0.30 calendar months)

Dr. Noyes is Professor and Director of the Division of Public Health Services Policy and Practice in the UB School of Public Health and Health Professions. She has broad experience in health services research with expertise in health outcomes and quality of care assessment, large administrative data analytics, comparative effectiveness, and economic evaluations in healthcare, as well as mixed methods and implementation research. She has a particular interest in rural health and associated health disparities. She builds and trains interdisciplinary teams supported by a variety of federal and private sources including the NIH, PCORI, National Multiple Sclerosis Society, among others. Dr. Noyes is Co-PI of a K12 training grant focused on training in implementation science (K12HL138052) and Director of the Team Science and Workforce Development Cores of the CTSI.

Responsibilities:

- Provide guidance and contribution to the Investigator Development Core
- Serve as Center of Excellence advocate to selected pilot studies awardees
- Help identify mentors for pilot studies awardees as needed
- Facilitate partnerships and collaborations in the School of Public Health and Health Professions
- Connect pilot studies awardees with CTSI educational and training opportunities

Gregory Wilding, PhD

- Co- Investigator, Investigator Development Core
- Effort: 0.60 calendar months (Institutional support years 1-5: 0.30 calendar months)

Dr. Wilding is Professor of Biostatistics in the School of Public Health and Health Professions and Director of the Biostatistics, Epidemiology, and Research Design (BERD) Core of the CTSI. He has over 230 papers in peer-reviewed clinical and statistical journals and has presented his work nationally and internationally. He is skilled in a vast array of statistical analysis techniques and computer programming languages. His biostatistical interests are in the areas of clinical trials, computationally intensive methods, and tests for and measures of independence. He designed and launched the highly successful *inter* *Instit te or iostatisti s* for undergraduate students to attract talented and interested students into the field of biostatistics.

Responsibilities:

- Provide guidance and contribution to the Investigator Development Core
- Provide study guidance in design, biostatistical and data management to pilot studies awardees
- Link researchers with biostatistics faculty with appropriate expertise to serve as collaborators on pilot projects and subsequent larger projects.

Other Direct Costs**Pilot Studies** \$300,000/year

Funds are requested for pilot studies for early-career investigators. Pilot studies awards will be up to \$50,000 per year for up to two years as outlined in detail in the proposal.

Seminar expenses \$7,500/year

Funds are requested to conduct a monthly seminar series. We will invite national experts in minority health and health disparities for some seminars and local experts for others.

RESEARCH & RELATED BUDGET - Cumulative Budget

	Totals (\$)	
Section A, Senior/Key Person		2,000,000 hu .
Section B, Other Personnel		0 hu .
Total Number of Other Personnel	0	
Total Salary, Wages and Fringe Benefits (ApB)		2,000,000 hu .
Section C, Equipment		0 hu .
Section D, Travel		0 hu .
1. Domestic	0 hu .	
2. Foreign	0 hu .	
Section E, Participant/Trainee Support Costs		1,500,000 hu .
1. Tuition/Fees/Health Insurance	0.00	
2. Stipends	0 hu .	
3. Travel	0 hu .	
4. Subsistence	0 hu .	
5. Other	1,500,000 hu .	
9. Number of Participants/Trainees	0	
Section F, Other Direct Costs		39,952 hu .
1. Materials and Supplies	0 hu .	
2. Publication Costs	0 hu .	
3. Consultant Services	0 hu .	
4. ADP/Congrater Services	0 hu .	
5. Subawards/Consortium /Contractual Costs	0 hu .	
9. Equipment or Facility Rental/User Fees	0 hu .	
10. Alterations and Renovations	0 hu .	
8. Other 1	39,952 hu .	
0. Other 2	0 hu .	
1. Other 3	0 hu .	
11. Other 4	0 hu .	
12. Other 5	0 hu .	
13. Other 9	0 hu .	
14. Other h	0 hu .	
15. Other 8	0 hu .	
19. Other 0	0 hu .	
10. Other 1.	0 hu .	
Section G, Direct Costs (Attributable)		1,440,000 hu .
Section H, Indirect Costs		1,94,852 hu .

Section I, Total Direct and Indirect Costs (Group H)	2,811,511u .
Section J, Fee	. u .
Section K, Total Direct and Fee (Group J)	2,811,511u .

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OMB Number: 0925-0001

Expiration Date: 01/31/2026

1. Vertebrate Animals Section

Are vertebrate animals euthanized? ☐ Yes ☒ No

If "Yes" to euthanasia

Is the method consistent with American Veterinary Medical Association (AVMA) guidelines?

☐ Yes ☐ No

If "No" to AVMA guidelines, describe method and provide scientific justification

.....

2. *Program Income Section

*Is program income anticipated during the periods for which the grant support is requested?

☐ Yes ☒ No

If you checked "yes" above (indicating that program income is anticipated), then use the format below to reflect the amount and source(s). Otherwise, leave this section blank.

*Budget Period	*Anticipated Amount (\$)	*Source(s)
----------------	--------------------------	------------

PHS 398 Cover Page Supplement

3. Human Embryonic Stem Cells Section

*Does the proposed project involve human embryonic stem cells? ☐ Yes ☒ No

If the proposed project involves human embryonic stem cells, list below the registration number of the specific cell line(s) from the following list: http://grants.nih.gov/stem_cells/registry/current.htm. Or, if a specific stem cell line cannot be referenced at this time, check the box indicating that one from the registry will be used:

☐ Specific stem cell line cannot be referenced at this time. One from the registry will be used.

Cell Line(s) (Example: 0004):

4. Human Fetal Tissue Section

*Does the proposed project involve human fetal tissue obtained from elective abortions? ☐ Yes ☒ No

If "yes" then provide the HFT Compliance Assurance

If "yes" then provide the HFT Sample IRB Consent Form

5. Inventions and Patents Section (Renewal applications)

*Inventions and Patents: ☐ Yes ☒ No

If the answer is "Yes" then please answer the following:

*Previously Reported: ☐ Yes ☐ No

6. Change of Investigator/Change of Institution Section

☐ Change of Project Director/Principal Investigator

Name of former Project Director/Principal Investigator

Prefix:

*First Name:

Middle Name:

*Last Name:

Suffix:

☐ Change of Grantee Institution

*Name of former institution:

PHS gC8 Research Plan

5 D B Number: 9C2V-9991

Expiration Oate: 91/g1/2927

Introduction

1. Introduction to Application

(for Resubmission and Revision applications)

Research Plan Section

2. Specific Aims

Aims_Inv_Oev_3 ore.pdf

g. Research Stratey*0

Inv_Oev_3 ore_Research_Stratey*.pdf

4. Proyress Report Publication List

5ther Research Plan Section

V. 6ertebrate Animals

7. Select Ayent Research

M D ultiple PO/PI Leadership Plan

8. 3onsortium/3ontractual Arranyements

C. Letters of Support

19. Resource Shariny Plan(s)

11. 5ther Plan(s)

12. Authentication of Ke* Biological and/or
3hemical Resources

Appendix

1g. Appendix

C. Investigator Development Core

C1. Specific Aims

Social determinants of health (SDOH) and racially informed policies dramatically affect health outcomes among people of color, including life expectancy and quality of life resulting from chronic diseases (see Overall). Advances in biomedical sciences and health interventions dramatically increased in recent decades; unfortunately, these advances do not reach underserved populations, including East Side neighborhoods in Buffalo. Understanding the root causes of health disparities in Buffalo and the complexity of factors involved, requires the training of a new generation of scholars to lead research in minority health and health disparities and achieve changes in policies and institutional structures to address and eliminate health disparities. Researchers who are new to the field face multiple challenges. Because of lack of diversity in the research workforce, many researchers lack the insight lived experiences bring to understanding systemic racism and the effects of discrimination and their impact on health disparities. A diverse workforce is more successful in engaging people from underrepresented groups in research and relevant stakeholders in policy making. Research related to racism and discrimination requires a multidisciplinary, broadly engaged, team science approach, which merges team science and community engagement (1).

While UB has faculty in a broad range of disciplines who perform research related to health disparities, there is an urgent need to train a new generation of researchers to address the multiple dimensions of health disparities in the region. The Investigator Development Core (IDC) will prepare early-stage investigators, including junior faculty and postdoctoral fellows, with the skills, support, training and mentoring to conduct research in minority health and health disparities (**Figure C1**). Our NIMHD Center of Excellence in Investigator Development and Community Engagement (Center of Excellence) will support and encourage research in populations experiencing health disparities, including racial and ethnic minorities, people with low socioeconomic status, underserved rural communities and sexual and gender minority communities. Because of the disturbing health disparities in Buffalo, a majority minority city, we place special emphasis on the structural and institutional racism accounting for adverse social determinants of health (SDOH) leading to health inequities in people of color in the Buffalo area. The tools and approaches our researchers develop in Buffalo will apply to other racially segregated cities as well.



Figure C1. Overview of investigator development, training, mentoring, and support. D and I: dissemination and implementation; CBPR: community-based participatory research

Two of the most important elements for early-stage investigators to successfully establish their own independent research program are

1) training and mentoring and 2) funding to support the development of preliminary results to be competitive for larger extramural grants. Our Investigator Development Core (IDC) is designed with these goals in mind.

The IDC will support and develop early-stage investigators with a goal of nurturing independent investigators supported by extramural NIH or similar funding (e.g., Patient-Centered Outcomes Research Institute (PCORI), National Science Foundation (NSF), etc.). We will work with the Community Engagement and Dissemination Core to guide early-stage investigators in developing multidisciplinary collaborations between researchers, practice settings and diverse communities. To accomplish these goals, we propose the following specific aims:

Aim 1. Attract, mentor and train early career investigators from a broad range of disciplines in transdisciplinary research in minority health and health disparities, including offering the opportunity to apply for pilot studies awards addressing health inequities and social determinants of health in the Buffalo region.

Aim 2. Implement a diversity, equity, inclusion, and accessibility (DEIA) Action Plan and leverage the resources and expertise of the proposed Center of Excellence to increase and diversify our workforce, especially in health disparities research.

Aim 3. Provide expert training and mentoring in rigorous research design, methodology, statistical analysis and community-based participatory research to early-career investigators to support their research and advance their careers in minority health and health disparities research.

C2. Significance

Research on health disparities has grown exponentially since the 1960s, yet this expansion is not matched by an associated level of progress (2). This contradiction may be due, in part, to the limited number of health disparity researchers to address the overwhelming issues of health disparities, social justice, and structural racism in the US (3). Similarly, there is low racial and ethnic diversity in US universities among faculty, including early-stage investigators, with only 3% identifying themselves as Black or Hispanic (4). Increasing the number of investigators from underrepresented minority groups may have a positive impact on research addressing the health disparities associated with poor health indicators affecting minorities and low-income families in the US (5). Few mentoring programs address the needs of underrepresented, racially/ethnically diverse junior faculty conducting health-related research in the US (6, 7). There is an urgent need for programs to train early-career investigators in minority health and health disparities research.

C3. Innovation

Integration of the community with all phases of training. One theme of our Center of Excellence is integration of community throughout. Pastor Kinzer Pointer, an influential community leader, teacher, and mentor in the National Medical Association, is Associate Director of this Investigator Core (IDC). We will assist early career researchers who are invited to submit a full proposal for pilot studies funding in engaging a community member on their research team and/or as a member of their mentoring team.

Close affiliation with resources of the Clinical and Translational Science Institute (CTSI). The Center of Excellence and CTSI share leadership. Several faculty with effort on this proposal also have effort on the CTSA grant. The CTSI offers an extensive range of support services that are available at no cost to UB faculty and researchers. Indeed, the CTSI prioritizes supporting early-career researchers. Early-career scientists supported by the Center of Excellence are invited to join the Community of Scholars, which includes the CTSI K scholars and other “K-like scholars” in the university. The Community of Scholars is a collegial body of junior scientists who meet regularly, grow academically, broaden their professional networks, and get involved in community outreach activities.

Multidisciplinary early career researchers and mentors. Elimination of health disparities will require addressing all the SDOH, including those outside of healthcare disciplines. The leadership of the IDC represents broad expertise and backgrounds. The structure of the Center of Excellence being embedded in a university-wide institute is ideally designed to engage early-stage researchers and mentors from all 12 UB schools that encompass a broad range of relevant disciplines (see Figure B1 in Administrative Core).

Innovative DEIA action plan. As part of our commitment to better recruit, support, and retain diverse faculty, staff and trainees in academic medicine, we will implement a Diversity, Equity, Inclusion, and Accessibility (DEIA) Action Plan for all faculty, staff, trainees, and mentors in the Center of Excellence. The plan requires action by every member and each action has a follow-up, enabling accountability. This approach is showing early results in changing the culture to overcome longstanding systemic barriers to diversifying the workforce and enhancing inclusion in healthcare and research institutions (8).

Leveraging an institutional faculty hiring initiative to diversify faculty. The exceptional hiring initiative in progress at UB is a potentially powerful opportunity to enhance the diversity of our faculty and to recruit more faculty whose work interfaces with health disparities. We developed strategies for faculty in the Center of Excellence and the UB Health Equity Institute to take active roles and influence recruitments.

Mentoring and training plans tailored to each scholar. A mentoring and training plan will be tailored for each early-stage investigator supported by the Center of Excellence to be responsive to the diverse backgrounds and strengths of each scholar. An IDC faculty advocate will be assigned and will work with the scholar to develop the plan, which will include a balance of one-on-one mentoring, peer mentoring, didactic training, and professional development.

C4. Action Plan for Aims

C4.1. Action Plan for Aim 1.

Aim 1. Attract, mentor, and train early-career investigators from a broad range of disciplines in transdisciplinary research in minority health and health disparities, including offering the opportunity to apply for pilot studies awards addressing of health inequities and social determinants of health in the Buffalo region.

To expand the pool of and train early-career investigators, the IDC will offer 1) pilot studies awards with funding for one to two years (maximum award \$50,000 annually); 2) comprehensive support in designing and writing the pilot studies proposals; 3) facilitation with community partners to collaborate on the project; 4) access to research resources, facilitated by close partnership with the CTSI; 5) mentoring to support awardees to ensure successful completion of projects to publication of results and submission of subsequent grant applications; 6) regulatory oversight and support to comply with applicable policies, rules and guidelines; 7) development of a dissemination and implementation plan and 8) didactic training, including lectures and workshops in minority health and health disparities research tailored to individual pilot studies awardees.

Application for Pilot Studies. This section addresses processes to apply for pilot awards. This two-tiered process is guided by our experience with the UB CTSI Translational Pilot Studies Program, which has an ~12:1 return on investment in extramural funding and successfully facilitated first national funding for a substantial number of early-stage investigators (**Figure C2**).

- Community discussions.** In collaboration with the Community Engagement and Dissemination Core, a discussion of community priorities will inform the content of the Request for Proposals (RFP) each year. The overall focus on health disparities and review priorities will remain constant. Community conversations each year will provide guidance on whether we will solicit and prioritize proposals with a particular emphasis, for example, a SDOH, based on community input. The Community Advisory Board will consider community priorities in their quarterly meeting that is scheduled in advance of the release of the RFP each year. In addition, community priorities are a continuous topic of discussion at the monthly meetings of African American Health Equity Task Force (Task Force). This group will be asked specifically to consider priorities during the meeting preceding RFP release.
 - Request for Proposals.** The opportunity to apply for pilot studies awards will be announced annually through email, website postings, social media, direct communication to all UB school leaders and our community dissemination networks. UB has effective communication channels to reach faculty and postdoctoral fellows in all 12 UB schools.
 - Letters of intent (LOIs).** The one-page LOI will include a summary of the project, which must address minority health and/or health disparities; how the award will lead to subsequent funding; and how the project will be a step on a pathway to sustainable, community- and system-level changes. Based on review by a panel of university and community-based reviewers, eight to 12 LOIs will be invited to submit full proposals.
 - Invite full proposals for Pilot Studies.** The proposal (four-page limit) will include Specific Aims, Background and Significance and Approach, in addition to a study timeline, the role of the pilot study in securing extramural funding for a larger project and a path to a sustainable community-level change. The proposal must provide information of community member inclusion as a mentor and/or as a research collaborator.
- Eligibility criteria.** Early-career investigators with appointments at UB are eligible to apply. We use the NIH definition, which is an investigator who completed their terminal research degree or end of post-graduate clinical training (whichever date is later) within the past 10 years and who has not previously competed successfully as a PI for a substantial, NIH independent research award. Clinical and basic science postdoctoral fellows are also eligible and will be encouraged to apply.

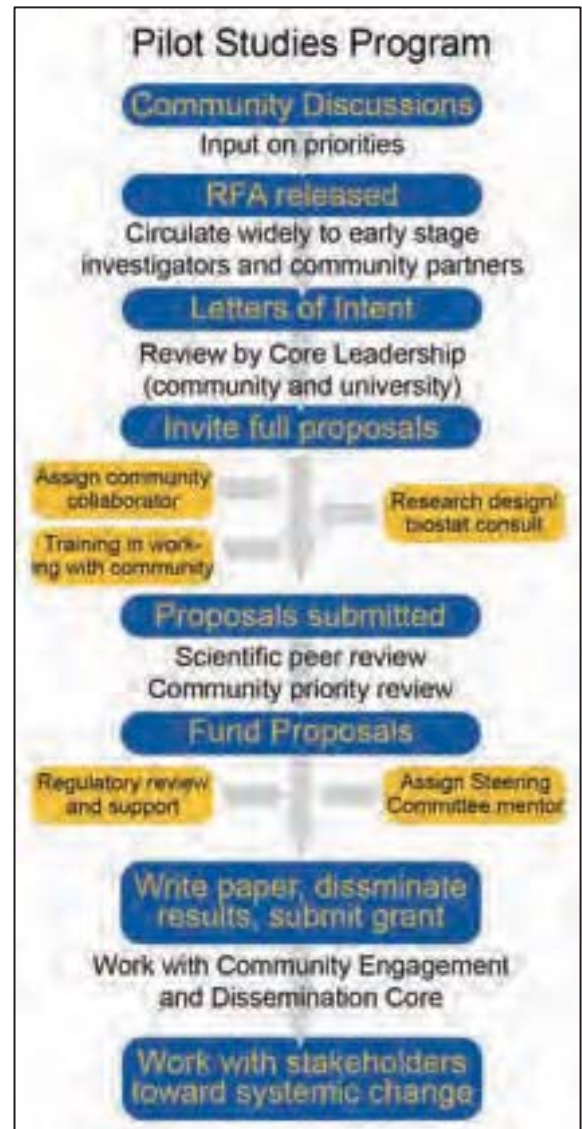


Figure C2. Flow chart for pilot studies program

Pool of applicants. A large pool of early-stage investigators and postdoctoral fellows represent our applicant pool for pilot studies and associated training and mentoring.

Table C1 shows the pool in the six health sciences schools using these criteria. Note that many additional eligible applicants are based in the other six UB schools as well (architecture and planning, arts and sciences, law, education, engineering, management). Each school has a subset of investigators whose work relates to SDOH in a broad range of domains of influence and levels of influence aligning with the NIMHD Research Framework, creating a large and diverse pool of applicants. We will actively recruit applicants who are underrepresented in science (see below).

Table C1. Applicant pool of early-stage investigators* and postdoctoral fellows in UB health sciences schools

Health Science School	Assistant Professors*	Postdoctoral Fellows
Jacobs School of Medicine and Biomedical Sciences	40	83
School of Public Health and Health Professions	8	8
School of Pharmacy and Pharmaceutical Sciences	4	23
School of Nursing	3	2
School of Dental Medicine	7	13
School of Social Work	3	1
Total	65	130
*Early career investigators defined by NIH criteria		

Application materials

- Proposal described above
- A current NIH-style Biosketch for each Investigator. The personal statements should make clear the role of each investigator on the project and describe their interest in health disparities research, including past experience, academic training, current academic work, and short- and long-term goals.
- Letters of Support from mentor and community partner(s) outlining their commitment to the study.
- Budget and Budget Justification. The maximum allowable budget is \$50,000 total for one year. We anticipate many awards will be ~\$50,000. Applicants may apply for one or two-year awards. Funds for pilot projects must follow the Uniform Guidance Cost Principles and comply fully with applicable federal policies, rules, and guidelines for research involving human subjects and vertebrate animals.

Review process of full applications. After conflicts of interest are disclosed, LOIs will be reviewed by the Investigator Development Core (IDC) Team. We will invite approximately twice as many full proposals as we intend to fund. Requiring an LOI increases efficiency for faculty, their support staff and reviewers in ensuring that projects align with our priorities and criteria before many hours go into preparing and reviewing proposals that will be unsuccessful.

Full proposals will undergo peer scientific review by two UB faculty with expertise in areas of health equity based on the content of the proposal. The applications will be rated using the following criteria: 1) Scientific merit and innovation; 2) Significance to the field; 3) Potential impact on health equity; 4) Potential for leading to sustainable systemic changes; 5) Integration of community involvement in the project; 6) Potential for securing extramural funding; 7) Potential for creating a path to independence for the PI and 8) Realistic milestones and feasibility of completion within the time frame requested. We will prioritize projects using approaches encompassing multiple domains of influence (e.g., biological, behavioral, sociocultural, environmental, physical environment, health system) and multiple levels of influence (e.g., individual, interpersonal, family, peer group, community, societal) to understand and address health disparities.

The IDC Team will provide the second level of review based on the scientific peer reviews and Center of Excellence priorities. This review will place emphasis on authentic engagement of community partners, potential for larger extramural funding and potential for sustainable change. Careful review and adjustment of proposed budgets presents an opportunity to ensure that requested expenses are allowable and are critical to successful completion of the project, potentially freeing up funds for additional awards.

C4.2 Action Plan for Aim 2

Aim 2. Implement a diversity equity, inclusion, and accessibility (DEIA) Action Plan and leverage the resources and expertise of the proposed Center of Excellence to increase and diversify our workforce, especially in health disparities research.

Current environment and strengths. Research teams with greater diversity in perspective, lived experience, race, ethnicity and field of study increases creativity and innovation, which leads to results with greater impact (9-12). Diversifying the workforce is critical to expand the scope and creativity of work to solve the complex

problem of health inequities. Indeed, culture change is needed to enhance recruitment and retention of people from diverse backgrounds in research settings (13, 14). Following the designation of UB as a flagship university of the SUNY system in 2022, New York State made a historic investment to grow the ranks of tenure-track faculty. In a transformational initiative, UB will be hiring ~200 new tenure-track faculty over the next couple of years (see UB President and Provost letter). In 2020, UB committed to doubling the number of faculty from historically underrepresented backgrounds by 2025. As signs of early progress, while 10% of faculty hires in 2019 were underrepresented minority, the rate steadily increased to more than 25% in 2022. During the last two years, UB recruited new Deans of four of the six Health Sciences Schools. Two are women (medicine and nursing) and the others are African American (social work) and Latinx (dental medicine). All faculty involved in this proposal are actively involved in the UB hiring initiative in their respective departments and schools. We have developed strategies for our Center of Excellence to leverage this hiring initiative to attract new faculty with interest and expertise in health disparities research and to increase the diversity of our faculty.

As part of our underlying theme of prioritizing health equity at our university, we are committed to training a workforce prepared to confront the structural racism that generated centuries of disparate health outcomes. A critical element to achieving diversity at the faculty level is establishing early pathways to science careers in groups underrepresented in science and medicine. The student population in Buffalo Public Schools, the second largest school district in the state, is 80% underrepresented minority and has one of the lowest high school graduation rates in the state. UB has placed a priority on developing career pathways beginning with elementary schools in Buffalo Public Schools through the faculty level (**Figure C3**).

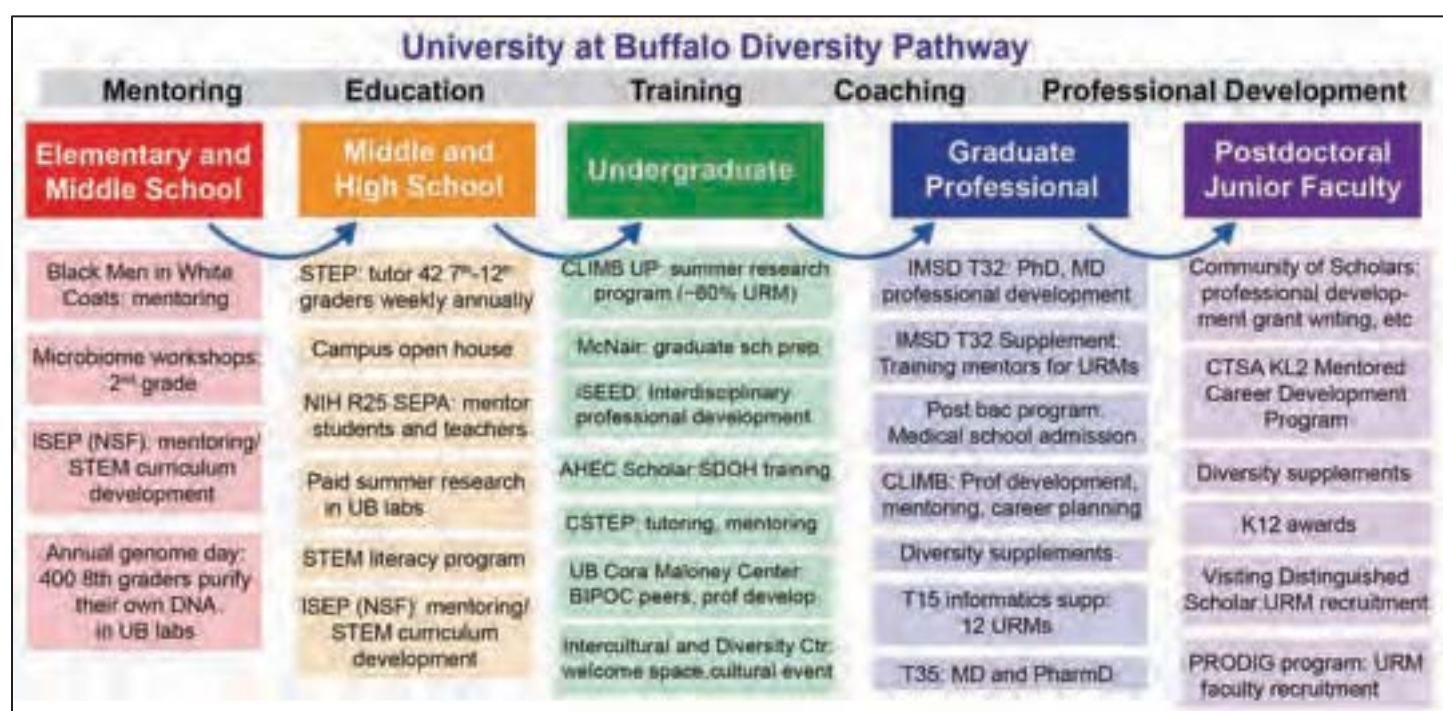


Figure C3. Selected programs in progress at UB to expand and diversify the health sciences and healthcare workforce.

Outcomes of three programs at the graduate/professional and early career faculty levels, are described:

- The **Collaborative Learning and Integrated Mentoring in the Bioscience (CLIMB)** Program, founded in 2009, offers research opportunities, mentoring, and professional development workshops to undergraduates, graduates and postdocs and has had (as of 2022) 588 participants (Current students 44% underrepresented minority [URM]). As of 2022, CLIMB UP has hosted 255 undergraduate students (68% URM) for summer internships. Of these, 103 (40%) have completed or are enrolled in PhD (28), MD (26), MD/PhD (3), Masters (13), DDS (9), PharmD (13), MPH (7), and other (4) programs. Overall, 37 are in UB programs and 66 are at other universities. The CLIMB Program has received national recognition, including the 2020 Inspiring Programs in STEM Award from Diversity Magazine.
- The **Associated Medical Schools of New York (AMSNY) Post Baccalaureate Program**, hosted by UB Jacobs School of Medicine and Biomedical Sciences, has had a substantial regional impact in expanding the pool of physicians from diverse backgrounds. UB hosts a one-year program to prepare underrepresented,

economically and educationally disadvantaged students for medical training in seven NY State medical schools that conditionally accepted them. Of 607 students (all from underrepresented or economically disadvantaged backgrounds) admitted to the program since 1991, 92% matriculated in medical school and 87% graduated. Funded by the NY State Department of Health, we enroll 20-25 students annually (4-5 per year subsequently enroll at UB). All participants attend tuition-free and receive a living stipend from AMSNY.

- **PRODiG ("Promoting Recruitment, Opportunity, Diversity, Inclusion and Growth")** is a SUNY-wide program to increase underrepresented faculty at SUNY in all disciplines and women in STEM fields. Supported by \$2,199,600 in PRODiG funds since 2019, UB hired 26 new faculty, including 12 from underrepresented backgrounds (including 3 women in STEM) and 14 women in STEM fields.

In the context of this comprehensive university commitment to diversifying faculty, our Center of Excellence will strategically and intentionally contribute to recruiting faculty from groups underrepresented in science and medicine.

DEIA Action Plan. As part of our commitment to better recruit, support, and retain diverse faculty, staff and trainees in academic medicine, we will implement a Diversity, Equity, Inclusion, and Accessibility (DEIA) action plan. Institutions have a greater ability than individuals to change culture to overcome longstanding systemic barriers to diversifying the workforce in healthcare and research (12). While our Center of Excellence is not technically an institution, we will implement key elements of a DEIA Action Plan modeled after the plan of Enders et al (8), which won the 2023 JCTS Publication Award at the Association for Clinical and Translational Science (ACTS) 2023 national conference. Our plan considers multiple diversity types since individuals have several social identities that can lead to diminished respect and protection in the workplace (**Table C2**).

Table C2. Diversity Types

Race
Ethnicity
Gender identity
Cultural background
Religious tradition
Body type and size
Age
Socioeconomic background
Physical, cognitive, and social-emotional abilities
Educational level
Sexual orientation
Neurodiversity
Mental health

The plan involves intentional action with accountability by all faculty with effort on the grant (N=~11), staff (N=2), pilot studies awardees (N=20 to 25 over five years) and mentors (N=25 to 30 over five years) (**Table C3**). An awareness of one's unconscious bias is the first step in eliminating bias (15). Each person will take the Black-White Harvard Implicit Association Test and use the results to help inform their equity statement and their own actions. The results will not be shared, but rather will be used by each individual to guide their own views and actions. We will annually anonymously survey individuals who work as part of the Center of Excellence regarding their sense of belonging and inclusion (Questions like: "I feel I belong in the Center of Excellence" Strongly agree, agree etc). Each individual will create an equity statement that includes consideration of individual behaviors, activities related to their position, DEIA training and education, etc. Equity statements will be updated annually and reviewed with the IDC Core Director in the case of trainees and mentors and with the PI in the case of faculty and staff on the grant. We will give annual DEIA awards to faculty, trainees and staff to recognize noteworthy advances in promoting DEIA. We will actively engage the community in faculty and staff recruitment efforts by sharing job postings with our community partners who have extensive communication networks in Buffalo communities and include community members on search committees (with compensation). Exit interviews will be performed by Center of Excellence leadership as part of our continuous efforts to assess our culture and initiate active changes as needed to enhance the sense of inclusion and belonging for faculty, trainees and staff.

Table C3. DEIA Equity Action Plan

Assess unconscious bias
Annual anonymous survey
Equity statements
Update equity statement annually
Consider DEIA in raises and promotion recommendations to department chairs
Annual Center of Excellence DEIA Awards
Engage community in faculty and staff recruitment
Exit interviews to assess environment

This DEIA Action Plan is more than a policy statement. The plan requires action by every member of the Center of Excellence and each action has a follow-up, ensuring accountability. This DEIA Action Plan will be presented to pilot studies applicants and prospective mentors to set the expectation. We will assess the results through the annual anonymous survey, the number and impact of new initiatives that we implement from ideas in annual DEIA statements, and the demographics and characteristics of faculty, staff, pilot study awardees and trainees. The CTSI will implement the same DEIA Action Plan, emphasizing commitment to culture change.

Leveraging an Institutional Faculty Hiring Initiative to Diversify Faculty. Faculty serving on the Cores of our Center of Excellence are all influential faculty in their departments and schools (schools of medicine, nursing, public health, social work, architecture and urban planning). In addition, the Board of the UB Community Health

Equity Research Institute, in which our Center of Excellence is embedded, includes a faculty leader from each of the 12 UB schools. These faculty have significant input and participation in faculty recruitment. As part of our commitment to diversify our faculty and attract more researchers into the field of health disparities research, our Center of Excellence faculty and faculty Board members will proactively engage in faculty recruitment as part of the UB hiring initiative. They will volunteer to serve on and chair selected search committees and will reach out individually to diverse faculty candidates/colleagues in their networks and those who work in health disparities research to encourage them to apply for positions at UB to increase and diversify the pool of applicants. In conversations with junior faculty candidates with interests in health disparities research, the opportunity to apply for pilot studies and mentoring as part of the Center of Excellence is a valuable recruitment tool. When serving on search committees, our faculty will be active in ensuring an inclusive search process through suggesting proven methods, including a session on implicit bias for the search committee, and resisting the exclusion of candidates with qualifications primarily based on institutional pedigree and focus on the candidate's qualifications for the job. These experienced voices will be vocal in considering non-traditional experiences and career pathways.

Our community partners will meet with candidates of color so they may learn about the community and living in Buffalo as a person of color. These meetings have been particularly effective in recent faculty recruitments. Overall, this intentional commitment by respected faculty across multiple disciplines has strong potential for significant impact on recruiting faculty from traditionally underrepresented groups. One example of success with a recent recruit (Dr. Jamal Williams) was shown in Overall. A second recruit Dr. Gillian Franklin, who is already engaging with the Community Health Equity Research Institute and will benefit from the Center of Excellence follows. Drs. Franklin and Williams are excellent candidates to apply for pilot studies awards and train with us.

Gillian Franklin MD PhD MPH joined the Biomedical Informatics Fellowship Program at UB after having completed a postdoc in Environmental Health at the Harvard T.H. Chan School of Public Health. Her research interests focus on environmental and social determinants of health in populations that are likely to encounter health and healthcare disparities. She was appointed Assistant Professor of Biomedical Informatics (tenure track) in 2022 and was awarded a Diversity Supplement to the CTSA (UL1 TR001412-08S3). Her research project studies health literacy, with emphasis on vaccine hesitancy and developing an inferential statistical learning tool to predict individuals likely to refuse complying with public health recommendations.



Gillian Franklin
MD PhD MPH

Training mentors. Retention of faculty goes hand in hand with recruitment, particularly faculty from underrepresented groups, who have lower rates of retention than their overrepresented colleagues (16). Mentoring is critical to retention and to the success of early-career faculty investigators who form the backbone of the research workforce (7). Institutional investment in a mentored research career development program for junior faculty researchers is financially sustainable and enhances participants' grant productivity over multiple years, even after completion of the training (17).

A critical element of effective mentoring is well trained mentors. Competency-based, structured research mentor training improves mentors' skills (18). It is especially important to understand and use approaches that meet the specific needs of faculty from underrepresented groups, who face unconscious bias, diversity pressures, isolation, and racism (7). A systematic review has shown that mentoring programs for minority faculty increases retention, academic productivity, and promotion rates for this group (19).

Each mentor-scholar dyad of pilot study awardee and assigned mentor will attend the mentoring workshop series conducted by the CTSI Workforce Development Core and KL2. This interactive program is designed specifically for mentor-protégé pairs and is offered annually to all faculty and trainees at UB. It includes an in-person format (five one-hour monthly sessions) (**Table C4**) and an online platform to offer resources and host forums (18, 20). Scholars and mentors attending the mentoring training will have the value of multiple viewpoints, more experience, and more feedback from these collaborations. This popular mentor training program, launched in 2016, has been revised and improved based on experience and feedback from those who have completed the program.

Table C4. Mentor-Protege Mentoring Workshop Series

Establishing and Monitoring a Mentoring Relationship
Effective Communication
Conflict Resolution in Mentoring
Creating an Inclusive Learning and Research Environment
Bringing a Mentoring Relationship to a Satisfactory End

C4.3 Action Plan for Aim 3.

Aim 3. Provide expert training and mentoring in rigorous research design, methodology, statistical analysis and community-based participatory research to early-career investigators to support their research and advance their careers in minority health and health disparities research.

Mentoring and support for pilot studies applicants and awardees. In addition to making pilot studies funding available, our proposed plan places strong emphasis on mentoring and supporting early career pilot studies applicants and awardees to maximize their likelihood of success and maximize the impact of their work on the community while advancing careers (**Table C5**). The mentoring begins while preparing proposals (see yellow boxes in **Figure C1** above). At the time of invitation to write a full proposal, our Core will work with the applicant to link them with appropriate community partners as needed. The pilot study applicant will also meet with Dr. Gregory Wilding, Professor of Biostatistics, a member of the IDC Team and expert in research design and biostatistics, to provide input as the proposal is being planned. Dr. Wilding may assign a biostatistics colleague with appropriate expertise to work with the applicant. Based on our CTSI experience, this often leads to new collaborations with biostatisticians and inclusion as co-investigators on the pilot studies, increasing the rigor of the proposal. The IDC will also work with awardees to ensure access to appropriate research resources, particularly the extensive resources through the CTSI, which are available to all UB faculty and scholars at no charge.

When proposals are funded, a faculty member of the IDC Team will be assigned to each awardee to ensure an effective mentoring committee and mentoring plan are in place, assist in linking with appropriate resources, troubleshoot any obstacles and meet every two months to ensure continued progress. We anticipate most awardees (early-career assistant professors and postdocs) will have mentors and mentoring committees in their home departments. The assigned IDC Team advocate will assess the existing mentoring team to ensure that mentor(s) have appropriate expertise and experience in minority health and health disparities research. In the case that a scholar would benefit from an additional mentor(s), the IDC Team member will work with the scholar and the existing mentoring team to identify a mentor with appropriate expertise. In some cases, this may include mentors from outside UB, including other academic institutions, or in some cases, stakeholders outside of academia. Either way, the IDC Team member will serve as an advocate and facilitator as their project and career progress. Members of the IDC Team and Center of Excellence Leadership team are well connected nationally in health equity research, facilitating collaboration and mentoring opportunities beyond UB as needed. The approach is not intended to replace current mentors, but rather to complement mentoring teams to the benefit of the scholars.

Table C5. Mentoring and support for pilot study applicants and awardees

Coaching session to write proposals
Training in working with community
Link with community partners
Mentor-protégé workshop series
Research design and biostatistics support
Link with relevant CTSI cores
Expert research compliance support
Assign advocate/mentor from Center of Excellence
Include community partner on each mentoring committee
Didactic training in health disparities
Join Community of Scholars
Grant writing workshops
Communication of research findings

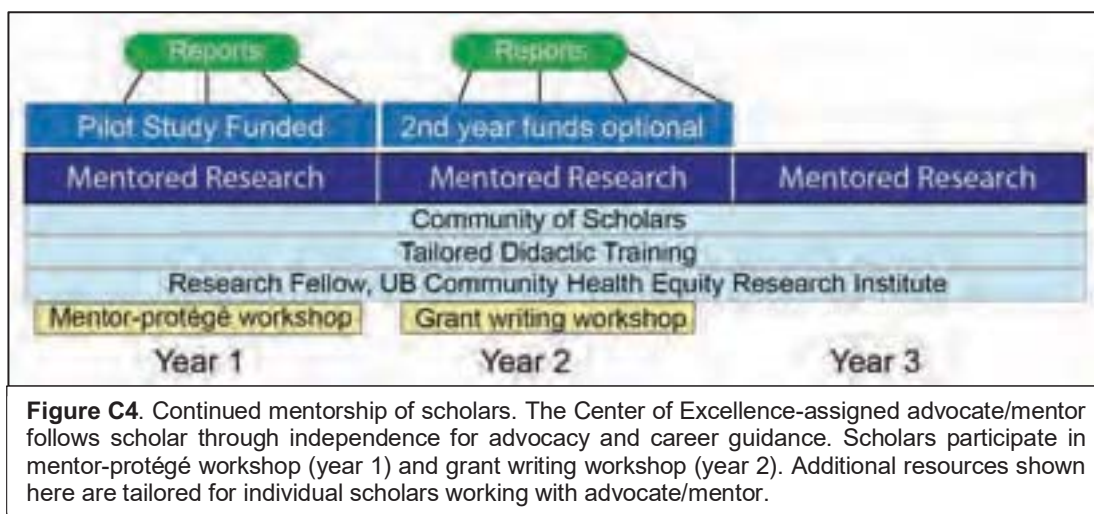
Qualifications and research experience of mentoring teams. In evaluating mentor qualifications, we will use the same criteria applied to mentors of NIH training grants. Mentors will be expected to have extramural funding, a track record of successful mentoring of postdocs and early career faculty and publications in peer reviewed journals. Their research will have a focus on health disparities in the general or related domain of that of the scholar. Mentors can be faculty in any of the 12 UB schools, depending on the focus of the scholars' work, creating a large pool of qualified mentors. Mentors assigned by the Center of Excellence will undergo mentor training described in Aim 2.

Sustained mentorship. As noted above, a member of the IDC will be assigned to each pilot studies award recipient to oversee and guide career mentoring, which will proceed in cooperation with the scholars' own department-based mentoring. Mentoring teams will provide guidance for scholars to apply for extramural funding tailored to their career paths toward independence. The most likely funding pathway for assistant professors will be either individual K awards or R01s (or similar mechanisms), depending on career stage, publication record and any funding history. Postdoctoral scholars will be candidates for F32, K awards or R-like awards. We envision some scholars from this program being excellent candidates for the CTSA-linked KL2 mentored career development program, which has been highly successful in training early career faculty to become independent investigators.

Research mentoring and career guidance will continue through independence. Additional mechanisms for continued guidance include participating in the Community of Scholars, selected didactic training aligning with

the scholars' interest (**Table C6** below), access to annual grant writing workshops and regular meetings with the Center of Excellence-assigned advocate (**Figure C4**).

Pilot studies recipients will also be invited to become Research Fellows of the Health Equity Institute, which include faculty and trainees with an interest and commitment to research in health disparities. Fellows can receive assistance in developing their research ideas and grant applications, have their research papers and grant applications



critiqued and participate in selected projects that align with their research and career interests. These fellows may also receive assistance in building community partnerships and developing interactive relationships with East Side neighborhood residents. The Health Equity Institute hosts an annual research day, which is an interactive event where research is shared and presented and with opportunities for new research collaborations and community partnerships.

Compliance with federal regulations and NIH policies. The Health Equity Institute Administrator will meet with each pilot study awardee and their team to review requirements, conditions of funding and to address any questions. They will together work with the UB Sponsored Projects Office to assist and ensure compliance with Federal policies, rules, and guidelines for research involving human subjects and vertebrate animals, from the pre-approval process and throughout the study. All human subjects research at UB goes through the AAHRPP-accredited UB IRB, which acts as the regional IRB through affiliation agreements with our hospital partners, Kaleida Health and Erie County Medical Center. The CTSI performs IRB pre reviews on all protocols submitted to the IRB and works with PIs to prepare protocols that follow all the required guidelines. These pre reviews reduce IRB turnaround time substantially by ensuring submission of well-prepared IRB protocols.

Training in working with the community. A priority expressed consistently by our community partners during our many planning discussions for this proposal was that early career investigators undergo training in working with communities. Many academic researchers have limited knowledge of emerging science and processes for effectively engaging communities, especially researchers who are new to working with communities (21). It is critical that our researchers recognize the community as an asset that can show them how to understand and address social determinants of health, advance trainees' ability to work hand in hand with community members, and increase the impact of their research discoveries (22, 23).

We will develop an interactive workshop series in working with communities that will be required of all pilot studies awardees and will be available to all researchers. The module will be tailored to working with communities in the Buffalo region and modeled after successful existing programs (21, 24). Community members with effort on this proposal will lead the training module with the participation of the Community Advisory Board (see Administrative Core) and with support by expert faculty on this Core and the Health Equity Institute Administrator. The training module will emphasize understanding and training in cultural humility, an orientation based on self-reflection; appreciation of community members' expertise on the social and cultural context of their lives; and willingness to share authority, credit for success and responsibility for failure (25-27). Cultural humility means admitting what one does not know and is willing to learn from community members who experience adverse social determinants of health. In addition to training in cultural humility, the workshops will include implicit bias training, consideration of the value of community engaged research, principles of CBPR, and interacting with community members.

Didactic Training in Minority Health and Health Disparities. In addition to providing mentoring, the IDC will offer a didactic research training program directed to early career investigators, including pilot studies program applicants and awardees, and make the educational offerings available widely to the UB community. We have

carefully designed a program adding value to early-stage investigators but is mindful of the importance of managing time for performing research. The program will be a combination of new training modules developed specifically as part of this proposal and leveraging rich and valuable existing educational opportunities in the UB environment, particularly those offered by the CTSI. This approach facilitates networking and collaboration opportunities for our investigators and ensures the feasibility of this plan from a budgetary perspective in that we are not launching all these educational modules from scratch. **Table C6** lists the didactic training in which pilot studies awardees will participate. We will also invite and encourage LOI and full proposal applicants whose projects were not chosen each year and other early-stage investigators to participate.

- Coaching sessions for LOIs and full proposal submission. These sessions are designed to assist investigators in becoming more successful in writing pilot studies proposals for basic biomedical, behavioral, clinical and/or population health research on diseases and conditions that disproportionately affect the health and well-being of ethnic minority and other underserved and marginalized communities (28). We will offer a session on how to write high quality LOIs and a second session on writing research proposals to the pilot research program. During these sessions, applicants will receive tips on how to make the LOI objective, focused and responsive to the RFA. Those applicants, who after submitting LOIs are invited to submit full applications, will have the opportunity to attend another session to receive tips on how to write a high-quality research proposal.

Table C6. Didactic training modules for early-stage investigators

Training Module	New or existing	Sessions per year	Hours per year
For all pilot studies awardees:			
Pilot Studies Symposium	New	1	4
Monthly seminar series	New	12	12
Annual Health Equity Institute Research Day	Existing	1	8
Igniting Hope Conference Series	Existing	1	8
LOI and Pilot Studies Coaching Sessions	New	2	2
CTSI Implementation Science Seminar series	Existing	5	5
CTSI Health Equity Workshop Series	Existing	5	7.5
CTSI Community-University Collaborations in Research	Existing	3	6
Optional, tailored to individual scholars:			
Join Community of Scholars			
Selected CTSI Core Competency workshops			
CTSI grant writing workshop			

- Implementation science seminar series. This seminar series is hosted by the CTSI. Rapid advancements in translational research have led to innovative clinical discoveries and evidence-based interventions that should be implemented in real-world settings. However, implementation of these new effective interventions into practice is often delayed. Training scholars in implementation science bridges research to practice for diverse populations to advance health equity (29). Research on the adoption and/or scaling up of innovative strategies and tools and interventions for disease prevention in communities affected by health disparities will provide key data for policy makers, and local public health authorities to implement changes that will impact social determinants of health.
- Annual Center of Excellence Pilot Studies Symposium. Pilot study awardees will present their research in oral presentations at the end of their funding period, and the most recent round of awardees will present posters of their ongoing studies, providing a venue to facilitate networking and collaborations. Dr. Oscar Gomez will give a talk on “tips for writing successful pilot studies” that will generate interest among postdocs and early career faculty. This half-day symposium will be advertised widely throughout UB and the community, bringing attention to the pilot studies and resources that the Center of Excellence offers and attracting more researchers into the discipline and more applicants for pilot studies.
- Monthly Seminar Series. This series will feature UB and community researchers, in addition to invited national experts (two per year). Visiting speakers will meet with pilot studies awardees and other early career researchers to discuss their work and to interact personally with nationally recognized experts in the field.
- Annual Health Equity Research Day. We will invite faculty, trainees, and community members to submit abstracts, that will be reviewed and invited for oral or poster presentations. This day-long event hosted by the UB Community Health Equity Research Institute features a keynote speaker, small group breakout sessions on key topics, short talks, and poster sessions. In our first two research days, presenters have been from eight of the 12 UB schools and multiple community organizations, with presentations related to indigenous, LGBTQ, and rural communities, new Americans, immigrants, and asylum seekers, in addition to

under resourced and underserved urban communities. The event is a highly interactive, multidisciplinary interactive event, indicative of broad interest in health disparities research regionally. Attendance has been 80 to 90 people each year.

- CTSI Core Competency Workshop Series in Health Equity. Each year the CTSI offers a five-workshop series on social determinants of health and health equity, run by Dr. Henry Taylor, Associate Director of the UB Community Health Equity Research Institute and Dr. Yu Ping Chang, Senior Associate Dean of the School of Nursing, and member of the Health Equity Institute Board. This series has been quite popular with approximately 60 attendees per session.
- CTSI Core Competency Workshop Series in Community-University Collaborations in Research. Each workshop consists of a diverse, community-friendly panel designed to engage the audience in discussion about perceived barriers to conducting research with communities and using innovative approaches to address health disparities in Western New York communities.
- Igniting Hope Conference Series. This regional conference supported for 3 years by an NIH conference grant (R13 TR003486) will continue to be held each year as a joint effort by the UB Community Health Equity Research Institute, the Buffalo Center for Health Equity and the CTSI. The conference is described in Overall and in our recent publication (30).

The planned didactic training is approximately 84.5 hours per year (**Table C6**). Based on a 40-hour work week, that represents 4.2% effort. This amount is not onerous but will enhance career development substantially.

Professional development. We anticipate that pilot studies awardees will be at various stages of their careers. Therefore, we will provide mentoring, expert support and didactic training tailored to their career stage and needs and will individualize professional development support.

Investigators can choose from a range of professional development opportunities, guided by discussion with their assigned IDC Team advocate/mentor.

- Community of Scholars which is part of the CTSI Mentored Career Development Program, is a collegial body of junior scientists who meet regularly, grow academically, broaden their professional networks, and get involved in community outreach activities. Dr. Gomez, Director of the IDC, is the faculty advisor of the Community of Scholars. The group has a work-in-progress series in which scholars present their work, professional development sessions to enhance opportunities to develop professional and interpersonal skills with the goal of becoming a successful and independent investigator, sessions on preparation of CVs and promotion dossiers, and others.
- CTSI Core Competency workshop series on clinical and translational research is offered each year and open to all faculty, trainees, and staff. Workshops in addition to those in **Table C6** that may be particularly relevant include Biostatistics Boot Camp, Translational Teamwork, Scientific Communication, Biomedical Informatics, and others. Each series is three to eight workshops and can be attended in full or individually.
- Workshops on grant writing are offered by a team from the CTSI and the UB Office of Research Advancement on a yearly basis to early-stage investigators. Senior faculty with strong track records in grant funding lead these workshops.
- Communication of research findings. The Community Engagement and Dissemination Core will provide training and coaching in communication of research findings, a critical skill for any researcher. Training sessions will place emphasis on oral communication skills of scientific information, having conversations with community members and community leaders, short oral presentations, and press interviews.
- Scholars will be encouraged to attend national and international meetings to present their research findings, interact with researchers in aligned fields and to establish a collaborative network. In addition, the IDC advocate and scholar will discuss joining professional and scientific organizations that would benefit the scholar's career development.

C5. IDC Leadership Team

Investigator Development Core (IDC) Leadership Team. The core will have a multidisciplinary leadership team with recognized expertise in health equity, social justice, epidemiology, medicine, and health policy. Also, each leader has extensive experience in leading training grants and/or mentoring trainees. The IDC leadership team will advise the Core Director and Associate Director and contribute to planning and oversight of

core activities, including the pilot studies awards, the training program for scholars in health disparities who are awarded pilot studies, and for community members who are participating in the pilot research projects. **Table C7** describes the diverse and valuable attributes of the members of the IDC Leadership Team.

- **Oscar Gomez MD PhD, Core Director.** Dr. Gomez is an Associate Professor of Pediatrics, School of Medicine, and an active advocate of recruiting underrepresented minorities in medical science to training programs. He has excellent experience in leading training and mentoring programs. He is a member of the Harold Amos Medical Faculty Development Program of The Robert Wood Johnson Foundation, first as a scholar beginning 2009, and later as an alumnus beginning in 2012. This program is dedicated to career development of underrepresented minorities in medical science in the US. He is co-investigator and associate lead of the CTSI-associated KL2-mentored research award program in which he serves as a faculty advisor for early-career scholars. He has expertise in molecular epidemiology, microbial pathogenesis, and vaccine development. His research includes studies on the epidemiology of childhood diarrhea among children in low- and middle-income countries in Latin America and studies on hepatitis C- exposure and infection among infants in Buffalo, a condition that disproportionately impacts communities that experience adverse social determinants of health.

 - o Dr. Gomez will oversee the IDC, working with team members and guidance from the Center of Excellence Leadership Team (see Administrative Core). He will work with the Administrative Core in managing pilot project award announcements, proposal evaluation and selection and will coordinate training activities and serve on the Center of Excellence Leadership Team.
- **Pastor Kinzer M. Pointer MM, Associate Core Director** is the Pastor of Liberty Missionary Baptist Church, President and CEO of Greater Buffalo United Ministries and Chair of the Erie County Poverty Committee. He is an active mentor in the National Medical Association and works closely with Drs. Murphy and Gomez on the T35 training grant "Training the Next Generation of Clinician Scientists." (T35 AI089693). He co-leads an innovative course in the School of Medicine "Health in the Neighborhood." Pastor Pointer also serves on the Board of the Community Health Equity Research Institute. As a community leader and community member he will contribute ideas and input to this core and participate in mentoring pilot studies awardees.
- **Henry-Louis Taylor Jr. PhD** is Professor of Urban and Regional Planning, School of Architecture and Planning, Director of the Center for Urban Studies; and Associate Director, UB Community Health Equity Research Institute. His areas of expertise include urban development, housing, gentrification, underdeveloped neighborhoods, shrinking cities, race and class, and U.S.-Cuba relations. His research focuses on a historical and contemporary analysis of underdeveloped urban neighborhoods, social isolation, and race and class issues among people of color, especially African Americans and Latinos. Dr. Taylor designed and runs the *Urban Internship Program*, which creates opportunities for graduate and undergraduate students to become involved in East Side neighborhood redevelopment initiatives and research projects. He is also the Co-leader of the CTSI Workshop series in Health Equity.
- **Gregory Wilding PhD**, Professor of Biostatistics and director of the Biostatistics, Epidemiology, Research Design (BERD) Core of the CTSI. He has expertise in clinical trial design, permutation tests, resampling techniques, goodness-of-fit tests, distributional characterizations, copulas, tests of independence, and biostatistics. He designed and launched the highly successful *Winter Institute in Biostatistics* for undergraduate students to attract talented and interested students into the field of biostatistics. Dr. Wilding and his team will meet with each pilot studies scholar and advise on research design and data analysis, and in many cases facilitate collaboration with a biostatistics faculty with appropriate expertise for the project.
- **Ekaterina Noyes PhD MPH**, Professor and Director of the Division of Public Health Services Policy and Practice in the UB School of Public Health and Health Professions. She has broad experience in health services research with expertise in health outcomes and quality of care assessment, large administrative

Table C7. Attributes of the Investigator Development Core Leadership Team

Strong track record as mentors (all)
Four disciplines in three UB schools represented
Community leader and National Medical Association mentor
Three of five underrepresented in biomedical sciences
Three of five serve as faculty in CTSI cores

data analytics, comparative effectiveness, and economic evaluations in healthcare, as well as mixed methods and implementation research. She builds and trains interdisciplinary teams supported by a variety of federal and private sources including the NIH, PCORI, National Multiple Sclerosis Society, among others. Dr. Noyes is Co-PI of a K12 training grant focused on training in implementation science (K12HL138052) and Director of the Team Science and Workforce Development Cores of the CTSI.

The IDC Team will be assisted by a Project Manager and by the Administrator of the Community Health Equity Research Institute, whose salary is supported by the University (see President and Provost letter).

The day-to-day activities of the IDC will be managed by the Director with frequent discussion with the Associate Director and the assistance of the Institute Administrator and Project Manager. The IDC Team will meet monthly and will have active input into the conduct of the Core, including the mentoring and support of the pilot studies awardees. The IDC Director serves on the Center of Excellence Leadership Team to ensure communication and alignment of goals and activities. IDC leaders will meet monthly with Community Engagement and Dissemination Core leaders and as needed to work in concert to provide expertise on community involvement and dissemination plans for ongoing pilot studies.

C6. Summary and Vision

A Center of Excellence in Investigator Development and Community Engagement will be the only formal training program in minority health and health disparities research at UB, bringing an enormously important resource to our training environment. Our Investigator Development Core takes a comprehensive approach to training the next generation of researchers in minority health and health disparities. An important element of our approach is taking intentional action to contribute to our university's goal to increase the diversity of our faculty, leveraging the unique opportunity of a large faculty hiring initiative. Researchers from diverse backgrounds bring insight that comes with lived experiences to better understand systemic racism and discrimination and their impact on health disparities. In addition to implementing an innovative DEIA Action Plan, a strategy that is showing early signs of progress in other institutions, we propose active involvement of Center of Excellence faculty in recruitment in their departments and schools. A Center of Excellence with the opportunity for pilot studies and extensive training and mentoring will be an attractive feature in our environment for recruiting faculty candidates with interest and expertise in minority health and health disparities research.

Our goal to train and mentor early-career investigators to establish their own independent research program is responsive to their needs by providing two of the most important elements for early-stage investigators to successfully advance their careers: 1) training and mentoring and 2) funding to support the development of preliminary results to be competitive for larger extramural grants. We actively engage faculty from all 12 UB schools, which encompass a broad range of disciplines related directly to SDOH, which span beyond the health sciences. This connection with researchers in diverse disciplines gives us the opportunity to attract new researchers to perform research in health disparities. Faculty outside of the health sciences are often not aware that their work relates directly to SDOH impacting health outcomes. We view one of the roles of our Center of Excellence as to increase awareness of the breadth of health disparities research by serving as a university-wide resource. Our vision for the next five years is that our Center of Excellence will facilitate the training a more diverse faculty from more disciplines to perform innovative research in minority health and health disparities to advance their careers to independence and to create systemic change to reduce health inequities in Buffalo and beyond.

PHS Human Subjects and Clinical Trials Information

OMB Number: 0925-0001

Expiration Date: 01/31/2026

Use of Human Specimens and/or Data

Does any of the proposed research in the application involve human specimens and/or data *

☒ Yes☐ No

Provide an explanation for any use of human specimens and/or data not considered to be human subjects research.

Are Human Subjects Involved

☒ Yes☐ No

Is the Project Exempt from Federal regulations?

☐ Yes☒ No

Exemption Number

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8

Other Requested Information

Human Subject Studies

Study#	Study Title	Clinical Trial?
The form does not have any study records		

Delayed Onset Studies

Delayed Onset Study#	Study Title	Anticipated Clinical Trial?	Justification
1	TBD Based on Pilot Study Selections	Yes	<u>Human Subjects.pdf</u>

DELAYED ONSET STUDY(IES) JUSTIFICATION

Study Title:

Multiple Delayed Onset Studies: Investigator Development Core

Human subjects research is anticipated within the project period for which we are requesting funding. However, we are not able to fully define plans for human subject studies as part of this application, since the investigators and their research projects will be determined post-award.

Once funded, the University at Buffalo (UB) Center of Excellence in Investigator Development and Community Engagement Core will distribute a call for letters of intent to UB early career investigators for pilot studies related to health disparities and social determinants of health. We anticipate that some but not all the pilot studies will be clinical trials.

For the pilot studies, we assure that all policies will be followed inclusive of human subject research, multi-site studies and single IRB, and registration and dissemination of clinical trials information.

Any human subjects research conducted as part of the pilot studies program will receive approval from the UB AAHRPP-certified Institutional Review Board (IRB) and will be submitted to NIH for prior approval before initiating the proposed human subjects research.

Domestic sites of multi-site studies conducting non-exempt research involving human subjects will use a single IRB of record.

Clinical trials will be registered and results will be submitted to Clinicaltrials.gov, consistent with the NIH Policy on Dissemination of NIH-Funded Clinical Trial Information.

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Exhibit D to Shurtleff Declaration

This notice has expired. Check the **NIH Guide**
(<https://grants.nih.gov/funding/searchguide/>) for active opportunities and notices.

Department of Health and Human Services

Part 1. Overview Information

Participating Organization(s)

National Institutes of Health ([NIH \(http://www.nih.gov\)](http://www.nih.gov))

Components of Participating Organizations

National Heart, Lung, and Blood Institute ([NHLBI \(http://www.nhlbi.nih.gov/\)](http://www.nhlbi.nih.gov/))

National Cancer Institute ([NCI \(https://www.cancer.gov/\)](https://www.cancer.gov/))

National Human Genome Research Institute ([NHGRI \(https://www.genome.gov/\)](https://www.genome.gov/))

National Institute on Aging ([NIA \(http://www.nia.nih.gov/\)](http://www.nia.nih.gov/))

National Institute on Alcohol Abuse and Alcoholism ([NIAAA \(http://www.niaaa.nih.gov/\)](http://www.niaaa.nih.gov/))

National Institute of Arthritis and Musculoskeletal and Skin Diseases ([NIAMS \(http://www.niams.nih.gov/\)](http://www.niams.nih.gov/))

National Institute of Biomedical Imaging and Bioengineering ([NIBIB \(http://www.nibib.nih.gov/\)](http://www.nibib.nih.gov/))

Eunice Kennedy Shriver National Institute of Child Health and Human Development ([NICHD \(http://www.nichd.nih.gov/\)](http://www.nichd.nih.gov/))

National Institute on Deafness and Other Communication Disorders ([NIDCD \(https://www.nidcd.nih.gov/\)](https://www.nidcd.nih.gov/))

National Institute on Drug Abuse ([NIDA \(http://www.nida.nih.gov/\)](http://www.nida.nih.gov/))

National Center for Complementary and Integrative Health ([NCCIH \(http://www.nccam.nih.gov/\)](http://www.nccam.nih.gov/))

National Institute of Dental and Craniofacial Research ([NIDCR \(https://www.nidcr.nih.gov/\)](https://www.nidcr.nih.gov/))

National Institute of Mental Health ([NIMH \(https://www.nimh.nih.gov/index.shtml\)](https://www.nimh.nih.gov/index.shtml))

National Institute of Nursing Research ([NINR \(https://www.ninr.nih.gov/\)](https://www.ninr.nih.gov/))

National Institute on Minority Health and Health Disparities ([NIMHD \(https://www.nimhd.nih.gov/\)](https://www.nimhd.nih.gov/))

National Institute of Allergy and Infectious Diseases ([NIAID \(https://www.niaid.nih.gov/\)](https://www.niaid.nih.gov/))

National Institute of Diabetes and Digestive and Kidney Diseases ([NIDDK \(https://www.niddk.nih.gov/\)](https://www.niddk.nih.gov/)) - participation added for due dates on/after January 8, 2021 (see [NOT-DK-21-002 \(https://grants.nih.gov/grants/guide/notice-files/NOT-DK-21-002.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-DK-21-002.html))

Office of Research Infrastructure Programs ([ORIP \(https://orip.nih.gov/\)](https://orip.nih.gov/))

Special Note: Not all NIH Institutes and Centers participate in Parent Announcements. Applicants should carefully note which ICs participate in this announcement and view their respective areas of research interest and requirements at the [Table of IC-Specific Information, Requirements and Staff Contacts \(https://grants.nih.gov/grants/guide/contacts/parent-K01-CT-not-allowed.html\)](https://grants.nih.gov/grants/guide/contacts/parent-K01-CT-not-allowed.html) website. ICs that do not participate in this announcement will not consider applications for funding. Consultation with NIH staff before submitting an application is strongly encouraged.

Funding Opportunity Title

Mentored Research Scientist Development Award (Parent K01 - Independent Clinical Trial Not Allowed)

Activity Code

[K01 \(//grants.nih.gov/grants/funding/ac_search_results.htm?text_curr=k01&Search.x=0&Search.y=0&Search_Type=Activity\)](https://grants.nih.gov/grants/funding/ac_search_results.htm?text_curr=k01&Search.x=0&Search.y=0&Search_Type=Activity)
Research Scientist Development Award - Research & Training

Announcement Type

Reissue of [PA-19-126 \(https://grants.nih.gov/grants/guide/pa-files/PA-19-126.html\)](https://grants.nih.gov/grants/guide/pa-files/PA-19-126.html)

Related Notices

See [Notices of Special Interest \(https://grants.nih.gov/grants/guide/NOSIs_targetingList.cfm?GuideDocID=33295\)](https://grants.nih.gov/grants/guide/NOSIs_targetingList.cfm?GuideDocID=33295) associated with this funding opportunity

April 24, 2024 - This PA has been reissued as [PA-24-176 \(https://grants.nih.gov/grants/guide/pa-files/PA-24-176.html\)](https://grants.nih.gov/grants/guide/pa-files/PA-24-176.html)

December 20, 2023 - Notice of NCIs Participation in NIH Mentored Research Scientist Development Awards (Parent K01) Notices of Funding Opportunity. See Notice [NOT-CA-24-020 \(https://grants.nih.gov/grants/guide/notice-files/NOT-CA-24-020.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-CA-24-020.html)

September 27, 2023 - Update to NIDDK Policy on Combined Support Between and Institutional Career Development Award and an Individual Career Development Award. See Notice [NOT-DK-23-025 \(https://grants.nih.gov/grants/guide/notice-files/NOT-DK-23-025.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-DK-23-025.html)

March 2, 2023 - Notice to Extend the Expiration Date for All NIH Career Development Award (K) Parent Announcements. See Notice [NOT-OD-23-096 \(https://grants.nih.gov/grants/guide/notice-files/NOT-OD-23-096.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-OD-23-096.html)

[NOT-OD-23-012 \(https://grants.nih.gov/grants/guide/notice-files/NOT-OD-23-012.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-OD-23-012.html) Reminder: FORMS-H Grant Application Forms and Instructions Must be Used for Due Dates On or After January 25, 2023 - New Grant Application Instructions Now Available

[NOT-OD-22-190 \(https://grants.nih.gov/grants/guide/notice-files/NOT-OD-22-190.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-OD-22-190.html) - Adjustments to NIH and AHRQ Grant Application Due Dates Between September 22 and September 30, 2022

May 3, 2022 - Understanding the Basic Mechanisms of Immune-related Adverse Events (irAEs) in Cancer Immunotherapy. See Notice [NOT-CA-22-063 \(https://grants.nih.gov/grants/guide/notice-files/NOT-CA-22-063.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-CA-22-063.html).

March 4, 2022 - NIDDK Notice of Continuation of Temporary Extension of Eligibility for the NIH Mentored Research Scientist Development Award (K01) Award During the COVID-19 Pandemic. See Notice [NOT-DK-22-016 \(https://grants.nih.gov/grants/guide/notice-files/NOT-DK-22-016.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-DK-22-016.html).

See [Notices of Special Interest \(https://grants.nih.gov/grants/guide/notice-files/NOT-DA-23-002.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-DA-23-002.html) related to this funding opportunity

October 28, 2021 - Reminder: FORMS-G Grant Application Forms & Instructions Must be Used for Due Dates On or After January 25, 2022 - New Grant Application Instructions Now Available. See Notice [NOT-OD-22-018 \(https://grants.nih.gov/grants/guide/notice-files/NOT-OD-22-018.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-OD-22-018.html).

September 13, 2021 - Updates to the Non-Discrimination Legal Requirements for NIH Recipients. See Notice [NOT-OD-21-181 \(https://grants.nih.gov/grants/guide/notice-files/NOT-OD-21-181.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-OD-21-181.html).

August 5, 2021 - New NIH "FORMS-G" Grant Application Forms and Instructions Coming for Due Dates on or after January 25, 2022. See Notice [NOT-OD-21-169 \(https://grants.nih.gov/grants/guide/notice-files/NOT-OD-21-169.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-OD-21-169.html).

August 5, 2021 - Update: Notification of Upcoming Change in Federal-wide Unique Entity Identifier Requirements. See Notice [NOT-OD-21-170 \(https://grants.nih.gov/grants/guide/notice-files/NOT-OD-21-170.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-OD-21-170.html)

April 20, 2021 - Expanding Requirement for eRA Commons IDs to All Senior/Key Personnel. See Notice [NOT-OD-21-109 \(https://grants.nih.gov/grants/guide/notice-files/NOT-OD-21-109.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-OD-21-109.html)

See [Notices of Special Interest \(https://grants.nih.gov/grants/guide/notice-files/NOT-MH-22-045.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-MH-22-045.html) related to this opportunity

- **May 20, 2021** - NIDDK Notice of Continuation of Temporary Extension of Eligibility for the NIH Mentored Research Scientist Development Award (K01) Award During the COVID-19 Pandemic. See Notice [NOT-DK-21-019 \(https://grants.nih.gov/grants/guide/notice-files/NOT-DK-21-019.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-DK-21-019.html).
- **April 26, 2021** - Guidance Regarding Reduction of Effort for Surgeons on NIA Individual Mentored K Awards. See Notice [NOT-AG-21-019 \(https://grants.nih.gov/grants/guide/notice-files/NOT-AG-21-019.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-AG-21-019.html).
- **November 17, 2020** - Temporary Extension of Eligibility for the NIDDK K01 Mentored Research Scientist Development Award During the COVID-19 Pandemic. See Notice [NOT-DK-20-054 \(https://grants.nih.gov/grants/guide/notice-files/NOT-DK-20-054.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-DK-20-054.html).
- **November 10, 2020** - Notice of NIDDK Participation in PA-20-190 and PA-20-176. See Notice [NOT-DK-21-002 \(https://grants.nih.gov/grants/guide/notice-files/NOT-DK-21-002.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-DK-21-002.html).

Funding Opportunity Announcement (FOA) Number

PA-20-190

Companion Funding Opportunity

[PA-20-176 \(https://grants.nih.gov/grants/guide/pa-files/PA-20-176.html\)](https://grants.nih.gov/grants/guide/pa-files/PA-20-176.html) - Mentored Research Scientist Development Award (Parent K01 - Independent Clinical Trial Required)

[PA-20-191 \(https://grants.nih.gov/grants/guide/pa-files/PA-20-191.html\)](https://grants.nih.gov/grants/guide/pa-files/PA-20-191.html) - Mentored Research Scientist Development Award (Parent K01 - Independent Basic Experimental Studies with Humans Required)

Number of Applications

See [Section III. 3. Additional Information on Eligibility](#).

Catalog of Federal Domestic Assistance (CFDA) Number(s)

93.213; 93.172; 93.837, 93.838, 93.839, 93.840, 93.233; 93.866; 93.273; 93.855; 93.846; 93.286; 93.279; 93.173; 93.121; 93.242; 93.307; 93.361; 93.351, 93.398, 93.399, 93.393

Funding Opportunity Purpose

The purpose of the NIH Mentored Research Scientist Development Award (K01) is to provide support and protected time (three to five years) for an intensive, supervised career development experience in the biomedical, behavioral, or clinical sciences leading to research independence. Although all of the participating NIH Institutes and Centers (ICs) use this support mechanism to support career development experiences that lead to research independence, some ICs use the K01 award for individuals who propose to train in a new field or for individuals who have had a hiatus in their research career because of illness or pressing family circumstances..

This Funding Opportunity Announcement (FOA) is designed specifically for applicants proposing research that does not involve leading an independent clinical trial, a clinical trial feasibility study, or a separate ancillary clinical trial. Applicants to this FOA are permitted to propose research experience in a clinical trial led by a mentor or co-mentor. Applicants proposing a clinical trial or an ancillary clinical trial as lead investigator, should apply to the [companion FOA \(https://grants.nih.gov/grants/guide/pa-files/PA-20-176.html\)](https://grants.nih.gov/grants/guide/pa-files/PA-20-176.html).

Key Dates

Posted Date

May 6, 2020

Open Date (Earliest Submission Date)

May 12, 2020

Letter of Intent Due Date(s)

Not Applicable

Application Due Date(s)

[Standard dates \(//grants.nih.gov/grants/guide/url_redirect.php?id=11113\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11113) apply.

The first standard application due date for this FOA is June 12, 2020.

All applications are due by 5:00 PM local time of applicant organization. All [types of non-AIDS applications](#) allowed for this funding opportunity announcement are due on the listed date(s). Applications are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process by the due date.

AIDS Application Due Date(s)

[Standard AIDS dates](#) ([//grants.nih.gov/grants/guide/url_redirect.php?id=11112](https://grants.nih.gov/grants/guide/url_redirect.php?id=11112)) apply.

The first AIDS application due date for this FOA is September 7, 2020.

All applications are due by 5:00 PM local time of applicant organization. All [types of AIDS and AIDS-related applications](#) allowed for this funding opportunity announcement are due the listed date(s).

Scientific Merit Review

[Standard dates](#) ([//grants.nih.gov/grants/guide/url_redirect.php?id=11113](https://grants.nih.gov/grants/guide/url_redirect.php?id=11113)) apply

Advisory Council Review

[Standard dates](#) ([//grants.nih.gov/grants/guide/url_redirect.php?id=11113](https://grants.nih.gov/grants/guide/url_redirect.php?id=11113)) apply

Earliest Start Date

[Standard dates](#) ([//grants.nih.gov/grants/guide/url_redirect.php?id=11113](https://grants.nih.gov/grants/guide/url_redirect.php?id=11113)) apply

Expiration Date

New Date May 8, 2024 (Original Date: May 8, 2023) per issuance of [NOT-OD-23-096](#) ([//grants.nih.gov/grants/guide/notice-files/NOT-OD-23-096.html](https://grants.nih.gov/grants/guide/notice-files/NOT-OD-23-096.html))

Due Dates for E.O. 12372

Not Applicable

Required Application Instructions

It is critical that applicants follow the Career Development (K) Instructions in the [SF424 \(R&R\) Application Guide](#) ([//grants.nih.gov/grants/guide/url_redirect.php?id=12000](https://grants.nih.gov/grants/guide/url_redirect.php?id=12000)), except where instructed to do otherwise (in this FOA or in a Notice from the [NIH Guide for Grants and Contracts](#) ([//grants.nih.gov/grants/guide/](https://grants.nih.gov/grants/guide/))). Conformance to all requirements (both in the Application Guide and the FOA) is required and strictly enforced. Applicants must read and follow all application instructions in the Application Guide as well as any program-specific instructions noted in [Section IV](#). When the program-specific instructions deviate from those in the Application Guide, follow the program-specific instructions. **Applications that do not comply with these instructions may be delayed or not accepted for review.**

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Part 2. Full Text of Announcement

Section I. Funding Opportunity Description

The overall goal of the NIH Research Career Development program is to help ensure that a diverse pool of highly trained scientists is available in appropriate scientific disciplines to address the Nation's biomedical, behavioral, and clinical research needs. NIH Institutes and Centers (ICs) support a variety of mentored and non-mentored career development award programs designed to foster the transition of new investigators to research independence and to support established investigators in achieving specific objectives. Candidates should review the different career development (K) award programs to determine the best program to support their goals. More information about Career programs may be found at the [NIH Extramural Training Mechanisms \(//grants.nih.gov/grants/guide/url_redirect.php?id=41159\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=41159) website.

The objective of the NIH Mentored Research Scientist Development Award (K01) is to provide salary and research support for a sustained period of protected time (3-5 years) for intensive research career development, under the guidance of an experienced mentor, or sponsor in the biomedical, behavioral or clinical sciences leading to research independence. The expectation is that, through this sustained period of research career development and training, awardees will launch independent research careers and become competitive for new research project grant (e.g., R01) funding.

Although all of the participating NIH Institutes and Centers (ICs) use this mechanism to support career development experiences that lead to research independence, some ICs use the K01 award for individuals who propose to train in a new field or for individuals who have had a hiatus in their research career because of illness or pressing family circumstances. Other ICs utilize the K01 award to support research in other fields.

Note: This Funding Opportunity Announcement (FOA) is designed specifically for candidates proposing research that does not involve leading an independent clinical trial, a clinical trial feasibility study, or an ancillary study clinical trial. Under this FOA candidates are permitted to propose research experience in a clinical trial led by a mentor or co-mentor. Those proposing a clinical trial or an ancillary clinical trial as lead investigator, should apply to the companion FOA ([PA-20-176 \(https://grants.nih.gov/grants/guide/pa-files/PA-20-176.html\)\)](https://grants.nih.gov/grants/guide/pa-files/PA-20-176.html)).

Special Note: Because of the differences in individual Institute and Center (IC) program requirements for this FOA, prospective candidates are strongly encouraged to consult the [Table of IC-Specific Information, Requirements and Staff Contacts \(https://grants.nih.gov/grants/guide/contacts/parent-K01-CT-not-allowed.html\)](https://grants.nih.gov/grants/guide/contacts/parent-K01-CT-not-allowed.html), to make sure that their application is appropriate for the requirements of one of the participating NIH ICs.

See [Section VIII. Other Information](#) for award authorities and regulations.

Section II. Award Information

Funding Instrument

Grant: A support mechanism providing money, property, or both to an eligible entity to carry out an approved project or activity.

Application Types Allowed

New
Resubmission
Revision

The [OER Glossary \(//grants.nih.gov/grants/guide/url_redirect.php?id=11116\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11116) and the SF424 (R&R) Application Guide provide details on these application types. Only those application types listed here are allowed for this FOA.

Clinical Trial?

Not Allowed: Only accepting applications that do not propose a clinical trial.

Note: Applicants may propose to gain experience in a clinical trial led by a mentor/co-mentor as part of their research career development.

[Need help determining whether you are doing a clinical trial? \(https://grants.nih.gov/grants/guide/url_redirect.php?id=82370\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=82370)

Funds Available and Anticipated Number of Awards

The number of awards is contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications.

Award Budget

Award budgets are composed of salary and other program-related expenses, as described below.

Award Project Period

The total project period may not exceed 5 years.

Other Award Budget Information

Salary

The participating NIH Institutes and Centers will provide salary and fringe benefits for the award recipient (see [Table of IC-Specific Information, Requirements and Staff Contacts](https://grants.nih.gov/grants/guide/contacts/parent-K01-CT-not-allowed.html)). (<https://grants.nih.gov/grants/guide/contacts/parent-K01-CT-not-allowed.html>) Further guidance on budgeting for career development salaries is provided in the SF424 (R&R) Application Guide. See also [NOT-OD-17-094](https://grants.nih.gov/grants/guide/notice-files/NOT-OD-17-094.html) (<https://grants.nih.gov/grants/guide/notice-files/NOT-OD-17-094.html>)

The total NIH contribution to salary, however, may not exceed the legislatively mandated salary cap. See: [http://grants.nih.gov/grants/policy/salcap_summary.htm](https://grants.nih.gov/grants/policy/salcap_summary.htm) (https://grants.nih.gov/grants/policy/salcap_summary.htm).

Other Program-Related Expenses

The participating NIH Institutes and Centers will provide research development support for the award recipient.

See the [Table of IC-Specific Information, Requirements and Staff Contacts](https://grants.nih.gov/grants/guide/contacts/parent-K01-CT-not-allowed.html) (<https://grants.nih.gov/grants/guide/contacts/parent-K01-CT-not-allowed.html>) funds may be used for the following expenses: (a) tuition and fees related to career development; (b) research-related expenses, such as supplies, equipment and technical personnel; c) travel to research meetings or training; and (d) statistical services including personnel and computer time.

Salary for mentors, secretarial and administrative assistants, etc. is not allowed.

Indirect Costs

Indirect Costs (also known as Facilities & Administrative [F&A] Costs) are reimbursed at 8% of modified total direct costs.

NIH grant policies as described in the [NIH Grants Policy Statement](https://grants.nih.gov/grants/guide/url_redirect.php?id=11120) (https://grants.nih.gov/grants/guide/url_redirect.php?id=11120) will apply to the applications submitted and awards made from this FOA.

Section III. Eligibility Information

1. Eligible Applicants

Eligible Organizations

Higher Education Institutions

- Public/State Controlled Institutions of Higher Education
- Private Institutions of Higher Education

The following types of Higher Education Institutions are always encouraged to apply for NIH support as Public or Private Institutions of Higher Education:

- Hispanic-serving Institutions
- Historically Black Colleges and Universities (HBCUs)
- Tribally Controlled Colleges and Universities (TCCUs)
- Alaska Native and Native Hawaiian Serving Institutions
- Asian American Native American Pacific Islander Serving Institutions (AANAPISIs)

Nonprofits Other Than Institutions of Higher Education

- Nonprofits with 501(c)(3) IRS Status (Other than Institutions of Higher Education)
- Nonprofits without 501(c)(3) IRS Status (Other than Institutions of Higher Education)

For-Profit Organizations

- Small Businesses
- For-Profit Organizations (Other than Small Businesses)

Governments

- State Governments
- County Governments
- City or Township Governments
- Special District Governments
- Indian/Native American Tribal Governments (Federally Recognized)
- Indian/Native American Tribal Governments (Other than Federally Recognized)
- U.S. Territory or Possession

Other

- Independent School Districts
- Public Housing Authorities/Indian Housing Authorities
- Native American Tribal Organizations (other than Federally recognized tribal governments)
- Faith-based or Community-based Organizations
- Regional Organizations

Foreign Institutions

Non-domestic (non-U.S.) Entities (Foreign Institutions) **are not** eligible to apply.

Non-domestic (non-U.S.) components of U.S. Organizations **are not** eligible to apply.

Foreign components, as [defined in the NIH Grants Policy Statement \(//grants.nih.gov/grants/guide/url_redirect.php?id=11118\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11118), **are** allowed.

Required Registrations

Applicant Organizations

Applicant organizations must complete and maintain the following registrations as described in the SF 424 (R&R) Application Guide to be eligible to apply for or receive an award. All registrations must be completed prior to the application being submitted.

Registration can take 6 weeks or more, so applicants should begin the registration process as soon as possible. The [NIH Policy on Late Submission of Grant Applications \(//grants.nih.gov/grants/guide/notice-files/NOT-OD-15-039.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-OD-15-039.html) states that failure to complete registrations in advance of a due date is not a valid reason for a late submission.

- [Dun and Bradstreet Universal Numbering System \(DUNS\) \(http://fedgov.dnb.com/webform\)](http://fedgov.dnb.com/webform) - All registrations require that applicants be issued a DUNS number. After obtaining a DUNS number, applicants can begin both SAM and eRA Commons registrations. The same DUNS number must be used for all registrations, as well as on the grant application.
- [System for Award Management \(SAM\) \(https://www.sam.gov/portal/public/SAM/\)](https://www.sam.gov/portal/public/SAM/) Applicants must complete and maintain an active registration, **which requires renewal at least annually**. The renewal process may require as much time as the initial registration. SAM registration includes the assignment of a Commercial and Government Entity (CAGE) Code for domestic organizations which have not already been assigned a CAGE Code.
 - [NATO Commercial and Government Entity \(NCAGE\) Code \(//grants.nih.gov/grants/guide/url_redirect.php?id=11176\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11176) Foreign organizations must obtain an NCAGE code (in lieu of a CAGE code) in order to register in SAM.

- [eRA Commons \(//grants.nih.gov/grants/guide/url_redirect.php?id=11123\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11123) - Applicants must have an active DUNS number to register in eRA Commons. Organizations can register with the eRA Commons as they are working through their SAM or Grants.gov registration, but all registrations must be in place by time of submission. eRA Commons requires organizations to identify at least one Signing Official (SO) and at least one Program Director/Principal Investigator (PD/PI) account in order to submit an application.
- [Grants.gov \(//grants.nih.gov/grants/guide/url_redirect.php?id=82300\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=82300) Applicants must have an active DUNS number and SAM registration in order to complete the Grants.gov registration.

Program Directors/Principal Investigators (PD(s)/PI(s))

All PD(s)/PI(s) must have an eRA Commons account. PD(s)/PI(s) should work with their organizational officials to either create a new account or to affiliate their existing account with the applicant organization in eRA Commons. If the PD/PI is also the organizational Signing Official, they must have two distinct eRA Commons accounts, one for each role. Obtaining an eRA Commons account can take up to 2 weeks.

All PD(s)/PI(s) must be registered with [ORCID \(https://orcid.org/\)](https://orcid.org/). The personal profile associated with the PD(s)/PI(s) eRA Commons account must be linked to a valid ORCID ID. For more information on linking an ORCID ID to an eRA Commons personal profile see the [ORCID topic in our eRA Commons online help \(https://era.nih.gov/erahelp/Commons/default.htm#orcid.htm%3FTocPath%3D29\)](https://era.nih.gov/erahelp/Commons/default.htm#orcid.htm%3FTocPath%3D29).

Eligible Individuals (Program Director/Principal Investigator)

Any candidate with the skills, knowledge, and resources necessary to carry out the proposed research as the Program Director/Principal Investigator (PD/PI) is invited to work with his/her mentor and organization to develop an application for support. Individuals from underrepresented racial and ethnic groups as well as individuals with disabilities are always encouraged to apply for NIH support. Multiple PDs/PIs are not allowed.

By the time of award, the individual must be a citizen or a non-citizen national of the United States or have been lawfully admitted for permanent residence (i.e., possess a currently valid Permanent Resident Card USCIS Form I-551, or other legal verification of such status).

Current and former PDs/PIs on NIH research project (R01), program project (P01), center grants (P50), other major individual career development awards (e.g., DP5, K01, K07, K08, K22, K23, K25, K76, K99/R00), or Project Leads of program project (P01) or center grant (P50) sub-projects, or the equivalent are not eligible. Current and former PDs/PIs of an NIH Small Grant (R03), Exploratory/Developmental Grant (R21), Planning Grant (R34/U34), Dissertation Award (R36), or SBIR/STTR (R41, R42, R43, R44) remain eligible, as do PD/PIs of Transition Scholar (K38) awards and individuals appointed to institutional K programs (K12, KL2).

Candidates for the K01 award must have a research or health-professional doctoral degree.

This funding opportunity may support individuals who propose to train in a new field or individuals who have had a hiatus in their research career because of illness or pressing family circumstances.

2. Cost Sharing

This FOA does not require cost sharing as defined in the [NIH Grants Policy Statement \(//grants.nih.gov/grants/guide/url_redirect.php?id=11126\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11126).

3. Additional Information on Eligibility

Number of Applications

Applicant organizations may submit more than one application, provided that each application is scientifically distinct, and each is from a different candidate.

The NIH will not accept duplicate or highly overlapping applications under review at the same time. An individual may not have two or more competing NIH career development applications pending review concurrently. In addition, NIH will not accept:

- A new (A0) application that is submitted before issuance of the summary statement from the review of an overlapping new (A0) or resubmission (A1) application.
- A resubmission (A1) application that is submitted before issuance of the summary statement from the review of the previous new (A0) application.
- An application that has substantial overlap with another application pending appeal of initial peer review (see [NOT-OD-11-101 \(//grants.nih.gov/grants/guide/notice-files/NOT-OD-11-101.html\)](https://grants.nih.gov/grants/guide/notice-files/NOT-OD-11-101.html)).

Candidates may submit research project grant (RPG) applications concurrently with the K application. However, any concurrent RPG application may not have substantial scientific and/or budgetary overlap with the career award application. K award recipients are encouraged to obtain funding from NIH or other Federal sources either as a PD/PI on a competing research grant award or cooperative agreement, or as project leader on a competing multi-project award as described in [NOT-OD-08-065](#) (https://grants.nih.gov/grants/guide/url_redirect.php?id=51126).

Level of Effort

At the time of award, the candidate must have a full-time appointment at the applicant institution. Candidates are required to commit a minimum of nine person months of effort (i.e., 75% of full-time professional effort) to their program of career development during the mentored phase. Candidates may engage in other duties as part of the professional effort not covered by this award, as long as such duties do not interfere with or detract from the proposed career development program.

Candidates who have VA appointments may not consider part of the VA effort toward satisfying the full time requirement at the applicant institution. Candidates with VA appointments should contact the staff person in the relevant Institute or Center prior to preparing an application to discuss their eligibility.

After the receipt of the award, adjustments to the required level of effort may be made in certain circumstances. See [NOT-OD-09-036](#) (https://grants.nih.gov/grants/guide/url_redirect.php?id=51125) for more details.

Mentor(s)

Before submitting the application, the candidate must identify a mentor who will supervise the proposed career development and research experience. The mentor should be an active investigator in the area of the proposed research and be committed both to the career development of the candidate and to the direct supervision of the candidate's research. The mentor must document the availability of sufficient research support and facilities for high-quality research. Candidates are encouraged to identify more than one mentor, i.e., a mentoring team, if this is deemed advantageous for providing expert advice in all aspects of the research career development program. In such cases, one individual must be identified as the primary mentor who will coordinate the candidate's research. The candidate must work with the mentor(s) in preparing the application. The mentor, or a member of the mentoring team, should have a successful track record of mentoring individuals at the candidate's career stage. Where feasible, women, individuals from diverse racial and ethnic groups, and individuals with disabilities should be involved as mentors to serve as role models.

Institutional Environment

The applicant institution must have a strong, well-established record of research and career development activities and faculty qualified to serve as mentors in biomedical, behavioral, or clinical research.

Section IV. Application and Submission Information

1. Requesting an Application Package

The application forms package specific to this opportunity must be accessed through ASSIST, Grants.gov Workspace or an institutional system-to-system solution. Links to apply using ASSIST or Grants.gov Workspace are available in [Part 1](#) of this FOA. See your administrative office for instructions if you plan to use an institutional system-to-system solution.

2. Content and Form of Application Submission

It is critical that applicants follow the Career Development (K) Instructions in the [SF424 \(R&R\) Application Guide](#) (https://grants.nih.gov/grants/guide/url_redirect.php?id=12000), except where instructed in this funding opportunity announcement to do otherwise. Conformance to the requirements in the Application Guide is required and strictly enforced. Applications that are out of compliance with these instructions may be delayed or not accepted for review.

Page Limitations

All page limitations described in the SF424 (R&R) Application Guide and the [Table of Page Limits](#) (https://grants.nih.gov/grants/guide/url_redirect.php?id=51132) must be followed.

Instructions for Application Submission

Note: Effective for due dates on or after January 25, 2023, the Data Management and Sharing (DMS) Plan will be attached in the Other Plan(s) attachment in FORMS-H and subsequent application forms packages. For due dates on or before January 24, 2023, the Data Sharing Plan and Genomic Data Sharing Plan (GDS) will continue to be attached in the Resource Sharing Plan attachment in FORMS-G application forms packages.

The following section supplements the instructions found in the SF 424 (R&R) Application Guide and should be used for preparing an application to this FOA.

SF424(R&R) Cover

All instructions in the SF424 (R&R) Application Guide must be followed.

SF424(R&R) Project/Performance Site Locations

All instructions in the SF424 (R&R) Application Guide must be followed.

Other Project Information

All instructions in the SF424 (R&R) Application Guide must be followed.

SF424(R&R) Senior/Key Person Profile Expanded

All instructions in the SF424 (R&R) Application Guide must be followed.

IMPORTANT REMINDER: The personal profile associated with the eRA Commons username entered in the Credential field for the PD/PI (candidate) must include an ORCID ID. For more information on linking an ORCID ID to an eRA Commons personal profile see the [ORCID topic in our eRA Commons online help](https://era.nih.gov/erahelp/Commons/default.htm#orcid.htm%3FTocPath%3D_____29) (https://era.nih.gov/erahelp/Commons/default.htm#orcid.htm%3FTocPath%3D_____29).

R&R Budget

All instructions in the SF424 (R&R) Application Guide must be followed.

PHS 398 Cover Page Supplement

All instructions in the SF424 (R&R) Application Guide must be followed.

PHS 398 Career Development Award Supplemental Form

Other Plan(s):

Note: Effective for due dates on or after January 25, 2023, the Data Management and Sharing Plan will be attached in the Other Plan(s) attachment in FORMS-H and subsequent application forms packages. For due dates on or before January 24, 2023, the Data Sharing Plan and Genomic Data Sharing Plan (GDS) will continue to be attached in the Resource Sharing Plan attachment in FORMS-G application forms packages.

All applicants planning research (funded or conducted in whole or in part by NIH) that results in the generation of scientific data are required to comply with the instructions for the Data Management and Sharing Plan. All applications, regardless of the amount of direct costs requested for any one year, must address a Data Management and Sharing Plan.

The PHS 398 Career Development Award Supplemental Form is comprised of the following sections:

- Candidate
- Research Plan
- Other Candidate Information
- Mentor, Co-Mentor, Consultant, Collaborators
- Environment & Institutional Commitment to the Candidate
- Other Research Plan Sections
- Appendix

All instructions in the SF424 (R&R) Application Guide must be followed, with the following additional instructions:

Candidate Section

All instructions in the SF424 (R&R) Application Guide must be followed, with the following additional instructions:

Candidate Information and Goals for Career Development

Candidate's Background

- Describe the candidate's commitment to a health-related research career. Describe all the candidate's professional responsibilities in the grantee institution and elsewhere and describe their relationship to the proposed activities on the career award.
- Describe prior training and how it relates to the objectives and long-term career plans of the candidate.
- Describe the candidate's research efforts to this point in his/her research career, including any publications, prior research interests and experience.

- Provide evidence of the candidate's potential to develop into an independent investigator. Usually this is evident from publications, prior research interests and experience, and reference letters.

Career Goals and Objectives

- Describe a systematic plan: (1) that shows a logical progression from prior research and training experiences to the research and career development experiences that will occur during the career award period and then to independent investigator status; and (2) that justifies the need for further career development to become an independent investigator.

Candidate's Plan for Career Development/Training Activities During Award Period

- The candidate and the mentor(s) are jointly responsible for the preparation of the career development plan. A career development timeline is often helpful.
- The didactic (if any) and the research aspects of the plan must be designed to develop the necessary knowledge and research skills in scientific areas relevant to the candidate's career goals.
- Describe the professional responsibilities/activities including other research projects beyond the minimum required 9 person-months (75% full-time professional effort) commitment to the career award. Explain how these responsibilities/activities will help ensure career progression to achieve independence as an investigator.

Research Plan Section

All instructions in the SF424 (R&R) Application Guide must be followed, with the following additional instructions:

Research Strategy

- A sound research project that is consistent with the candidate's level of research development and objectives of his/her career development plan must be provided. The research description should demonstrate the quality of the candidate's research thus far and also the novelty, significance, creativity and approach, as well as the ability of the candidate to carry out the research.
- The application must also describe the relationship between the mentor's research and the candidate's proposed research plan.
- If the applicant is proposing to gain experience in a clinical trial, ancillary clinical trial or a clinical trial feasibility study as part of his or her research career development, describe the relationship of the proposed research project to the clinical trial.

Training in the Responsible Conduct of Research

- All applications must include a plan to fulfill NIH requirements for instruction in the Responsible Conduct of Research (RCR). See SF424 (R&R) Application Guide for instructions.

Mentor, Co-Mentor, Consultant, Collaborators Section

All instructions in the SF424 (R&R) Application Guide must be followed, with the following additional instructions:

Plans and Statements of Mentor and Co-mentor(s)

- The candidate must name a primary mentor who, together with the candidate, is responsible for planning, directing, monitoring, and executing the proposed program. The candidate may also nominate co-mentors as appropriate to the goals of the program.
- The mentor should have sufficient independent research support to cover the costs of the proposed research project in excess of the allowable costs of this award.
- Include a statement that the candidate will commit at least 9 person-months (75% of full-time professional effort) to the career development program and related career development activities.
- The application must include a statement from the mentor providing: 1) information on his/her research qualifications and previous experience as a research supervisor; 2) a plan that describes the nature of the supervision and mentoring that will occur during the proposed award period; 3) a plan for career progression for the candidate to move from the mentored stage of his/her career to independent research investigator status during the project period of the award; and 4) a plan for monitoring the candidate's research, publications, and progression towards independence.
- Similar information must be provided by any co-mentor. If more than one co-mentor is proposed, the respective areas of expertise and responsibility of each should be described. Co-mentors should clearly describe how they will coordinate the mentoring of the candidate. If any co-mentor is not located at the sponsoring institution, a statement should be provided describing the mechanism(s) and frequency of communication with the candidate, including the frequency of face-to-face meetings.

- The primary mentor must agree to provide annual evaluations of the candidate's progress as required in the annual progress report.
- If the candidate is proposing to gain experience in a clinical trial as part of his or her research career development, the mentor or co-mentor of the mentoring team must include a statement to document leadership of the clinical trial, and appropriate expertise to guide the applicant in any proposed clinical trials research experience.

Letters of Support from Collaborators, Contributors and Consultants

- Signed statements must be provided by all collaborators and/or consultants confirming their participation in the project and describing their specific roles. Collaborators and consultants do not need to provide their biographical sketches unless also listed as senior/key personnel. However, information should be provided clearly documenting the appropriate expertise in the proposed areas of consulting/collaboration.
- Advisory committee members (if applicable): Signed statements must be provided by each member of the proposed advisory committee. These statements should confirm their participation, describe their specific roles, and document the expertise they will contribute. Unless also listed as senior/key personnel, these individuals do not need to provide their biographical sketches.

Environmental and Institutional Commitment to the Candidate

All instructions in the SF424 (R&R) Application Guide must be followed, with the following additional instructions:

Description of Institutional Environment

- The sponsoring institution must document a strong, well-established research and career development program related to the candidate's area of interest, including a high-quality research environment with key faculty members and other investigators capable of productive collaboration with the candidate.
- Describe how the institutional research environment is particularly suited for the development of the candidate's research career and the pursuit of the proposed research plan.
- Describe the resources and facilities that will be available to the candidate.,

Institutional Commitment to the Candidate's Research Career Development

- The sponsoring institution must provide a statement of commitment to the candidate's development into a productive, independent investigator and to meeting the requirements of this award. It should be clear that the institutional commitment to the candidate is not contingent upon receipt of this career award.
- Provide assurances that the candidate will be able to devote the required effort to activities under this award. The remaining effort should be devoted to activities related to the development of the candidate's career as an independent scientist.
- Provide assurances that the candidate will have access to appropriate office and laboratory space, equipment, and other resources and facilities (including access to clinical and/or other research populations) to carry out the proposed research plan.
- Provide assurance that appropriate time and support will be available for any proposed mentor(s) and/or other staff consistent with the career development plan.

Appendix

Limited items are allowed in the Appendix. Follow all instructions for the Appendix as described in the SF424 (R&R) Application Guide; any instructions provided here are in addition to the SF424 (R&R) Application Guide instructions.

PHS Human Subjects and Clinical Trials Information

When involving human subjects research, clinical research, and/or NIH-defined clinical trials (and when applicable, clinical trials research experience) follow all instructions for the PHS Human Subjects and Clinical Trials Information form in the SF424 (R&R) Application Guide, with the following additional instructions:

If you answered Yes to the question Are Human Subjects Involved? on the R&R Other Project Information form, you must include at least one human subjects study record using the **Study Record: PHS Human Subjects and Clinical Trials Information** form or a **Delayed Onset Study** record.

Study Record: PHS Human Subjects and Clinical Trials Information

All instructions in the SF424 (R&R) Application Guide must be followed with the following additional instructions:

- o do not complete Section 4 Protocol Synopsis information or Section 5 - Other Clinical Trial-related Attachments.

Delayed Onset Study

Note: [Delayed onset \(https://grants.nih.gov/grants/glossary.htm#DelayedOnsetHumanSubjectStudy\)](https://grants.nih.gov/grants/glossary.htm#DelayedOnsetHumanSubjectStudy) does NOT apply to a study that can be described but will not start immediately (i.e., delayed start).

All instructions in the SF424 (R&R) Application Guide must be followed.

PHS Assignment Request Form

All instructions in the SF424 (R&R) Application Guide must be followed.

Reference Letters

Candidates must carefully follow the SF424 (R&R) Application Guide, **including the time period for when reference letters will be accepted**. Applications lacking the appropriate required reference letters will not be reviewed. This is a separate process from submitting an application electronically. Reference letters are submitted directly through the [eRA Commons Submit Referee Information link \(//grants.nih.gov/grants/guide/url_redirect.php?id=41146\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=41146) and not through Grants.gov.

3. Unique Entity Identifier and System for Award Management (SAM)

See Part 1. Section III.1 for information regarding the requirement for obtaining a unique entity identifier and for completing and maintaining active registrations in System for Award Management (SAM), NATO Commercial and Government Entity (NCAGE) Code (if applicable), eRA Commons, and Grants.gov.

4. Submission Dates and Times

[Part I. Overview Information](#) contains information about Key Dates and Times. Applicants are encouraged to submit applications before the due date to ensure they have time to make any application corrections that might be necessary for successful submission. When a submission date falls on a weekend or [Federal holiday \(https://grants.nih.gov/grants/guide/url_redirect.php?id=82380\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=82380), the application deadline is automatically extended to the next business day.

Organizations must submit applications to [Grants.gov \(//grants.nih.gov/grants/guide/url_redirect.php?id=11128\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11128) (the online portal to find and apply for grants across all Federal agencies) using ASSIST or other electronic submission systems. Applicants must then complete the submission process by tracking the status of the application in the [eRA Commons \(//grants.nih.gov/grants/guide/url_redirect.php?id=11123\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11123), NIH's electronic system for grants administration. NIH and Grants.gov systems check the application against many of the application instructions upon submission. Errors must be corrected and a changed/corrected application must be submitted to Grants.gov on or before the application due date, and time. If a Changed/Corrected application is submitted after the deadline, the application will be considered late. Applications that miss the due date and time are subjected to the NIH Policy on Late Application Submission.

Applicants are responsible for viewing their application before the due date in the eRA Commons to ensure accurate and successful submission.

Information on the submission process and a definition of on-time submission are provided in the SF424 (R&R) Application Guide.

5. Intergovernmental Review (E.O. 12372)

This initiative is not subject to [intergovernmental review. \(//grants.nih.gov/grants/guide/url_redirect.php?id=11142\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11142)

6. Funding Restrictions

All NIH awards are subject to the terms and conditions, cost principles, and other considerations described in the [NIH Grants Policy Statement \(//grants.nih.gov/grants/guide/url_redirect.php?id=11120\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11120).

Pre-award costs are allowable only as described in the [NIH Grants Policy Statement \(//grants.nih.gov/grants/guide/url_redirect.php?id=11143\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11143).

7. Other Submission Requirements and Information

Applications must be submitted electronically following the instructions described in the SF424 (R&R) Application Guide. Paper applications will not be accepted.

Applicants must complete all required registrations before the application due date. [Section III. Eligibility Information](#) contains information about registration.

For assistance with your electronic application or for more information on the electronic submission process, visit [How to Apply Application Guide \(https://grants.nih.gov/grants/how-to-apply-application-guide.html\)](https://grants.nih.gov/grants/how-to-apply-application-guide.html). If you encounter a system issue beyond your control that threatens your ability to complete the submission process on-time, you must follow the [Dealing with System Issues \(https://grants.nih.gov/grants/how-to-apply-application-guide/due-dates-and-submission-policies/dealing-with-system-issues.htm\)](https://grants.nih.gov/grants/how-to-apply-application-guide/due-dates-and-submission-policies/dealing-with-system-issues.htm) guidance. For assistance with application submission contact the Application Submission Contacts in [Section VII](#).

Important reminders:

All PD(s)/PI(s) must include their eRA Commons ID in the Credential field of the Senior/Key Person Profile Component of the SF424(R&R) Application Package. Failure to register in the Commons and to include a valid PD/PI Commons ID in the credential field will prevent the successful submission of an electronic application to NIH.

The applicant organization must ensure that the DUNS number it provides on the application is the same number used in the organization's profile in the eRA Commons and for the System for Award Management (SAM). Additional information may be found in the SF424 (R&R) Application Guide.

See [more tips \(//grants.nih.gov/grants/guide/url_redirect.php?id=11146\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11146) for avoiding common errors.

Upon receipt, applications will be evaluated for completeness and compliance with application instructions by the Center for Scientific Review, NIH. Applications that are incomplete or non-compliant will not be reviewed.

Post Submission Materials

Applicants are required to follow the instructions for post-submission materials, as described in [the policy. Any instructions provided here are in addition to the instructions in the p \(//grants.nih.gov/grants/guide/url_redirect.php?id=82299\)olicy.](https://grants.nih.gov/grants/guide/url_redirect.php?id=82299)

Section V. Application Review Information

1. Criteria

Note: Effective for due dates on or after January 25, 2023, the Data Sharing Plan and Genomic Data Sharing Plan (GDS) as part of the Resource Sharing Plan will not be evaluated at time of review.

Only the review criteria described below will be considered in the review process. Applications submitted to the NIH in support of the [NIH mission \(//grants.nih.gov/grants/guide/url_redirect.php?id=11149\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11149) are evaluated for scientific and technical merit through the NIH peer review system.

For this particular announcement, note the following: Reviewers should evaluate the candidate's potential for developing an independent research program that will make important contributions to the field, taking into consideration the years of research experience and the likely value of the proposed research career development as a vehicle for developing a successful, independent research program.

Overall Impact

Reviewers should provide their assessment of the likelihood that the proposed career development and research plan will enhance the candidate's potential for a productive, independent scientific research career in a health-related field, taking into consideration the criteria below in determining the overall impact score.

Scored Review Criteria

Reviewers will consider each of the review criteria below in the determination of scientific merit, and give a separate score for each. An application does not need to be strong in all categories to be judged likely to have major scientific impact.

Candidate

- Does the candidate have the potential to develop as an independent and productive researcher?
- Are the candidate's prior training and research experience appropriate for this award?
- Is the candidate's academic, clinical (if relevant), and research record of high quality?
- Is there evidence of the candidate's commitment to meeting the program objectives to become an independent investigator in research?
- Do the reference letters address the above review criteria, and do they provide evidence that the candidate has a high potential for becoming an independent investigator?

Career Development Plan/Career Goals and Objectives

- What is the likelihood that the plan will contribute substantially to the scientific development of the candidate and lead to scientific independence?
- Are the candidate's prior training and research experience appropriate for this award?
- Are the content, scope, phasing, and duration of the career development plan appropriate when considered in the context of prior training/research experience and the stated training and research objectives for achieving research independence?
- Are there adequate plans for monitoring and evaluating the candidate's research and career development progress?
- If proposed, will the clinical trial experience contribute to the applicant's research career development?

Research Plan

- Is the prior research that serves as the key support for the proposed project rigorous?
- Has the candidate included plans to address weaknesses in the rigor of prior research that serves as the key support of the proposed project?
- Has the candidate presented strategies to ensure a robust and unbiased approach, as appropriate for the work proposed?
- Has the candidate presented adequate plans to address relevant biological variables, such as sex, for studies in vertebrate animals or human subjects?
- Are the proposed research question, design, and methodology of significant scientific and technical merit?
- Is the research plan relevant to the candidate's research career objectives?
- Is the research plan appropriate to the candidate's stage of research development and as a vehicle for developing the research skills described in the career development plan?
- If proposed, will the clinical trial experience contribute to the proposed research project?

Mentor(s), Co-Mentor(s), Consultant(s), Collaborator(s)

- Are the qualifications of the mentor(s) in the area of the proposed research appropriate?
- Does the mentor(s) adequately address the candidate's potential and his/her strengths and areas needing improvement?
- Is there adequate description of the quality and extent of the mentor's proposed role in providing guidance and advice to the candidate?
- Is the mentor's description of the elements of the research career development activities, including formal course work adequate?
- Is there evidence of the mentor s, consultant s, and/or collaborator s previous experience in fostering the development of independent investigators?
- Is there evidence of the mentor's current research productivity and peer-reviewed support?
- Is active/pending support for the proposed research project appropriate and adequate?
- Are there adequate plans for monitoring and evaluating the career development awardee's progress toward independence?
- If the applicant is proposing to gain experience in a clinical trial as part of his or her research career development, is there evidence of the appropriate expertise, experience, and ability on the part of the mentor(s) to guide the applicant during participation in the clinical trial?

Environment & Institutional Commitment to the Candidate

- Is there clear commitment of the sponsoring institution to ensure that a minimum of 9 person-months (75% of the candidate's full-time professional effort) will be devoted directly to the research and career development activities described in the application, with the remaining percent effort being devoted to an appropriate balance of research, teaching, administrative, and clinical responsibilities?
- Is the institutional commitment to the career development of the candidate appropriately strong?
- Are the research facilities, resources and training opportunities, including faculty capable of productive collaboration with the candidate adequate and appropriate?
- Is the environment for the candidate's scientific and professional development of high quality?
- Is there assurance that the institution intends the candidate to be an integral part of its research program as an independent investigator?

Additional Review Criteria

As applicable for the project proposed, reviewers will evaluate the following additional items while determining scientific and technical merit, and in providing an overall impact score, but will not give separate scores for these items.

Protections for Human Subjects

For research that involves human subjects but does not involve one of the categories of research that are exempt under 45 CFR Part 46, the committee will evaluate the justification for involvement of human subjects and the proposed protections from

research risk relating to their participation according to the following five review criteria: (1) risk to subjects, (2) adequacy of protection against risks, (3) potential benefits to the subjects and others, (4) importance of the knowledge to be gained, and (5) data and safety monitoring for clinical trials.

For research that involves human subjects and meets the criteria for one or more of the categories of research that are exempt under 45 CFR Part 46, the committee will evaluate: (1) the justification for the exemption, (2) human subjects involvement and characteristics, and (3) sources of materials. For additional information on review of the Human Subjects section, please refer to the [Guidelines for the Review of Human Subjects \(https://grants.nih.gov/grants/guide/url_redirect.php?id=11175\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11175).

Inclusion of Women, Minorities, and Individuals Across the Lifespan

When the proposed project involves human subjects and/or NIH-defined clinical research, the committee will evaluate the proposed plans for the inclusion (or exclusion) of individuals on the basis of sex/gender, race, and ethnicity, as well as the inclusion (or exclusion) of individuals across the lifespan (including children and older adults) to determine if it is justified in terms of the scientific goals and research strategy proposed. For additional information on review of the Inclusion section, please refer to the [Guidelines for the Review of Inclusion in Clinical Research \(https://grants.nih.gov/grants/guide/url_redirect.php?id=11174\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11174).

Vertebrate Animals

The committee will evaluate the involvement of live vertebrate animals as part of the scientific assessment according to the following criteria: (1) description of proposed procedures involving animals, including species, strains, ages, sex, and total number to be used; (2) justifications for the use of animals versus alternative models and for the appropriateness of the species proposed; (3) interventions to minimize discomfort, distress, pain and injury; and (4) justification for euthanasia method if NOT consistent with the AVMA Guidelines for the Euthanasia of Animals. Reviewers will assess the use of chimpanzees as they would any other application proposing the use of vertebrate animals. For additional information on review of the Vertebrate Animals section, please refer to the [Worksheet for Review of the Vertebrate Animal Section \(https://grants.nih.gov/grants/guide/url_redirect.php?id=11150\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11150).

Biohazards

Reviewers will assess whether materials or procedures proposed are potentially hazardous to research personnel and/or the environment, and if needed, determine whether adequate protection is proposed.

Resubmissions

For Resubmissions, the committee will evaluate the application as now presented, taking into consideration the responses to comments from the previous scientific review group and changes made to the project.

Renewals

Not applicable

Revisions

For Revisions, the committee will consider the appropriateness of the proposed expansion of the scope of the project. If the Revision application relates to a specific line of investigation presented in the original application that was not recommended for approval by the committee, then the committee will consider whether the responses to comments from the previous scientific review group are adequate and whether substantial changes are clearly evident.

Additional Review Considerations

Note: Effective for due dates on or after January 25, 2023, the Data Sharing Plan and Genomic Data Sharing Plan (GDS) as part of the Resource Sharing Plan will not be evaluated at time of review.

As applicable for the project proposed, reviewers will consider each of the following items, but will not give scores for these items, and should not consider them in providing an overall impact score.

Training in the Responsible Conduct of Research

All applications for support under this FOA must include a plan to fulfill NIH requirements for instruction in the Responsible Conduct of Research (RCR). Taking into account the level of experience of the candidate, including any prior instruction or participation in RCR as appropriate for the candidate's career stage, the reviewers will evaluate the adequacy of the proposed RCR training in relation to the following five required components: 1) *Format* - the required format of instruction, i.e., face-to-face lectures, coursework, and/or real-time discussion groups (a plan with only on-line instruction is not acceptable); 2) *Subject Matter* - the breadth of subject matter, e.g., conflict of interest, authorship, data management, human subjects and animal use, laboratory safety, research misconduct, research ethics; 3) *Faculty Participation* - the role of the mentor(s) and other faculty

involvement in the fellow's instruction; 4) *Duration of Instruction* - the number of contact hours of instruction (at least eight contact hours are required); and 5) *Frequency of Instruction* instruction must occur during each career stage and at least once every four years. Plans and past record will be rated as *ACCEPTABLE* or *UNACCEPTABLE*, and the summary statement will provide the consensus of the review committee. See also: [NOT-OD-10-019 \(http://grants1.nih.gov/grants/guide/notice-files/NOT-OD-10-019.html\)](http://grants1.nih.gov/grants/guide/notice-files/NOT-OD-10-019.html).

Select Agent Research

Reviewers will assess the information provided in this section of the application, including (1) the Select Agent(s) to be used in the proposed research, (2) the registration status of all entities where Select Agent(s) will be used, (3) the procedures that will be used to monitor possession use and transfer of Select Agent(s), and (4) plans for appropriate biosafety, biocontainment, and security of the Select Agent(s).

Resource Sharing Plans

Reviewers will comment on whether the following Resource Sharing Plans, or the rationale for not sharing the following types of resources, are reasonable: (1) [Data Sharing Plan \(//grants.nih.gov/grants/guide/url_redirect.php?id=11151\)](http://grants.nih.gov/grants/guide/url_redirect.php?id=11151); (2) [Sharing Model Organisms \(//grants.nih.gov/grants/guide/url_redirect.php?id=11152\)](http://grants.nih.gov/grants/guide/url_redirect.php?id=11152); and (3) [Genomic Data Sharing Plan \(GDS\) \(//grants.nih.gov/grants/guide/url_redirect.php?id=11153\)](http://grants.nih.gov/grants/guide/url_redirect.php?id=11153).

Authentication of Key Biological and/or Chemical Resources

For projects involving key biological and/or chemical resources, reviewers will comment on the brief plans proposed for identifying and ensuring the validity of those resources.

Budget and Period of Support

Reviewers will consider whether the budget and the requested period of support are fully justified and reasonable in relation to the proposed research.

2. Review and Selection Process

Applications will be evaluated for scientific and technical merit by (an) appropriate Scientific Review Group(s), in accordance with [NIH peer review policy and procedures \(//grants.nih.gov/grants/guide/url_redirect.php?id=11154\)](http://grants.nih.gov/grants/guide/url_redirect.php?id=11154), using the stated [review criteria](#). Assignment to a Scientific Review Group will be shown in the eRA Commons.

As part of the scientific peer review, all applications:

- May undergo a selection process in which only those applications deemed to have the highest scientific and technical merit (generally the top half of applications under review) will be discussed and assigned an overall impact score.
- Will receive a written critique.

Applications will be assigned on the basis of established PHS referral guidelines to the appropriate NIH Institute or Center. Applications will compete for available funds with all other recommended applications. Following initial peer review, recommended applications will receive a second level of review by the appropriate national Advisory Council or Board. The following will be considered in making funding decisions:

- Scientific and technical merit of the proposed project as determined by scientific peer review.
- Availability of funds.
- Relevance of the proposed project to program priorities.

3. Anticipated Announcement and Award Dates

After the peer review of the application is completed, the PD/PI will be able to access his or her Summary Statement (written critique) via the [eRA Commons \(//grants.nih.gov/grants/guide/url_redirect.php?id=11123\)](http://grants.nih.gov/grants/guide/url_redirect.php?id=11123). Refer to Part 1 for dates for peer review, advisory council review, and earliest start date

Information regarding the disposition of applications is available in the [NIH Grants Policy Statement \(//grants.nih.gov/grants/guide/url_redirect.php?id=11156\)](http://grants.nih.gov/grants/guide/url_redirect.php?id=11156).

Section VI. Award Administration Information

1. Award Notices

If the application is under consideration for funding, NIH will request "just-in-time" information from the applicant as described in the [NIH Grants Policy Statement \(//grants.nih.gov/grants/guide/url_redirect.php?id=11157\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11157).

A formal notification in the form of a Notice of Award (NoA) will be provided to the applicant organization for successful applications. The NoA signed by the grants management officer is the authorizing document and will be sent via email to the grantee's business official.

Awardees must comply with any funding restrictions described in [Section IV.5. Funding Restrictions](#). Selection of an application for award is not an authorization to begin performance. Any costs incurred before receipt of the NoA are at the recipient's risk. These costs may be reimbursed only to the extent considered allowable pre-award costs.

Any application awarded in response to this FOA will be subject to terms and conditions found on the [Award Conditions and Information for NIH Grants \(//grants.nih.gov/grants/guide/url_redirect.php?id=11158\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11158) website. This includes any recent legislation and policy applicable to awards that is highlighted on this website.

2. Administrative and National Policy Requirements

All NIH grant and cooperative agreement awards include the [NIH Grants Policy Statement \(//grants.nih.gov/grants/guide/url_redirect.php?id=11120\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11120) as part of the NoA. For these terms of award, see the [NIH Grants Policy Statement Part II: Terms and Conditions of NIH Grant Awards, Subpart A: General \(//grants.nih.gov/grants/guide/url_redirect.php?id=11157\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11157) and [Part II: Terms and Conditions of NIH Grant Awards, Subpart B: Terms and Conditions for Specific Types of Grants, Grantees, and Activities \(//grants.nih.gov/grants/guide/url_redirect.php?id=11159\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11159). More information is provided at [Award Conditions and Information for NIH Grants \(//grants.nih.gov/grants/guide/url_redirect.php?id=11158\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=11158). More specifically, for K Awards, visit the [Research Career Development \(K \) Awardees section of the NIH Grants Policy Statement \(//grants.nih.gov/grants/guide/url_redirect.php?id=51164\)](https://grants.nih.gov/grants/guide/url_redirect.php?id=51164).

Recipients of federal financial assistance (FFA) from HHS must administer their programs in compliance with federal civil rights laws that prohibit discrimination on the basis of race, color, national origin, disability, age and, in some circumstances, religion, conscience, and sex. This includes ensuring programs are accessible to persons with limited English proficiency. The HHS Office for Civil Rights provides guidance on complying with civil rights laws enforced by HHS. Please see <https://www.hhs.gov/civil-rights/for-providers/provider-obligations/index.html> (<https://www.hhs.gov/civil-rights/for-providers/provider-obligations/index.html>) and <http://www.hhs.gov/ocr/civilrights/understanding/section1557/index.html> (<https://www.hhs.gov/ocr/civilrights/understanding/section1557/index.html>).

HHS recognizes that research projects are often limited in scope for many reasons that are nondiscriminatory, such as the principal investigator's scientific interest, funding limitations, recruitment requirements, and other considerations. Thus, criteria in research protocols that target or exclude certain populations are warranted where nondiscriminatory justifications establish that such criteria are appropriate with respect to the health or safety of the subjects, the scientific study design, or the purpose of the research. For additional guidance regarding how the provisions apply to NIH grant programs, please contact the Scientific/Research Contact that is identified in Section VII under Agency Contacts of this FOA.

- Recipients of FFA must ensure that their programs are accessible to persons with limited English proficiency. HHS provides guidance to recipients of FFA on meeting their legal obligation to take reasonable steps to provide meaningful access to their programs by persons with limited English proficiency. Please see <https://www.hhs.gov/civil-rights/for-individuals/special-topics/limited-english-proficiency/fact-sheet-guidance/index.html> (<https://www.hhs.gov/civil-rights/for-individuals/special-topics/limited-english-proficiency/fact-sheet-guidance/index.html>) and <https://www.lep.gov> (<https://www.lep.gov>). For further guidance on providing culturally and linguistically appropriate services, recipients should review the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care at <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53> (<https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53>).
- Recipients of FFA also have specific legal obligations for serving qualified individuals with disabilities. Please see <http://www.hhs.gov/ocr/civilrights/understanding/disability/index.html> (<https://www.hhs.gov/ocr/civilrights/understanding/disability/index.html>).
- HHS funded health and education programs must be administered in an environment free of sexual harassment. Please see <https://www.hhs.gov/civil-rights/for-individuals/sex-discrimination/index.html> (<https://www.hhs.gov/civil-rights/for-individuals/sex-discrimination/index.html>); <https://www2.ed.gov/about/offices/list/ocr/docs/shguide.html>; and <https://www.eeoc.gov/eeoc/publications/upload/fs-sex.pdf> (<https://www.eeoc.gov/eeoc/publications/upload/fs-sex.pdf>). For information about NIH's commitment to supporting a safe and respectful work environment, who to contact with questions or concerns, and what NIH's expectations are for institutions and the individuals supported on NIH-funded awards, please see <https://grants.nih.gov/grants/policy/harassment.htm> (<https://grants.nih.gov/grants/policy/harassment.htm>).

- Recipients of FFA must also administer their programs in compliance with applicable federal religious nondiscrimination laws and applicable federal conscience protection and associated anti-discrimination laws. Collectively, these laws prohibit exclusion, adverse treatment, coercion, or other discrimination against persons or entities on the basis of their consciences, religious beliefs, or moral convictions. Please see <https://www.hhs.gov/conscience/conscience-protections/index.html> (<https://www.hhs.gov/conscience/conscience-protections/index.html>) and <https://www.hhs.gov/conscience/religious-freedom/index.html> (<https://www.hhs.gov/conscience/religious-freedom/index.html>).

Please contact the HHS Office for Civil Rights for more information about obligations and prohibitions under federal civil rights laws at <https://www.hhs.gov/ocr/about-us/contact-us/index.html> (<https://www.hhs.gov/ocr/about-us/contact-us/index.html>) or call 1-800-368-1019 or TDD 1-800-537-7697.

In accordance with the statutory provisions contained in Section 872 of the *Duncan Hunter National Defense Authorization Act of Fiscal Year 2009* (Public Law 110-417), NIH awards will be subject to the Federal Awardee Performance and Integrity Information System (FAPIS) requirements. FAPIS requires Federal award making officials to review and consider information about an applicant in the designated integrity and performance system (currently FAPIS) prior to making an award. An applicant, at its option, may review information in the designated integrity and performance systems accessible through FAPIS and comment on any information about itself that a Federal agency previously entered and is currently in FAPIS. The Federal awarding agency will consider any comments by the applicant, in addition to other information in FAPIS, in making a judgement about the applicant's integrity, business ethics, and record of performance under Federal awards when completing the review of risk posed by applicants as described in 45 CFR Part 75.205 Federal awarding agency review of risk posed by applicants. This provision will apply to all NIH grants and cooperative agreements except fellowships.

Data Management and Sharing

Note: The NIH Policy for Data Management and Sharing is effective for due dates on or after January 25, 2023.

Consistent with the NIH Policy for Data Management and Sharing, when data management and sharing is applicable to the award, recipients will be required to adhere to the Data Management and Sharing requirements as outlined in the [NIH Grants Policy Statement](https://grants.nih.gov/grants/policy/nihgps/HTML5/section_8/8.2.3_sharing_research_resources.htm#Data) (https://grants.nih.gov/grants/policy/nihgps/HTML5/section_8/8.2.3_sharing_research_resources.htm#Data). Upon the approval of a Data Management and Sharing Plan, it is required for recipients to implement the plan as described.

3. Reporting

When multiple years are involved, awardees will be required to submit the Research Performance Progress Report (RPPR) annually and financial statements as required in the [NIH Grants Policy Statement](https://grants.nih.gov/grants/guide/url_redirect.php?id=11120) (https://grants.nih.gov/grants/guide/url_redirect.php?id=11120). The Supplemental Instructions for Individual Career Development (K) RPPRs must be followed. The Mentor's Report must include an annual evaluation statement of the candidate's progress.

A final RPPR, invention statement, and the expenditure data portion of the Federal Financial Report are required for closeout of an award, as described in the [NIH Grants Policy Statement](https://grants.nih.gov/grants/guide/url_redirect.php?id=11161) (https://grants.nih.gov/grants/guide/url_redirect.php?id=11161).

The Federal Funding Accountability and Transparency Act of 2006 (Transparency Act), includes a requirement for awardees of Federal grants to report information about first-tier subawards and executive compensation under Federal assistance awards issued in FY2011 or later. All awardees of applicable NIH grants and cooperative agreements are required to report to the Federal Subaward Reporting System (FSRS) available at www.fsrs.gov (https://grants.nih.gov/grants/guide/url_redirect.php?id=11170) on all subawards over \$25,000. See the [NIH Grants Policy Statement](https://grants.nih.gov/grants/guide/url_redirect.php?id=11171) (https://grants.nih.gov/grants/guide/url_redirect.php?id=11171) for additional information on this reporting requirement.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts from all Federal awarding agencies with a cumulative total value greater than \$10,000,000 for any period of time during the period of performance of a Federal award, must report and maintain the currency of information reported in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently FAPIS). This is a statutory requirement under section 872 of Public Law 110-417, as amended (41 U.S.C. 2313). As required by section 3010 of Public Law 111-212, all information posted in the designated integrity and performance system on or after April 15, 2011, except past performance reviews required for Federal procurement contracts, will be publicly available. Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75 Award Term and Conditions for Recipient Integrity and Performance Matters.

4. Evaluation

In carrying out its stewardship of human resource-related programs, the NIH may request information essential to an assessment of the effectiveness of this program from databases and from participants themselves. Participants may be contacted after the completion of this award for periodic updates on various aspects of their employment history, publications, support from research grants or contracts, honors and awards, professional activities, and other information helpful in evaluating the impact of the program.

Section VII. Agency Contacts

We encourage inquiries concerning this funding opportunity and welcome the opportunity to answer questions from potential applicants.

Because of the difference in individual Institute and Center (IC) program requirements for this FOA, prospective applications **MUST consult the Table of IC-Specific Information, Requirements, and Staff Contacts** (<https://grants.nih.gov/grants/guide/contacts/parent-K01-CT-not-allowed.html>), to make sure that their application is responsive to the requirements of one of the participating NIH ICs. Prior consultation with NIH staff is strongly encouraged.

Application Submission Contacts

eRA Service Desk (Questions regarding ASSIST, eRA Commons, application errors and warnings, documenting system problems that threaten submission by the due date, and post submission issues)

Finding Help Online: <http://grants.nih.gov/support/> (<http://grants.nih.gov/support/>) (preferred method of contact)

Telephone: 301-402-7469 or 866-504-9552 (Toll Free)

GrantsInfo (Questions regarding application instructions, application processes, and NIH grant resources)

Email: GrantsInfo@nih.gov (<mailto:GrantsInfo@nih.gov>) (preferred method of contact)

Telephone: 301-480-7075

Grants.gov Customer Support (Questions regarding Grants.gov registration and Workspace)

Contact Center Telephone: 800-518-4726

Email: support@grants.gov (<mailto:support@grants.gov>)

Scientific/Research Contact(s)

See [Table of IC-Specific Information, Requirements and Staff Contacts](https://grants.nih.gov/grants/guide/contacts/parent-K01-CT-not-allowed.html) (<https://grants.nih.gov/grants/guide/contacts/parent-K01-CT-not-allowed.html>)

Peer Review Contact(s)

Examine your eRA Commons account for review assignment and contact information (information appears two weeks after the submission due date).

Financial/Grants Management Contact(s)

See [Table of IC-Specific Information, Requirements and Staff Contacts](https://grants.nih.gov/grants/guide/contacts/parent-K01-CT-not-allowed.html) (<https://grants.nih.gov/grants/guide/contacts/parent-K01-CT-not-allowed.html>)

Section VIII. Other Information

Recently issued trans-NIH [policy notices](https://grants.nih.gov/grants/guide/url_redirect.php?id=11163) (https://grants.nih.gov/grants/guide/url_redirect.php?id=11163) may affect your application submission. A full list of policy notices published by NIH is provided in the [NIH Guide for Grants and Contracts](https://grants.nih.gov/grants/guide/url_redirect.php?id=11164) (https://grants.nih.gov/grants/guide/url_redirect.php?id=11164). All awards are subject to the terms and conditions, cost principles, and other considerations described in the [NIH Grants Policy Statement](https://grants.nih.gov/grants/guide/url_redirect.php?id=11120) (https://grants.nih.gov/grants/guide/url_redirect.php?id=11120).

Please note that the [NIH Loan Repayment Programs \(LRPs\)](https://www.lrp.nih.gov/) (<https://www.lrp.nih.gov/>) are a set of programs to attract and retain promising early-stage investigators in research careers by helping them to repay their student loans. Recipients of fellowship and career development awards are encouraged to apply for an extramural LRP award.

Authority and Regulations

Awards are made under the authorization of Sections 301 and 405 of the Public Health Service Act as amended (42 USC 241 and 284) and under Federal Regulations 42 CFR Part 52 and 45 CFR Part 75.

[Weekly TOC for this Announcement \(/grants/guide/WeeklyIndex.cfm?05-08-20\)](#)

[NIH Funding Opportunities and Notices \(/grants/guide/index.html\)](#)



[\(https://www.hhs.gov/\)](https://www.hhs.gov/)

Department of Health
and Human Services (HHS)



[\(https://www.usa.gov/\)](https://www.usa.gov/)

NIH... Turning Discovery Into Health®

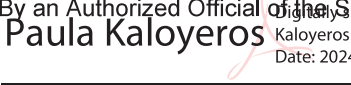
Exhibit E to Shurtleff Declaration

FDP Cost Reimbursement Subaward

Federal Awarding Agency: National Institutes of Health (NIH)	
Pass-Through Entity (PTE): Regents of the University of Michigan	Subrecipient: The Research Foundation for The State University of New York
PTE PI: Sunghee Lee	Sub PI: Elizabeth Vasquez
PTE Federal Award No: 1R01AG082080-01A1	Subaward No: SUBK00019400
Project Title: Improving Inclusivity of Alzheimer's Disease and Related Dementias Research for Asian Americans and Latinx through Nationally Representative Hybrid Sampling.	
Subaward Budget Period: Start: 04/01/2024 End: 12/31/2024	Amount Funded This Action (USD): \$ 5,966.00
Estimated Period of Performance: Start: 04/01/2024 End: 12/31/2028	Incrementally Estimated Total (USD): \$ 26,847.00

Terms and Conditions

- PTE hereby awards a cost reimbursable subaward, (as determined by 2 CFR 200.331), to Subrecipient. The Statement of Work and budget for this Subaward are as shown in Attachment 5. In its performance of Subaward work, Subrecipient shall be an independent entity and not an employee or agent of PTE.
- Subrecipient shall submit invoices not more often than monthly and not less frequently than quarterly for allowable costs incurred. Upon the receipt of proper invoices, the PTE agrees to process payments in accordance with this Subaward and 2 CFR 200.305. All invoices shall be submitted using Subrecipient's standard invoice, but at a minimum shall include current and cumulative costs (including cost sharing), breakdown by major cost category, Subaward number, and certification, as required in 2 CFR 200.415(a). Invoices that do not reference PTE Subaward number shall be returned to Subrecipient. Invoices and questions concerning invoice receipt or payments shall be directed to the party's Financial Contact, shown in Attachment 3A.
- A final statement of cumulative costs incurred, including cost sharing, marked "FINAL" must be submitted to PTE's Financial Contact, as shown in Attachment 3A, not later than 60 days after the final Budget Period end date. The final statement of costs shall constitute Subrecipient's final financial report.
- All payments shall be considered provisional and are subject to adjustment within the total estimated cost in the event such adjustment is necessary as a result of an adverse audit finding against the Subrecipient.
- Matters concerning the technical performance of this Subaward shall be directed to the appropriate party's Principal Investigator as shown in Attachments 3A and 3B. Technical reports are required as shown in Attachment 4.
- Matters concerning the request or negotiation of any changes in the terms, conditions, or amounts cited in this Subaward, and any changes requiring prior approval, shall be directed to the PTE's Administrative Contact and the Subrecipient's Authorized Official Contact shown in Attachments 3A and 3B. Any such change made to this Subaward requires the written approval of each party's Authorized Official as shown in Attachments 3A and 3B.
- The PTE may issue non-substantive changes to the Budget Period(s) and Budget Bilaterally. Unilateral modification shall be considered valid 14 days after receipt unless otherwise indicated by Subrecipient when sent to Subrecipient's Authorized Official Contact, as shown in Attachment 3B.
- Each party shall be responsible for its negligent acts or omissions and the negligent acts or omissions of its employees, officers, or directors, to the extent allowed by law.
- Either party may terminate this Subaward with 30 days written notice. Notwithstanding, if the Awarding Agency terminates the Federal Award, PTE will terminate in accordance with Awarding Agency requirements. PTE notice shall be directed to the Authorized Official Contact, and Subrecipient notice shall be directed to the Authorized Official Contact as shown in Attachments 3A and 3B. PTE shall pay Subrecipient for termination costs as allowable under Uniform Guidance, 2 CFR 200, or 45 CFR Part 75 Appendix IX, as applicable.
- By signing this Subaward, including the attachments hereto which are hereby incorporated by reference, Subrecipient certifies that it will perform the Statement of Work in accordance with the terms and conditions of this Subaward and the applicable terms of the Federal Award, including the appropriate Research Terms and Conditions ("RTCs") of the Federal Awarding Agency, as referenced in Attachment 2. The parties further agree that they intend this subaward to comply with all applicable laws, regulations, and requirements.

By an Authorized Official of the PTE:		By an Authorized Official of the Subrecipient:	
 Name: Ashley K. Tyler Date: 08/20/2024 Title: Contract Administration Senior		 Name: Paula Kaloyeros Date: 2024.08.19 08:48:17 -04'00' Title: Assistant VP, Sponsored Programs Administration	

Attachment 1

Certifications and Assurances

Subaward Number:

SUBK00019400

Certification Regarding Lobbying (2 CFR 200.450)

By signing this Subaward, the Subrecipient Authorized Official certifies, to the best of his/her knowledge and belief, that no Federal appropriated funds have been paid or will be paid, by or on behalf of the Subrecipient, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement in accordance with 2 CFR 200.450.

If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or intending to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the Subrecipient shall complete and submit Standard Form -LLL, "Disclosure Form to Report Lobbying," to the PTE.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by 31 U.S.C. 1352. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Debarment, Suspension, and Other Responsibility Matters (2 CFR 200.214 and 2 CFR 180)

By signing this Subaward, the Subrecipient Authorized Official certifies, to the best of his/her knowledge and belief that neither the Subrecipient nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in this transaction by any federal department or agency, in accordance with 2 CFR 200.214 and 2 CFR 180.

Audit and Access to Records

Subrecipient certifies that it will provide PTE with notice of any adverse findings which impact this Subaward. Subrecipient certifies compliance with applicable provisions of 2 CFR 200.501-200.521. If Subrecipient is not required to have a Single Audit as defined by 200.501, Awarding Agency requirements, or the Single Audit Act, then Subrecipient will provide notice of the completion of any required audits and will provide access to such audits upon request. Subrecipient will provide access to records as required by parts 2 CFR 200.332 (a)(5), 200.337, and 200.338 as applicable.

Program for Enhancement of Contractor Employee Protections (41 U.S.C 4712)

Subrecipient is hereby notified that they are required to: inform their employees working on any federal award that they are subject to the whistleblower rights and remedies of the program; inform their employees in writing of employee whistleblower protections under 41 U.S.C §4712 in the predominant native language of the workforce; and include such requirements in any agreement made with a subcontractor or subgrantee.

The Subrecipient shall require that the language of the certifications above in this Attachment 1 be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

Use of Name

Neither party shall use the other party's name, trademarks, or other logos in any publicity, advertising, or news release without the prior written approval of an authorized representative of that party. The parties agree that each party may use factual information regarding the existence and purpose of the relationship that is the subject of this Subaward for legitimate business purposes, to satisfy any reporting and funding obligations, or as required by applicable law or regulation without written permission from the other party. In any such statement, the relationship of the parties shall be accurately and appropriately described.

Prohibition on Certain Telecommunication and Video Surveillance Services or Equipment

Pursuant to 2 CFR 200.216, Subrecipient will not obligate or expend funds received under this Subaward to: (1) procure or obtain; (2) extend or renew a contract to procure or obtain; or (3) enter into a contract (or extend or renew a contract) to procure or obtain equipment, services, or systems that uses covered telecommunications equipment or services (as described in Public Law 115-232, section 889) as a substantial or essential component of any system, or as a critical technology as part of any system.

Attachment 2

Federal Award Terms and Conditions

Subaward Number

SUBK00019400

Required Data Elements

The data elements required by Uniform
Guidance are incorporated as entered.

Awarding Agency Institute (If Applicable)

NATIONAL INSTITUTE ON AGING

Federal Award Issue Date FAIN Assistance Listing No.

03/22/24

R01AG082080

93.866

Assistance Listing Program Title (ALPT)

Aging Research

Key Personnel Per NOA

Refer to attached NOA; as applicable.

This Subaward Is:

Research & Development



Subject to FFATA

General Terms and Conditions

By signing this Subaward, Subrecipient agrees to the following:

1. To abide by the conditions on activities and restrictions on expenditure of federal funds in appropriations acts that are applicable to this Subaward to the extent those restrictions are pertinent. This includes any recent legislation noted on the Federal Awarding Agency's website:

<https://grants.nih.gov/policy/index.htm>

2. 2 CFR 200

3. The Federal Awarding Agency's grants policy guidance, including addenda in effect as of the beginning date of the period of performance or as amended found at:

<https://grants.nih.gov/policy/nihgps/index.htm>

4. Applicable Research Terms and Conditions, including any Federal Awarding Agency's Specific Requirements found at:

<https://nsf.gov/awards/managing/rtc.jsp>

except for the following :

- a. No-cost extensions require the written approval of the PTE. Any requests for a no-cost extension shall be directed to the Authorized Official Contact shown in Attachment 3A, not less than 30 days prior to the desired effective date of the requested change.
- b. Any payment mechanisms and financial reporting requirements described in the applicable Federal Awarding Agency Terms and Conditions and Agency-Specific Requirements are replaced with Terms and Conditions (1) through (4) of this Subaward; and
- c. Any prior approvals are to be sought from the PTE and not the Federal Awarding Agency.
- d. Title to equipment as defined in 2 CFR 200.1 that is purchased or fabricated with research funds or Subrecipient cost sharing funds, as direct costs of the project or program, shall vest in the Subrecipient subject to the conditions specified in 2 CFR 200.313.
- e. Prior approval must be sought for a change in Subrecipient PI or change in Key Personnel (defined as listed on the NOA).

5. Treatment of program income: Additive

Special Terms and Conditions:**Data Sharing and Access:**

Subrecipient agrees to comply with the Federal Awarding Agency's data sharing and/or access requirements as reflected in the NOA or the Federal Awarding Agency's standard terms and conditions as referenced in General Terms and Conditions 1-4 above.

Attached

is a Data Management and/or Sharing Plan that incorporates additional requirements as submitted to the Federal Awarding Agency.

Data Rights:

Subrecipient grants to PTE the right to use data created in the performance of this Subaward solely for the purpose of and only to the extent required to meet PTE's obligations to the Federal Government under its PTE Federal Award.

Copyrights:

Subrecipient Grants to PTE an irrevocable, royalty-free, non-transferable, non-exclusive right and license to use, reproduce, make derivative works, display, and perform publicly any copyrights or copyrighted material (including any computer software and its documentation and/or databases) first developed and delivered under this Subaward solely for the purpose of and only to the extent required to meet PTE's obligations to the Federal Government under its PTE Federal Award.

Subrecipient grants to PTE the right to use any written progress reports and deliverables created under this Subaward solely for the purpose of and only to the extent required to meet PTE's obligations to the Federal Government under its Federal Award.

Promoting Objectivity in Research (COI):

Subrecipient must designate herein which entity's Financial Conflicts of Interest policy (COI) will apply: Subrecipient

If applying its own COI policy, by execution of this Subaward, Subrecipient certifies that its policy complies with the requirements of the relevant Federal Awarding Agency as identified herein: NIH - 42 CFR Part 50 Subpart F

Subrecipient shall report any financial conflict of interest to PTE's Administrative Representative or COI contact, as designated on Attachment 3A. Any financial conflicts of interest identified shall, when applicable, subsequently be reported to Federal Awarding Agency. Such report shall be made before expenditure of funds authorized in this Subaward and within 45 days of any subsequently identified COI.

Work Involving Human or Vertebrate Animals (Select Applicable Options)☐ No Human or Vertebrate Animals

IRB

Exempt and determination will be provided upon request

☒ Human Subjects Exempt☐ Vertebrate Animals*The PTE requires verification of IRB and/or IACUC approval be sent to the* Principal Investigator *as required above:*

Subrecipient agrees that any non-exempt human and/or vertebrate animal research protocol conducted under this Subaward shall be reviewed and approved by the appropriate Institutional Review Board (IRB) and/or its Institutional Animal Care and Use Committee (IACUC), as applicable and that it will maintain current and duly approved research protocols for all periods of the Subaward involving human and/or vertebrate animal research. Subrecipient certifies that the appropriate IRB and/or IACUC are in full compliance with applicable state and federal laws and regulations. The Subrecipient certifies that any submitted IRB / IACUC approval represents a valid, approved protocol that is entirely consistent with the Project associated with this Subaward. In no event shall Subrecipient invoice or be reimbursed for any human or vertebrate animals related expenses incurred in a period where any applicable IRB / IACUC approval is not properly in place.

Human Subjects Data (Select One) Not Applicable

This section left intentionally blank

This section left intentionally blank

Additional Terms

1. This Subaward is subject to the applicable PTE Federal Award terms and conditions. A copy of the Notice of Award ("NOA") is provided within Attachment 6.
2. Federal Identifier AG082080/Application Identifier 23-PAF04502, as submitted in response to Funding Opportunity Announcement (FOA) PAR-22-093, is incorporated herein by reference, as applicable.

Attachment 3A

Pass-Through Entity (PTE) Contacts

Subaward Number:

SUBK00019400

PTE Information

Entity Name: Regents of the University of Michigan

Legal Address: 3003 South State Street
Ann Arbor, Michigan 48109

Website: https://umich.edu

PTE Contacts

Central Email: subcontracts@umich.edu

Principal Investigator Name: Sunghee Lee

Email: sungheel@umich.edu

Telephone Number: 734-764-8354

Administrative Contact Name: Ashley K. Tyler, Contract Administration Senior

Email: tyleras@umich.edu

Telephone Number: 734-764-8256

COI Contact email (if different to above): FCOI.Reports@umich.edu

Financial Contact Name: Office of Contract Administration, Accounting Team

Email: subcontracts.accounting@umich.edu

Telephone Number: 734-764-8204

Email invoices? ☒ Yes ☐ No Invoice email (if different): subcontract.invoices@umich.edu

Authorized Official Name: Peter J. Gerard, Contract Administration Assistant Director

Email: subcontracts@umich.edu

Telephone Number: 734-764-8204

PI Address:

SRC-ISR
426 Thompson Street
Ann Arbor, MI 48106-1248

Administrative Address:

Sponsored Programs - Office of Contract Administration
5000 Wolverine Tower
3003 South State Street
Ann Arbor, Michigan 48109-1287

Invoice Address:

Email Only: subcontract.invoices@umich.edu

Attachment 3B**Subrecipient Contacts**

Subaward Number:

SUBK00019400

Subrecipient Information for [FFATA](#) reporting

Entity's UEI Name: The Research Foundation for The State University of New York

EIN No.: 14-1368361

Institution Type: Nonprofit with 501c3 Status (other than Inst. of Higher Ed.)

UEI: NHH3T1Z96H29

Currently registered in SAM.gov: ☒ Yes ☐ NoExempt from reporting executive compensation: ☒ Yes ☐ No (if no, complete 3Bpg2)

Parent UEI:

This section for U.S. Entities:

Zip Code [Look-up](#)

Place of Performance Address

Congressional District: NY-020

Zip Code+4: 12222-0100

1400 Washington Ave, Albany, NY

Subrecipient Contacts

Central Email: preaward@albany.edu

Website: https://www.albany.edu/spa/indexmain.php

Principal Investigator Name: Elizabeth Vásquez

Email: evasquez2@albany.edu

Telephone Number: 518-408-2362

Administrative Contact Name: Todd Remkus

Email: preaward@albany.edu

Telephone Number: 518-442-3196

Financial Contact Name: Jerold Gauriloff

Email: amsfr@albany.edu

Telephone Number: 518-442-3196

Invoice Email: amsfr@albany.edu

Authorized Official Name: Paula Kaloyeros

Email: preaward@albany.edu

Telephone Number: 518-442-3196

Legal Address:1400 Washington Ave., MSC 100A
Albany, NY 12222-0100**Administrative Address:**1400 Washington Ave., MSC 100A
Albany, NY 12222-0100**Payment Address:**The Research Foundation for the SUNY
Treasurer's Office
PO Box 9
Albany, NY 12201-0009

Attachment 3B-2
Highest Compensated Officers

Subaward Number:

SUBK00019400

Subrecipient:

Institution Name: Michigan State University

PI Name: Elizabeth Vásquez

Highest Compensated Officers

The names and total compensation of the five most highly compensated officers of the entity(ies) must be listed if the entity in the preceding fiscal year received 80 percent or more of its annual gross revenues in Federal awards; and \$25,000,000 or more in annual gross revenues from Federal awards; and the public does not have access to this information about the compensation of the senior executives of the entity through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. §§ 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. See FFATA § 2(b)(1) Internal Revenue Code of 1986.

Officer 1 Name:

Officer 1 Compensation:

Officer 2 Name:

Officer 2 Compensation:

Officer 3 Name:

Officer 3 Compensation:

Officer 4 Name:

Officer 4 Compensation:

Officer 5 Name:

Officer 5 Compensation:

Attachment 4

Reporting and Prior Approval Terms

Subaward Number:

SUBK00019400

Subrecipient agrees to submit the following reports (PTE contacts are identified in Attachment 3A):

Technical Reports:

- ☐ Monthly technical/progress reports will be submitted to the PTE's Administrative Contact within 15 days of the end of the month.
- ☐ Quarterly technical/progress reports will be submitted within 30 days after the end of each project quarter to the PTE's Administrative Contact.
- ☐ Annual technical / progress reports will be submitted within 60 days prior to the end of each budget period to the PTE's Administrative Contact. Such report shall also include a detailed budget for the next Budget Period, updated other support for key personnel, certification of appropriate education in the conduct of human subject research of any new key personnel, and annual IRB or IACUC approval, if applicable.
- ☐ A Final technical/progress report will be submitted to the PTE's Administrative Contact within 60 days of the end of the Project Period or after termination of this award, whichever comes first.
- ☒ Technical/progress reports on the project as may be required by PTE's Principal Investigator in order for the PTE to satisfy its reporting obligations to the Federal Awarding Agency.

Prior Approvals:

Carryover:

Carryover is automatic

Other Reports:

- ☒ In accordance with 37 CFR 401.14, Subrecipient agrees to notify both the Federal Awarding Agency via iEdison and PTE's Financial Contact within 60 days after Subrecipient's inventor discloses invention(s) in writing to Subrecipient's personnel responsible for patent matters. The Subrecipient will submit a final invention report using Federal Awarding Agency specific forms to the PTE's Financial Contact within 60 days of the end of the Project Period to be included as part of the PTE's final invention report to the Federal Awarding Agency.

A negative report is required: Yes

- ☐ Property Inventory Report (only when required by Federal Awarding Agency), specific requirements below.

Additional Technical and Reporting Requirements:

Closeout documents: The closeout documents provided within Attachment 6 must to be completed and returned along with the Final Invoice.

Invoicing Instructions: Invoices shall be e-mailed to subcontract.invoices@umich.edu for processing. In addition to the invoicing terms and conditions identified on the face page of the Subaward each invoice must include the following:

- a. PO Number: 3008154128
- b. A unique invoice number: Each payment request must be identified by a unique invoice number, which can only be used one time regardless of the number of Michigan contracts or orders held by an organization.
- c. Invoice period: The period for which the expenditures apply
- d. Remittance address
- e. Per face page, each invoice must include a certification, signed by an official who is authorized to legally bind the non-Federal entity, which reads as follows: "By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812)."

Sufficient detail must be provided to allow for PTE review of invoices. Additional detail or supporting documentation, requested on an as-needed basis, will be made available upon request.

SUBK00019400

Subaward Number:

SUBK00019400

Attachment 5

Statement of Work, Cost Sharing, Indirects & Budget

Statement of Work

☐ Below ☐ Attached, 1 pages

If award is FFATA eligible and SOW exceeds 4000 characters, include a *Subrecipient Federal Award Project Description*

This section left intentionally blank.

Budget Information

Indirect Information Indirect Cost Rate (IDC) Applied

56.50

%

Cost Sharing

No

Rate Type:

Modified Total Direct Costs

If Yes, include Amount: \$

Budget Details

☐ Below ☒ Attached, 3 pages

Subrecipient is responsible for making sure that costs incurred/charged are allowable in accordance with the terms and conditions of the Federal award.

Budget Totals

Direct Costs \$ 3,812.00

Indirect Costs \$ 2,154.00

Total Costs \$ 5,966.00

All amounts are in United States Dollars

University at Albany – SUNY

9/1/23-8/31/28

STATEMENT OF WORK**Project Summary:**

Reported racial and ethnic disparities associated with ADRD in the extant literature are mainly for Blacks and Latinx. These two groups experience a higher rate of ADRD prevalence as well as missed diagnosis than Whites. At the same time, studies based on the members of a health plan in Northern California that illustrated lower ADRD prevalence among Asian Americans than Whites and prevalence heterogeneity within Asian Americans offer a glimpse into **dynamics of ADRD across racial and ethnic groups which need to extend beyond minimum standard racial/ethnic categories** (e.g., Chinese rather than Asian). Unfortunately, **population-level ADRD research data are absent beyond White, Blacks and Latinxs** due to lacking statistical power. For granular subgroups, data collection is exorbitantly expensive. Low research participation by racial and ethnic diverse individuals presents challenges even with unlimited resources. This study aims to introduce a hybrid adaptive Web-based respondent driven sampling under the multiple frame estimation framework as a practical sampling and data collection method in order to address the lack of racial and/or ethnic minority data among older adults. The Hybrid Adaptive Web-based respondent driven sampling (H-WRDS) recruits participants through peer referrals within existing social networks, administers data collection on the Web and adapts its design aspects based on the incoming data in order to generate data mirroring the theoretical underpinning of RDS. Strong social ties with their own group and high Web penetration rates among racial and ethnic minorities older adults in the U.S. make H-WRDS a strong candidate as a practical data collection method; however, its practice as well as the data quality remain to be verified. This project is well suited to deliver **a fuller picture of ADRD-related disparities, data collection methods overcoming such barriers are critically needed** particularly in the era of COVID-19 that has brought racial and ethnic health disparities to the surface. This study aims to address the lack of inclusive ADRD research data by **establishing a national panel through hybrid web respondent driven sampling (H-WRDS)**, to examine **the role of culturally sensitive social engagement as a mediator**.

Project tasks and deliverables:

- Assist the PI (Dr. Lee) and her team with the implementation and execution of the formative project
- Lead Spanish language adaptations on survey instruments and respondent communication materials
- Supervise RAs assigned to the Spanish portion of the survey who will handle respondent inquiries and conduct phone survey interviews.
- Lead Latinx in-depth interviews (n=10) and Co-lead questionnaire development
- Review data analysis and propose suggestions to enhance the scope of the data analysis
- Assist the team with the interpretation of the data
- Assist with the drafting of project reports and scientific manuscripts and presentations
- Participate in survey protocol development and Aim 2 analysis (social network as a mediator of racial/ethnic disparities of ADRD risks).
- Participate in teleconference and video-enabled meetings, when needed

C. Equipment Description

List items and dollar amount for each item exceeding \$5,000

Equipment item	Funds Requested (\$)

Additional Equipment:

Additional Equipment:	Add Attachment	Delete Attachment	View Attachment
	Add Attachment	Delete Attachment	View Attachment
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)	
2. Foreign Travel Costs	
Total Travel Cost	

E. Participant/Trainee Support Costs

	Funds Requested (\$)
1. Tuition/Fees/Health Insurance	
2. Stipends	
3. Travel	
4. Subsistence	
5. Other	
Number of Participants/Trainees	
Total Participant/Trainee Support Costs	

F. Other Direct Costs		Funds Requested (\$)
1. Materials and Supplies		
2. Publication Costs		
3. Consultant Services		
4. ADP/Computer Services		
5. Subawards/Consortium/Contractual Costs		
6. Equipment or Facility Rental/User Fees		
7. Alterations and Renovations		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		
16.		
17.		
Total Other Direct Costs		
G. Direct Costs		Funds Requested (\$)
Total Direct Costs (A thru F)		3,812.00
H. Indirect Costs		Funds Requested (\$)
Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)
MTDC	56.50	3,812.00
Total Indirect Costs		2,154.00
Cognizant Federal Agency (Agency Name, POC Name, and POC Phone Number)		
DHHS, Ryan McCarthy, 212-264-2069		
I. Total Direct and Indirect Costs		Funds Requested (\$)
Total Direct and Indirect Institutional Costs (G + H)		5,966.00
J. Fee		Funds Requested (\$)
K. Total Costs and Fee		Funds Requested (\$)
Total Costs and Fee (I + J)		5,966.00
L. Budget Justification		
(Only attach one file.) 3 Budget Justification UAlbany Vasquez		
		View Attachment
		Delete Attachment
		Add Attachment

Attachment 6

Notice of Award (NOA) and any additional documents

- ☒ The following pages include the NOA and if applicable any additional documentation referenced throughout this Subaward.
- ☐ Not incorporating the NOA or any additional documentation to this Subaward.

**Recipient Information****1. Recipient Name**

REGENTS OF THE UNIVERSITY OF
MICHIGAN
1109 GEDDES AVE, SUITE 3300
ANN ARBOR, MI 48109

2. Congressional District of Recipient
06**3. Payment System Identifier (ID)**
1386006309A1**4. Employer Identification Number (EIN)**
386006309**5. Data Universal Numbering System (DUNS)**
073133571**6. Recipient's Unique Entity Identifier**
GNJ7BBP73WE9**7. Project Director or Principal Investigator**
Sung-Hee Lee, PHD
Research Associate Professor
sungheel@umich.edu
734-764-8354**8. Authorized Official**
Mr. Reynaldo Martell
martellr@umich.edu
734-647-9099**Federal Agency Information****9. Awarding Agency Contact Information**
Maurice Koo
Extramural Support Assistant
NATIONAL INSTITUTE ON AGING
koom@mail.nih.gov
3014351135**10. Program Official Contact Information**
John Phillips
Health Scientist Administrator
NATIONAL INSTITUTE ON AGING
john.phillips@nih.gov
301 5551212**Federal Award Information****11. Award Number**

1R01AG082080-01A1

12. Unique Federal Award Identification Number (FAIN)

R01AG082080

13. Statutory Authority

42 USC 241 42 CFR 52

14. Federal Award Project Title

Improving Inclusivity of Alzheimer's Disease and Related Dementias Research for
Asian Americans and Latinx through Nationally Representative Hybrid Sampling.

15. Assistance Listing Number

93.866

16. Assistance Listing Program Title

Aging Research

17. Award Action Type

New Competing

18. Is the Award R&D?

Yes

Summary Federal Award Financial Information**19. Budget Period Start Date 04/01/2024 – End Date 12/31/2024****20. Total Amount of Federal Funds Obligated by this Action**

\$979,196

20 a. Direct Cost Amount

\$627,690

20 b. Indirect Cost Amount

\$351,506

21. Authorized Carryover**22. Offset****23. Total Amount of Federal Funds Obligated this budget period**

\$979,196

24. Total Approved Cost Sharing or Matching, where applicable

\$0

25. Total Federal and Non-Federal Approved this Budget Period

\$979,196

26. Project Period Start Date 04/01/2024 – End Date 12/31/2028**27. Total Amount of the Federal Award including Approved Cost**

\$979,196

Sharing or Matching this Project Period

28. Authorized Treatment of Program Income

Additional Costs

29. Grants Management Officer - Signature

Jessica Perez

30. Remarks

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.



RESEARCH
Department of Health and Human Services
National Institutes of Health

Notice of Award



NATIONAL INSTITUTE ON AGING

SECTION I – AWARD DATA – 1R01AG082080-01A1

Principal Investigator(s):

Sung-Hee Lee, PHD

Award e-mailed to: swhite-gov@umich.edu

Dear Authorized Official:

The National Institutes of Health hereby awards a grant in the amount of \$979,196 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to The Regents of the University of Michigan in support of the above referenced project. This award is pursuant to the authority of 42 USC 241 42 CFR 52 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.

Each publication, press release, or other document about research supported by an NIH award must include an acknowledgment of NIH award support and a disclaimer such as "Research reported in this publication was supported by the National Institute On Aging of the National Institutes of Health under Award Number R01AG082080. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health." Prior to issuing a press release concerning the outcome of this research, please notify the NIH awarding IC in advance to allow for coordination.

Award recipients must promote objectivity in research by establishing standards that provide a reasonable expectation that the design, conduct and reporting of research funded under NIH awards will be free from bias resulting from an Investigator's Financial Conflict of Interest (FCOI), in accordance with the 2011 revised regulation at 42 CFR Part 50 Subpart F. The Institution shall submit all FCOI reports to the NIH through the eRA Commons FCOI Module. The regulation does not apply to Phase I Small Business Innovative Research (SBIR) and Small Business Technology Transfer (STTR) awards. Consult the NIH website <http://grants.nih.gov/grants/policy/coi/> for a link to the regulation and additional important information.

If you have any questions about this award, please direct questions to the Federal Agency contacts.

Sincerely yours,

Jessica Perez
Grants Management Officer
NATIONAL INSTITUTE ON AGING

Additional information follows

Cumulative Award Calculations for this Budget Period (U.S. Dollars)
Salaries and Wages

\$385,105

Fringe Benefits	\$82,216
Personnel Costs (Subtotal)	\$467,321
Consultant Services	\$6,000
Materials & Supplies	\$36,003
Other	\$111,400
Subawards/Consortium/Contractual Costs	\$5,966
ADP/Computer Services	\$1,000

Federal Direct Costs	\$627,690
Federal F&A Costs	\$351,506
Approved Budget	\$979,196
Total Amount of Federal Funds Authorized (Federal Share)	\$979,196
TOTAL FEDERAL AWARD AMOUNT	\$979,196

AMOUNT OF THIS ACTION (FEDERAL SHARE)	\$979,196
--	------------------

SUMMARY TOTALS FOR ALL YEARS (for this Document Number)		
YR	THIS AWARD	CUMULATIVE TOTALS
1	\$979,196	\$979,196
2	\$1,191,854	\$1,191,854
3	\$820,279	\$820,279
4	\$1,197,455	\$1,197,455
5	\$727,144	\$727,144

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project

Fiscal Information:

Payment System Identifier: 1386006309A1
Document Number: RAG082080A
PMS Account Type: P (Subaccount)
Fiscal Year: 2024

IC	CAN	2024	2025	2026	2027	2028
AG	8033157	\$979,196	\$1,191,854	\$820,279	\$1,197,455	\$727,144

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project

NIH Administrative Data:

PCC: 2CECNJP / OC: 41021 / Released: Perez, Jessica 03/13/2024
Award Processed: 03/25/2024 04:55:38 PM

SECTION II – PAYMENT/HOTLINE INFORMATION – 1R01AG082080-01A1

For payment and HHS Office of Inspector General Hotline information, see the NIH Home Page at <http://grants.nih.gov/grants/policy/awardconditions.htm>

SECTION III – STANDARD TERMS AND CONDITIONS – 1R01AG082080-01A1

This award is based on the application submitted to, and as approved by, NIH on the above-titled project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- The grant program legislation and program regulation cited in this Notice of Award.
- Conditions on activities and expenditure of funds in other statutory requirements, such as those included in appropriations acts.
- 45 CFR Part 75.
- National Policy Requirements and all other requirements described in the NIH Grants Policy Statement, including addenda in effect as of the beginning date of the budget period.
- Federal Award Performance Goals: As required by the periodic report in the RPPR or in the final progress report when applicable.
- This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

(See NIH Home Page at <http://grants.nih.gov/grants/policy/awardconditions.htm> for certain references cited above.)

Research and Development (R&D): All awards issued by the National Institutes of Health (NIH) meet the definition of "Research and Development" at 45 CFR Part§ 75.2. As such, auditees should identify NIH awards as part of the R&D cluster on the Schedule of Expenditures of Federal Awards (SEFA). The auditor should test NIH awards for compliance as instructed in Part V, Clusters of Programs. NIH recognizes that some awards may have another classification for purposes of indirect costs. The auditor is not required to report the disconnect (i.e., the award is classified as R&D for Federal Audit Requirement purposes but non-research for indirect cost rate purposes), unless the auditee is charging indirect costs at a rate other than the rate(s) specified in the award document(s).

This institution is a signatory to the Federal Demonstration Partnership (FDP) Phase VII Agreement which requires active institutional participation in new or ongoing FDP demonstrations and pilots.

An unobligated balance may be carried over into the next budget period without Grants Management Officer prior approval.

This grant is subject to Streamlined Noncompeting Award Procedures (SNAP).

This award is subject to the requirements of 2 CFR Part 25 for institutions to obtain a unique entity identifier (UEI) and maintain an active registration in the System for Award Management (SAM). Should a consortium/subaward be issued under this award, a UEI requirement must be included. See <http://grants.nih.gov/grants/policy/awardconditions.htm> for the full NIH award term implementing this requirement and other additional information.

This award has been assigned the Federal Award Identification Number (FAIN) R01AG082080. Recipients must document the assigned FAIN on each consortium/subaward issued under this award.

Based on the project period start date of this project, this award is likely subject to the Transparency Act subaward and executive compensation reporting requirement of 2 CFR Part 170. There are conditions that may exclude this award; see <http://grants.nih.gov/grants/policy/awardconditions.htm> for additional award applicability information.

In accordance with P.L. 110-161, compliance with the NIH Public Access Policy is now mandatory. For more information, see NOT-OD-08-033 and the Public Access website: <http://publicaccess.nih.gov/>.

Recipients must administer the project in compliance with federal civil rights laws that prohibit discrimination on the basis of race, color, national origin, disability, age, and comply with applicable conscience protections. The recipient will comply with applicable laws that prohibit discrimination on the basis of sex, which includes discrimination on the basis of gender identity, sexual orientation, and pregnancy. Compliance with these laws requires taking reasonable steps to provide meaningful access to persons with limited English proficiency and providing programs that are accessible to and usable by persons with disabilities. The HHS Office for Civil Rights provides guidance on complying with civil rights laws enforced by HHS. See <https://www.hhs.gov/civil-rights/for-providers/provider-obligations/index.html> and <https://www.hhs.gov/>.

- Recipients of FFA must ensure that their programs are accessible to persons with limited English proficiency. For guidance on meeting the legal obligation to take reasonable steps to ensure meaningful access to programs or activities by limited English proficient individuals, see <https://www.hhs.gov/civil-rights/for-individuals/special-topics/limited-english-proficiency/fact-sheet-guidance/index.html> and <https://www.lep.gov>.
- For information on an institution's specific legal obligations for serving qualified individuals with disabilities, including providing program access, reasonable modifications, and to provide effective communication, see <http://www.hhs.gov/ocr/civilrights/understanding/disability/index.html>.
- HHS funded health and education programs must be administered in an environment free of sexual harassment; see <https://www.hhs.gov/civil-rights/for-individuals/sex-discrimination/index.html>. For information about NIH's commitment to supporting a safe and respectful work environment, who to contact with questions or concerns, and what NIH's expectations are for institutions and the individuals supported on NIH-funded awards, please see <https://grants.nih.gov/grants/policy/harassment.htm>.

- For guidance on administering programs in compliance with applicable federal religious nondiscrimination laws and applicable federal conscience protection and associated anti-discrimination laws, see <https://www.hhs.gov/conscience/conscience-protections/index.html> and <https://www.hhs.gov/conscience/religious-freedom/index.html>.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than \$10,000,000 must report and maintain information in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75. This term does not apply to NIH fellowships.

Treatment of Program Income:

Additional Costs

SECTION IV – AG SPECIFIC AWARD CONDITIONS – 1R01AG082080-01A1

Clinical Trial Indicator: No

This award does not support any NIH-defined Clinical Trials. See the NIH Grants Policy Statement Section 1.2 for NIH definition of Clinical Trial.

Funding for this award has been provided by Alzheimer's Disease Initiative funds.

This award includes funds awarded for consortium activity with The Research Foundation for SUNY, University at Albany in the amount of \$5,966 (\$3,812 direct costs + \$2,154 facilities and administrative costs). Consortia are to be established and administered as described in the NIH Grants Policy Statement (NIH GPS). The referenced section of the NIH Grants Policy Statement is available at: http://grants.nih.gov/grants/policy/nihgps/HTML5/section_15/15_consortium_agreements.htm

In accordance with the Notice: NOT-OD-02-017 entitled, "GRADUATE STUDENT COMPENSATION" published on December 10, 2001, in the NIH Guide for Grants and Contracts, total direct costs (salary, fringe benefits and tuition remission) for graduate students are provided at a level not to exceed the NIH maximum allowable amount (zero level of the Ruth L. Kirschstein National Research Service Award stipend in effect at the time of the competing award). Support recommended for future years has been adjusted accordingly, if applicable. The full guide Notice describing the level of compensation allowed for a graduate student can be found at: <http://grants.nih.gov/grants/guide/notice-files/NOT-OD-02-017.html>

None of the funds in this award shall be used to pay the salary of an individual at a rate in excess of the current salary cap. Therefore, this award and/or future years are adjusted accordingly, if applicable. Current salary cap levels can be found at the following URL: http://grants.nih.gov/grants/policy/salcap_summary.htm

This award includes funds for twelve months of support. The competing budget period is awarded for less than 12 months. Continuation awards will cycle each year on 01/01. The Research Performance Progress Report (RPPR) is due 45 days prior to this date for SNAP awards or 60 days prior for non-SNAP awards.

Data Management and Sharing Policy: Applicable

This project is expected to generate scientific data. Therefore, the [Final NIH Policy for Data Management and Sharing](#) applies. The approved Data Management and Sharing (DMS) Plan is hereby incorporated as a term and condition of award, and the recipient shall manage and disseminate scientific data in accordance with the approved plan. Any significant changes to the DMS Plan (e.g., new scientific direction, a different data repository, or a timeline revision) require NIH prior approval. Failure to comply with the approved DMS

plan may result in suspension and/or termination of this award, withholding of support, audit disallowances, and/or other appropriate action. See NIH Grants Policy Statement [Section 8.2.3](#) for more information on data management and sharing expectations.

Budget	Year 1	Year 2	Year 3	Year 4	Year 5
DMS Costs	\$0	\$0	\$0	\$0	\$0

SPREADSHEET SUMMARY

AWARD NUMBER: 1R01AG082080-01A1

INSTITUTION: The Regents of the University of Michigan

Budget	Year 1	Year 2	Year 3	Year 4	Year 5
Salaries and Wages	\$385,105	\$419,428	\$362,778	\$422,088	\$350,540
Fringe Benefits	\$82,216	\$83,652	\$75,963	\$84,395	\$75,965
Personnel Costs (Subtotal)	\$467,321	\$503,080	\$438,741	\$506,483	\$426,505
Consultant Services	\$6,000	\$6,000	\$6,000	\$6,000	\$6,000
Materials & Supplies	\$36,003	\$9,982	\$16,341	\$14,592	\$2,890
Travel		\$8,500	\$8,500	\$8,500	\$8,500
Other	\$111,400	\$225,700	\$40,300	\$215,700	\$1,600
Subawards/Consortium/ Contractual Costs	\$5,966	\$5,966	\$5,966	\$2,983	\$5,966
Publication Costs			\$5,000	\$3,000	\$3,000
ADP/Computer Services	\$1,000				\$902
Tuition Remission		\$7,458	\$7,756	\$16,133	\$16,778
TOTAL FEDERAL DC	\$627,690	\$766,686	\$528,604	\$773,391	\$472,141
TOTAL FEDERAL F&A	\$351,506	\$425,168	\$291,675	\$424,064	\$255,003
TOTAL COST	\$979,196	\$1,191,854	\$820,279	\$1,197,455	\$727,144

Facilities and Administrative Costs	Year 1	Year 2	Year 3	Year 4	Year 5
F&A Cost Rate 1	56%	56%	56%	56%	56%
F&A Cost Base 1	\$627,690	\$759,228	\$520,848	\$757,258	\$455,363
F&A Costs 1	\$351,506	\$425,168	\$291,675	\$424,064	\$255,003

DATA MANAGEMENT AND SHARING PLAN

If any of the proposed research in the application involves the generation of scientific data, this application is subject to the NIH Policy for Data Management and Sharing and requires submission of a Data Management and Sharing Plan. If the proposed research in the application will generate large-scale genomic data, the Genomic Data Sharing Policy also applies and should be addressed in this Plan. Refer to the detailed instructions in the application guide for developing this plan as well as to additional guidance on [sharing.nih.gov](https://www.nih.gov/sharing). The Plan is recommended not to exceed two pages. Text in *italics* should be deleted. There is no "form page" for the Data Management and Sharing Plan. The DMS Plan may be provided in the *format* shown below.

Public reporting burden for this collection of information is estimated to average 2 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 (0925-0001 and 0925-0002). Do not return the completed form to this address.

Element 1: Data Type

A. Types and amount of scientific data expected to be generated in the project:

The proposed study will provide the following seven scientific datasets.

1. Nationally representative cross-sectional data on a target sample of 5,000 middle-age and older adults (ages 40 years old or older) at the baseline on topics related to cognitive health and social networks.
2. The baseline recruitment tracking data. With the use of respondent driven sampling where participants recruit their own peers through recruitment coupons, who recruited who can be ascertained.
3. Nationally representative cross-sectional data on a target sample of 5,000 middle-age and older adults (ages 40 years old or older) at Wave 2 on topics related to cognitive health and social networks.
4. Wave 2 recruitment tracking data.
5. Longitudinal data on a target sample of 2,500 adults ages 40 years old or older by following back the baseline participants at Wave 2 and assuming a 50% follow-back rate on topics related to cognitive health and social networks.
6. Interviewer-administered virtual interview data on 300 middle-age and older adults subsampled from the baseline respondents focusing on verifying and validating self-reported cognitive health in the baseline survey.
7. Experimental survey data on emerging topics related to cognitive health with 2500 subsampled from the baseline respondents.

It should be noted approximately 70% of the sample across all datasets will be seven granular minority groups our study targets: Afro-Latinx, nonAfro-Latinx, Chinese, Asian Indian, Filipino, Korean and Vietnamese.

The raw data will be recoded to characterize missing values, for top coding or collapsing variable categories, or other activities as needed.

B. Scientific data that will be preserved and shared, and the rationale for doing so:

The raw interview data and recruitment tracking data will be stored within a secure computing environment. All direct respondent identifiers (e.g., names, addresses) will be removed and maintained separately in a secure file for future contact purposes.

All other scientific data listed in Element 1.A will be both preserved and shared. Respondent identifiers will not be shared.

C. Metadata, other relevant data, and associated documentation:

Documentation to be made publicly available to the research community will include a text version of the questionnaires with programming specifications (e.g., skip patterns), detailed user guides, codebooks with descriptive statistics for each variable, and study-level metadata following the Data Documentation Initiative (DDI) specification. Each variable in the codebooks will include a brief description of the item along with the question number from the questionnaires, variable name, variable label, value labels, and standard codes for missing values—including codes for non-applicable, “don’t know,” and refusal. These documents will be provided in portable document format (PDF).

Element 2: Related Tools, Software and/or Code:

Scientific data will be processed and analyzed in R and shared in many widely accessible formats, including ASCII, CSV, tab-delimited text (including Excel), SAS, SPSS and Stata.

This project will develop a web-based sample management system (SMS) that operates on a virtual server running MS-IIS as described in Research Strategy. This technical system is a key for automatizing the study operations, while maintaining PII separately. The system shell, its code and documentation (in portable document format) will be disseminated to the public.

Element 3: Standards:

To facilitate data use, the study will use standard DDI-based processing and documentation protocols adopted by the Inter-university Consortium for Political and Social Research (ICPSR) for data formats and dictionaries as well as for variable names, descriptions, and labels.

Variable descriptions include a brief explanation of the questionnaire item content or of the constructed measure. Value labels tie individual numeric response codes to descriptive responses from the questionnaire.

Survey interview questions will be primarily based on the Health and Retirement Study and other established studies. Demographic, economic, and relationship questions will be based on Office of Management and Budget (OMB) standards or the International Standard Classification of Education (ISCED) standards.

In addition to DDI, our approach for data management and sharing plan follows the FAIR guiding principles which, we expect, will improve Findability, Accessibility, Interoperability, and Reusability of the proposed study protocols as well as data. The first step to our resource sharing plan is to create a persistent unique study identifier that will be attached to all documentation, publication, and data resulting from this data. This identifier system will allow our products to be easily identifiable.

Element 4: Data Preservation, Access, and Associated Timelines**A. Repository where scientific data and metadata will be archived:**

Public use and restricted access study data and associated documentation will be made available to the research community free of charge through the National Archive of Computerized Data on Aging (NACDA) data repository hosted at ICPSR.

B. How scientific data will be findable and identifiable:

Datasets in ICPSR-NACDA will be findable and identifiable through a study digital object identifier (DOI) minted by ICPSR.

C. When and how long the scientific data will be made available:

We plan to deposit the study data approximately 8-12 months following the end of each fieldwork, respectively, and within the award period. Study data deposited in ICPSR-NACDA will be available to the research community in perpetuity.

Datasets underlying methodological publications will be shared at or prior to initial publication date.

Element 5: Access, Distribution, or Reuse Considerations**A. Factors affecting subsequent access, distribution, or reuse of scientific data:**

No additional limitations other than the controls and privacy protections described below.

B. Whether access to scientific data will be controlled:

Public Use Data: All deidentified study data that are not designated as restricted use will be made available as public use data to the research community through ICPSR-NACDA. Users of the public use data must register with ICPSR and agree to the Terms of Use, which are designed to protect study participants by limiting data use to scientific research and aggregate statistical reporting, prohibiting attempts to identify study participants, and requiring immediate reporting of any disclosure of study participant identity. Data users also agree not to share or redistribute any data downloads.

Restricted Access Data: Data that are determined to be potentially identifying through indirect or deductive disclosure are provided under restricted data contract to users who demonstrate a valid research need and meet conditions of use. These restricted data will include separate files with recruitment tracking information (i.e., who recruited who) and geospatial indicators below the level of state, such as ZIP code. Access to restricted study data is available through ICPSR-NACDA includes an approved user agreement, a virtual data enclave system, or online access with applying disclosure protection. We will work with ICPSR-NACDA for the most suitable option.

C. Protections for privacy, rights, and confidentiality of human research participants:

Once the data collection concludes, all direct respondent identifiers (e.g., names, addresses) will be removed and maintained in a separate control file for future contact purposes. Participants' identifying information is only accessed by approved staff as part of the project duties within a secure computing environment. Deidentification will be completed by the end of data processing, prior to the finalization of the public use and restricted data files.

Our informed consent form will ask study participants to consent to data collection and sharing with the wider research community. The privacy, rights, and confidentiality of human subject participants in this study will be protected through the suppression of all direct respondent identifiers, the careful classification of any potentially identifying data as restricted access, the high security standards through which the ICPSR-NACDA provides access to restricted data for approved researchers, and the project's Certificate of Confidentiality.

Element 6: Oversight of Data Management and Sharing:

The Principal Investigator of the proposed study will be responsible for monitoring of and compliance with this Data Management and Sharing Plan. The plan will be implemented and managed by professional staff (postdoc) working under the direction of the PI.

RESOURCE SHARING PLAN

There are two distinctive deliverables from the proposed study: 1) datasets from a national survey of older adults (ages ≥ 40 years old) along with study materials (e.g., questionnaires in multiple languages) and 2) software for the mixed-mode hybrid sampling (HybS) sample management system (SMS).

These deliverables will be prepared as follows:

- 1) The datasets along with data collection instruments (e.g., questionnaires) will be deposited at the Interuniversity Consortium for Political and Social Research (ICPSR). Our budget includes ICPSR curation service fees for datasets, including recruitment information, which requires data confidentiality reviews. With the ICPSR curation service, our data sets will be available to the public; and
- 2) The HybS SMS will be developed as a Web-based system along with a manual and source code.

To streamline the dissemination of these deliverables, we will develop a website designated to our study and make these deliverables, or an access to them, available. We will also include a test-version of the HybS SMS on the website.

For a broader dissemination of the deliverables, we will work with professional organizations (e.g., the Gerontological Society of America, the American Public Health Association, the American Statistical Association, the American Association for Public Opinion Research) to participate in their webinars and other educational venues.

Drs. Lee, Hu, Ajrouch, Freidman, Elliott, Couper, Langa, Kim and Paulson's appointments at the University of Michigan's ISR and Michigan Medicine are particularly advantageous for this. In particular, Dr. Lee is an MPI of the NIA-funded Network for Innovative Methods in Longitudinal Aging Studies (NIMLAS) recently launched to promote methodological advance in aging studies. Dr. Langa is Associate Director of the Health and Retirement Study (HRS) and Director of the Center to Accelerate Population Research in Alzheimer's (CAPRA); Drs. Lee and Couper are participating investigators of HRS; Dr. Friedman is Associate Director of the Panel Study of Income Dynamics (PSID), a PI of the Longitudinal Studies of Aging Network (LSOA) and a Co-I of NIMLAS; Dr. Hu is one of the investigators of the National Health and Aging Trends Study (NHATS); Drs. Lee, Friedman, Ajrouch, Hu, and Langa are with the Michigan Center on the Demography of Aging (MiCDA); Dr. Ajrouch is Director of the Michigan Center for Contextual Factors in Alzheimer's Disease (MCCFAD); and Dr. Paulson is Director of the Michigan Alzheimer's Disease Research Center (ADRC).

A synergy may be expected across the proposed study, NIMLAS, HRS, NHATS, PSID, LOSA, CAPRA, MiCDA, MCCFAD and Michigan ADRC for the dissemination of the datasets and findings from the proposed study. Drs. Lee, Couper, Elliott and Kim teach through the ISR-Summer Institute, which already offers an education program on broader sampling and survey design issues. If HybS is proven to be effective, we plan to offer a course on this topic. Additionally, we will work closely with the ADRC and health disparity research communities to disseminate our approaches. As Drs. Ajrouch, Langa, Paulson, Vásquez and Lee are deeply involved in such research communities, our research team is well positioned to deliver our findings to the pertinent audience.

DHHS Grant or Award No.

date of termination

(Use continuation sheet if necessary)

Title		Name and Mailing Address of Institution
Typed Name		
Signature	Date	

Exhibit F to Shurtleff Declaration



March 12, 2025

Amy Lagowski
Research Foundation for the State University of New York
Amy.Lagowski@buffalo.edu

Dear Amy Lagowski:

Funding for Project Number 1P50MD019473-01 is hereby terminated pursuant to the 2024 National Institutes of Health (“NIH”) Grants Policy Statement,¹ and 2 C.F.R. § 200.340(a)(2). This letter constitutes a notice of termination.²

The 2024 Policy Statement applies to your project because NIH approved your grant on July 19, 2024, and “obligations generally should be determined by reference to the law in effect when the grants were made.”³

The 2024 Policy Statement “includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards.”⁴ According to the Policy Statement, “NIH may ... terminate the grant in whole or in part as outlined in 2 CFR Part 200.340.”⁵ At the time your grant was issued, 2 C.F.R. § 200.340(a)(2) permitted termination “[b]y the Federal awarding agency or pass-through entity, to the greatest extent authorized by law, if an award no longer effectuates the program goals or agency priorities.”

This award no longer effectuates agency priorities. Research programs based primarily on artificial and non-scientific categories, including amorphous equity objectives, are antithetical to the scientific inquiry, do nothing to expand our knowledge of living systems, provide low returns on investment, and ultimately do not enhance health, lengthen life, or reduce illness. Worse, so-called diversity, equity, and inclusion (“DEI”) studies are often used to support unlawful discrimination on the basis of race and other protected characteristics, which harms the health of Americans. Therefore, it is the policy of NIH not to prioritize such research programs.

Although “NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination

¹ <https://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>.

² 2 C.F.R. § 200.341(a); 45 C.F.R. § 75.373

³ *Bennett v. New Jersey*, 470 U.S. 632, 638 (1985).

⁴ 2024 Policy Statement at IIA-1.

⁵ *Id.* at IIA-155.

decision,”⁶ no corrective action is possible here. The premise of this award is incompatible with agency priorities, and no modification of the project could align the project with agency priorities.

Costs resulting from financial obligations incurred after termination are not allowable.⁷ Nothing in this notice excuses either NIH or you from complying with the closeout obligations imposed by 2 C.F.R. §§ 75.381-75.390. NIH will provide any information required by the Federal Funding Accountability and Transparency Act or the Office of Management and Budget’s regulations to *USAspending.gov*.⁸

Administrative Appeal

You may object and provide information and documentation challenging this termination.⁹ NIH has established a first-level grant appeal procedure that must be exhausted before you may file an appeal with the Departmental Appeals Board.¹⁰

You must submit a request for such review to Dr. Matt Memoli no later than 30 days after the written notification of the determination is received, except that if you show good cause why an extension of time should be granted, Dr. Memoli may grant an extension of time.¹¹

The request for review must include a copy of the adverse determination, must identify the issue(s) in dispute, and must contain a full statement of your position with respect to such issue(s) and the pertinent facts and reasons in support of your position. In addition to the required written statement, you shall provide copies of any documents supporting your claim.¹²

Sincerely,

Michelle G. Bulls, on behalf Priscilla Grant, Chief Grants Management Officer, NIMHD
Director, Office of Policy for Extramural Research Administration
Office of Extramural Research

⁶ 2024 Policy Statement at IIA-156.

⁷ See 2 C.F.R. § 200.343 (2024).

⁸ 2 C.F.R. § 200.341(c); 45 C.F.R. § 75.373(c)

⁹ See 45 C.F.R. § 75.374.

¹⁰ See 42 C.F.R. Part 50, Subpart D

¹¹ 11 *Id.* § 50.406(a)

¹² 12 *Id.* § 50.406(b)

Exhibit G to Shurtleff Declaration

Wshen7@buffalo.edu

From: Bulls, Michelle G. (NIH/OD) [E] <michelle.bulls@nih.gov>

Sent: Friday, March 21, 2025 12:31 PM

To: Wei Shen <wshen7@buffalo.edu>

Subject: Grant Termination Notification



3/21/2025

Wei Shen

State University Of New York At Buffalo

wshen7@buffalo.edu

Dear Wei Shen:

Effective with the date of this letter, funding for Project Number 5K01MH130270-03 is hereby terminated pursuant to the Fiscal Year 2024 National Institutes of Health ("NIH") Grants Policy Statement,^[1] and 2 C.F.R. § 200.340(a)(2). This letter constitutes a notice of termination.^[2]

The 2024 Policy Statement applies to your project because NIH approved your grant on 8/1/2024, and "obligations generally should be determined by reference to the law in effect when the grants were made."^[3]

The 2024 Policy Statement "includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards."^[4] According to the Policy Statement, "NIH may ... terminate the grant in whole or in part as outlined in 2 CFR Part 200.340."^[5] At the time your grant was issued, 2 C.F.R. § 200.340(a)(2) permitted termination "[b]y the Federal awarding agency or pass-through entity, to the greatest extent authorized by law, if an award no longer effectuates the program goals or agency priorities."

This award no longer effectuates agency priorities. Research programs based primarily on artificial and non-scientific categories, including amorphous equity objectives, are antithetical to the scientific inquiry, do nothing to expand our knowledge of living systems, provide low returns on investment, and ultimately do not enhance health, lengthen life, or reduce illness. Worse, so-called diversity, equity, and inclusion ("DEI") studies are often used to support unlawful discrimination on the basis of race and other protected characteristics, which harms the health of Americans. Therefore, it is the policy of NIH not to prioritize such research programs.

Although "NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination decision,"^[6] no corrective action is possible here. The premise of this award is incompatible with agency priorities, and no modification of the project could align the project with agency priorities.

Costs resulting from financial obligations incurred after termination are not allowable.^[7] Nothing in this notice excuses either NIH or you from complying with the closeout obligations imposed by 2 C.F.R. §§ 75.381-75.390. NIH will provide any information required by the Federal Funding Accountability and Transparency Act or the Office of Management and Budget's regulations to *USAspending.gov*.^[8]

Administrative Appeal

You may object and provide information and documentation challenging this termination.^[9] NIH has established a first-level grant appeal procedure that must be exhausted before you may file an appeal with the Departmental Appeals Board.^[10]

You must submit a request for such review to Dr. Matt Memoli no later than 30 days after the written notification of the determination is received, except that if you show good cause why an extension of time should be granted, Dr.

Memoli may grant an extension of time.^[11]

The request for review must include a copy of the adverse determination, must identify the issue(s) in dispute, and must contain a full statement of your position with respect to such issue(s) and the pertinent facts and reasons in support of your position. In addition to the required written statement, you shall provide copies of any documents

^[12]

supporting your claim.

Sincerely,



Michelle G. Bulls, on behalf of Theresa Jarosik, Chief Grants Management Officer, NIMH
Director, Office of Policy for Extramural Research Administration
Office of Extramural Research

^[1] <https://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>.

^[2] 2 C.F.R. § 200.341(a); 45 C.F.R. § 75.373

^[3] *Bennett v. New Jersey*, 470 U.S. 632, 638 (1985).

^[4] NIH Grants Policy Statement at IIA-1.

^[5] *Id.* at IIA-155.

^[6] NIH Grants Policy Statement at IIA-156.

^[7] See 2 C.F.R. § 200.343 (2024).

^[8] 2 C.F.R. § 200.341(c); 45 C.F.R. § 75.373(c)

^[9] See 45 C.F.R. § 75.374.

^[10] See 42 C.F.R. Part 50, Subpart D

^[11] 11 *Id.* § 50.406(a)

^[12] 12 *Id.* § 50.406(b)

Exhibit H to Shurtleff Declaration



3/21/2025

Mical, Alison
State University Of New York At Buffalo
alodojew@buffalo.edu

Dear Mical, Alison:

Effective with the date of this letter, funding for Project Number 5R01AA028810-04 is hereby terminated pursuant to the Fiscal Year 2024 National Institutes of Health (“NIH”) Grants Policy Statement,^[1] and 2 C.F.R. § 200.340(a)(2). This letter constitutes a notice of termination.^[2]

The 2024 Policy Statement applies to your project because NIH approved your grant on 7/1/2024, and “obligations generally should be determined by reference to the law in effect when the grants were made.”^[3]

The 2024 Policy Statement “includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards.^[4]” According to the Policy Statement, “NIH may ... terminate the grant in whole or in part as outlined in 2 CFR Part 200.340.^[5]” At the time your grant was issued, 2 C.F.R. § 200.340(a)(2) permitted termination “[b]y the Federal awarding agency or pass-through entity, to the greatest extent authorized by law, if an award no longer effectuates the program goals or agency priorities.”

This award no longer effectuates agency priorities. Research programs based on gender identity are often unscientific, have little identifiable return on investment, and do nothing to enhance the health of many Americans. Many such studies ignore, rather than seriously examine, biological realities. It is the policy of NIH not to prioritize these research programs.

Although “NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination decision,”^[6] no corrective action is possible here. The premise of this award is incompatible with agency priorities, and no modification of the project could align the project with agency priorities.

Costs resulting from financial obligations incurred after termination are not allowable.^[7] Nothing in this notice excuses either NIH or you from complying with the closeout obligations imposed by 2 C.F.R. §§ 75.381-75.390. NIH will provide any information required by the Federal Funding Accountability and Transparency Act or the Office of Management and Budget’s regulations to *USAspending.gov*.^[8]

Administrative Appeal

You may object and provide information and documentation challenging this termination.^[9] NIH has established a first-level grant appeal procedure that must be exhausted before you may file an appeal with the Departmental Appeals Board.^[10]

You must submit a request for such review to Dr. Matt Memoli no later than 30 days after the written notification of the determination is received, except that if you show good cause why an extension of time should be granted, Dr. Memoli may grant an extension of time.^[11]

The request for review must include a copy of the adverse determination, must identify the issue(s) in dispute, and must contain a full statement of your position with respect to such issue(s) and the pertinent facts and reasons in support of your position. In addition to the required written statement, you shall provide copies of any documents supporting your claim.^[12]

Sincerely,



Michelle G. Bulls, on behalf of Judy Fox, Chief Grants Management Officer, NIAAA
Director, Office of Policy for Extramural Research Administration
Office of Extramural Research

^[1] <https://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>.

^[2] 2 C.F.R. § 200.341(a); 45 C.F.R. § 75.373

^[3] *Bennett v. New Jersey*, 470 U.S. 632, 638 (1985).

^[4] NIH Grants Policy Statement at IIA-1.

^[5] *Id.* at IIA-155.

^[6] NIH Grants Policy Statement at IIA-156.

^[7] See 2 C.F.R. § 200.343 (2024).

^[8] 2 C.F.R. § 200.341(c); 45 C.F.R. § 75.373(c)

^[9] See 45 C.F.R. § 75.374.

^[10] See 42 C.F.R. Part 50, Subpart D

^[11] 11 *Id.* § 50.406(a)

^[12] 12 *Id.* § 50.406(b)

Exhibit I to Shurtleff Declaration

Deputy Operations Manager
Sponsored Programs Administration
University at Albany, MSC 100A
1400 Washington Ave, Albany, NY 12222
Ph: (518) 442-3196
Web: <http://www.albany.edu/spa>



From: Romand, Doris A <dromand@albany.edu>
Sent: Friday, March 21, 2025 3:25 PM
To: Kaloyeros, Paula M <pkaloyeros@albany.edu>
Cc: Marshall, Nicole <nmarshall@albany.edu>; Gauriloff, Jerold E <jgauriloff@albany.edu>; Remkus, Todd A <tremkus@albany.edu>
Subject: FW: STOP ALL WORK - Permanent - Fwd: Grant Termination Notification [AWD026538]

This is the University of Michigan subaward for Elizabeth Vasquez.

Best Regards,
Doris

From: Vasquez, Elizabeth <evasquez2@albany.edu>
Sent: Friday, March 21, 2025 3:13 PM
To: Romand, Doris A <dromand@albany.edu>
Subject: FW: STOP ALL WORK - Permanent - Fwd: Grant Termination Notification [AWD026538]

Hola Doris! Not sure if you are the one to get this..

From: Sunghee Lee <sungheel@umich.edu>
Sent: Friday, March 21, 2025 2:57 PM
To: SMART Managers <smart-managers@umich.edu>; SMART Investigators <smart-investigators@umich.edu>; SMART RAs <smart-ras@umich.edu>
Cc: April Miller <millean@umich.edu>; Nancy Oeffner <oeffner@umich.edu>; Kara Cristian <kcricri@umich.edu>
Subject: Fwd: STOP ALL WORK - Permanent - Fwd: Grant Termination Notification [AWD026538]

Hi Team,

This is really hard to relay. We have received a Stop Work order on the SMART as you see in the email below.

We will be exploring all options regarding this order. Please stay tuned for updates. For now, we will need to stop all SMART related activities. This includes cancelling all interviews that have been scheduled.

Sunghee

----- Forwarded message -----

From: **Reynaldo Martell** <martellr@umich.edu>

Date: Fri, Mar 21, 2025 at 2:29 PM

Subject: STOP ALL WORK - Permanent - Fwd: Grant Termination Notification [AWD026538]

To: Sunghee Lee <sungheel@umich.edu>, Kara Cristian <kcricri@umich.edu>, April Miller <millean@umich.edu>

Good afternoon,

Please see the email below regarding AWD026538. This notice terminates this project as of 03/21/2025.

Rey

----- Forwarded message -----

From: **Bulls, Michelle G. (NIH/OD) [E]** <michelle.bulls@nih.gov>

Date: Fri, Mar 21, 2025 at 12:29 PM

Subject: Grant Termination Notification

To: martellr@umich.edu <martellr@umich.edu>



3/21/2025

Reynaldo Martell

University Of Michigan At Ann Arbor

martellr@umich.edu

Dear Reynaldo Martell:

Effective with the date of this letter, funding for Project Number 5R01AG082080-02 is hereby

terminated pursuant to the Fiscal Year 2025 National Institutes of Health (“NIH”) Grants Policy Statement,[\[1\]](#) and 2 C.F.R. § 200.340(a)(2). This letter constitutes a notice of termination.[\[2\]](#)

The 2025 Policy Statement applies to your project because NIH approved your grant on 1/1/2025, and “obligations generally should be determined by reference to the law in effect when the grants were made.”[\[3\]](#)

The 2025 Policy Statement “includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards.[\[4\]](#)” According to the Policy Statement, “NIH may ... terminate the grant in whole or in part as outlined in 2 CFR Part 200.340.[\[5\]](#)” At the time your grant was issued, 2 C.F.R. § 200.340(a)(2) permitted termination “[b]y the Federal awarding agency or pass-through entity, to the greatest extent authorized by law, if an award no longer effectuates the program goals or agency priorities.”

This award no longer effectuates agency priorities. Research programs based primarily on artificial and non-scientific categories, including amorphous equity objectives, are antithetical to the scientific inquiry, do nothing to expand our knowledge of living systems, provide low returns on investment, and ultimately do not enhance health, lengthen life, or reduce illness. Worse, so-called diversity, equity, and inclusion (“DEI”) studies are often used to support unlawful discrimination on the basis of race and other protected characteristics, which harms the health of Americans. Therefore, it is the policy of NIH not to prioritize such research programs.

Although “NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination decision,”[\[6\]](#) no corrective action is possible here. The premise of this award is incompatible with agency priorities, and no modification of the project could align the project with agency priorities.

Costs resulting from financial obligations incurred after termination are not allowable.[\[7\]](#)

Nothing in this notice excuses either NIH or you from complying with the closeout obligations imposed by 2 C.F.R. §§ 75.381-75.390. NIH will provide any information required by the Federal Funding Accountability and Transparency Act or the Office of Management and Budget’s regulations to *USAspending.gov*.[\[8\]](#)

Administrative Appeal

You may object and provide information and documentation challenging this termination.[\[9\]](#) NIH has established a first-level grant appeal procedure that must be exhausted before you may file an appeal with the Departmental Appeals Board.[\[10\]](#)

You must submit a request for such review to Dr. Matt Memoli no later than 30 days after the written notification of the determination is received, except that if you show good cause why an extension of time should be granted, Dr. Memoli may grant an extension of time.[\[11\]](#)

The request for review must include a copy of the adverse determination, must identify the issue(s) in dispute, and must contain a full statement of your position with respect to such issue(s) and the pertinent facts and reasons in support of your position. In addition to the required written statement, you shall provide copies of any documents supporting your claim.[\[12\]](#)

Sincerely,



Michelle G. Bulls, on behalf of Jeni Militano (Acting), Chief Grants Management Officer,
NIA
Director, Office of Policy for Extramural Research Administration
Office of Extramural Research

[1] <https://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>.

[2] 2 C.F.R. § 200.341(a); 45 C.F.R. § 75.373

[3] *Bennett v. New Jersey*, 470 U.S. 632, 638 (1985).

[4] NIH Grants Policy Statement at IIA-1.

[5] *Id.* at IIA-155.

[6] NIH Grants Policy Statement at IIA-156.

[7] *See* 2 C.F.R. § 200.343 (2024).

[8] 2 C.F.R. § 200.341(c); 45 C.F.R. § 75.373(c)

[9] *See* 45 C.F.R. § 75.374.

[10] *See* 42 C.F.R. Part 50, Subpart D

[11] 11 *Id.* § 50.406(a)

[12] 12 *Id.* § 50.406(b)

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Reynaldo Martell
Senior Award Management Officer
734-647-9099 | martellr@umich.edu
University of Michigan | Office of Research and Sponsored Projects (ORSP)
3003 S. State Street | 1036 Wolverine Tower | Ann Arbor, MI 48109-1274

For U-M Personnel: Help us deliver quality service by providing a PAF, UFA, or P/G number along with the PI's name whenever you contact ORSP. Up-to-date project status information is available in [eRPM](#).

Exhibit J to Shurtleff Declaration

FDP Subaward Amendment

Awarding Agency Amendment No
 PTE/Prime Award No. Subaward No

Pass-Through Entity (PTE) Subrecipient
 Entity Name
 Contact Email
 Principal Investigator
 Project Title

Cumulative Budget Period(s) (Agreement Start Date) (End Date of Latest Budget Period)		Amount Funded This Action	Total Amount of Funds Obligated to Date
Start Date: 04/01/2024	End Date: 03/21/2025	\$ 0.00	\$ 28,535.00

Subrecipient Cost Share ☐ Subject to FFATA ☒ Subrecipient UEI (Unique Entity Identifier - May leave blank if unchanged from prior Agreement)

Amendment(s) to Original Terms and Conditions

This Amendment revises the above-referenced Subaward Agreement as follows:

In accordance with the attached 'Grant Termination Notification' received by New York University (NYU) from the National Institutes of Health (NIH) dated March 21, 2025, this Agreement is hereby terminated effective March 21, 2025.

Effective immediately upon receipt of this termination notice from NYU the Subrecipient must stop all work on the Project and must not incur any new costs after March 21, 2025, Subrecipient must cancel as many outstanding obligations as possible.

Subrecipient must send an invoice and financial report, detailing all expenses and costs incurred since Subrecipient's most recent previous invoice through and including March 21, 2025, to NYU as soon as possible but no later than within 30 days of the effective date of this termination

Carryover is

For clarity: all amounts stated in this amendment are in United States Dollars.

All other terms and conditions of this Subaward Agreement remain in full force and effect.

By an Authorized Official of PTE:	Date	By an Authorized Official of Subrecipient:	Date
Name		Name	
Title		Title	



Jiaan Sa <saj01@nyu.edu>

A25-0556 - CookS - Fwd: Grant Termination Notification

1 message

osp.agency@nyu.edu <nyu194@nyu.edu>

Fri, Mar 21, 2025 at 1:21 PM

Reply-To: osp.agency@nyu.edu

To: Jason St Germain <stgerj01@nyu.edu>

Cc: Sponsored Programs Administration <cdv.spa@nyu.edu>, Jasmine Rodriguez <jyr1@nyu.edu>, Jiaan Sa <saj01@nyu.edu>

--

Angela Mai
Office of Sponsored Programs
New York University
665 Broadway, Suite 801
New York, NY 10012
212.998.2121(t)

Reply to: osp.agency@nyu.edu
Homepage: nyu.edu/osp
Team Assignments: [Grants & Contracts](#)



Please consider the environment before printing this email.

----- Forwarded message -----

From: **'Bulls, Michelle G. (NIH/OD) [E]' via OSP.Agency** <osp.agency-group@nyu.edu>

Date: Fri, Mar 21, 2025 at 1:19 PM

Subject: Grant Termination Notification

To: osp.agency@nyu.edu <osp.agency@nyu.edu>



3/21/2025

St Germain, Jason

New York University

osp.agency@nyu.edu

Dear St Germain, Jason:

Effective with the date of this letter, funding for Project Number 1R01HL169503-01A1 is hereby terminated pursuant to the Fiscal Year 2024 National Institutes of Health ("NIH") Grants Policy Statement,[\[1\]](#) and 2

C.F.R. § 200.340(a)(2). This letter constitutes a notice of termination.[2]

The 2024 Policy Statement applies to your project because NIH approved your grant on 4/1/2024, and “obligations generally should be determined by reference to the law in effect when the grants were made.”[3]

The 2024 Policy Statement “includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards.[4]” According to the Policy Statement, “NIH may ... terminate the grant in whole or in part as outlined in 2 CFR Part 200.340. [5]” At the time your grant was issued, 2 C.F.R. § 200.340(a)(2) permitted termination “[b]y the Federal awarding agency or pass-through entity, to the greatest extent authorized by law, if an award no longer effectuates the program goals or agency priorities.”

This award no longer effectuates agency priorities. Research programs based on gender identity are often unscientific, have little identifiable return on investment, and do nothing to enhance the health of many Americans. Many such studies ignore, rather than seriously examine, biological realities. It is the policy of NIH not to prioritize these research programs.

Although “NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination decision,”[6] no corrective action is possible here. The premise of this award is incompatible with agency priorities, and no modification of the project could align the project with agency priorities.

Costs resulting from financial obligations incurred after termination are not allowable.[7] Nothing in this notice excuses either NIH or you from complying with the closeout obligations imposed by 2 C.F.R. §§ 75.381-75.390. NIH will provide any information required by the Federal Funding Accountability and Transparency Act or the Office of Management and Budget’s regulations to *USAspending.gov*. [8]

Administrative Appeal

You may object and provide information and documentation challenging this termination.[9] NIH has established a first-level grant appeal procedure that must be exhausted before you may file an appeal with the Departmental Appeals Board.[10]

You must submit a request for such review to Dr. Matt Memoli no later than 30 days after the written notification of the determination is received, except that if you show good cause why an extension of time should be granted, Dr. Memoli may grant an extension of time.[11]

The request for review must include a copy of the adverse determination, must identify the issue(s) in dispute, and must contain a full statement of your position with respect to such issue(s) and the pertinent facts and reasons in support of your position. In addition to the required written statement, you shall provide copies of any documents supporting your claim.[12]

Sincerely,

Michelle G. Bulls -S Digitally signed
by Michelle G.
Bulls -S

Michelle G. Bulls, on behalf of Anthony Agresti, Chief Grants Management Officer, NHLBI
Director, Office of Policy for Extramural Research Administration
Office of Extramural Research

[1] <https://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>.

[2] 2 C.F.R. § 200.341(a); 45 C.F.R. § 75.373

[3] *Bennett v. New Jersey*, 470 U.S. 632, 638 (1985).

[4] NIH Grants Policy Statement at IIA-1.

[5] *Id.* at IIA-155.

[6] NIH Grants Policy Statement at IIA-156.

[7] See 2 C.F.R. § 200.343 (2024).

[8] 2 C.F.R. § 200.341(c); 45 C.F.R. § 75.373(c)

[9] See 45 C.F.R. § 75.374.

[10] See 42 C.F.R. Part 50, Subpart D

[11] 11 *Id.* § 50.406(a)

[12] 12 *Id.* § 50.406(b)

**Recipient Information****1. Recipient Name**

NEW YORK UNIVERSITY
70 WASHINGTON SQ S
NEW YORK, NY 10012

2. Congressional District of Recipient

10

3. Payment System Identifier (ID)

1135562308A1

4. Employer Identification Number (EIN)

135562308

5. Data Universal Numbering System (DUNS)

041968306

6. Recipient's Unique Entity Identifier

NX9PXMKW5KW8

7. Project Director or Principal Investigator

Stephanie Hazel Cook, DRPH
Assistant Professor
sc5810@nyu.edu
212-998-5525

9. Authorized Official

Jason St Germain
osp.agency@nyu.edu
212-998-2121

Federal Agency Information**0. Awarding Agency Contact Information**

James Hennigan
Grants Management Specialist
NATIONAL HEART, LUNG, AND BLOOD
INSTITUTE
james.hennigan@nih.gov
(301) 480-7071

10. Program Official Contact Information

ALISON GWENDOLYN MARY Brown

NATIONAL HEART, LUNG, AND BLOOD
INSTITUTE
alison.brown@nih.gov
301-435-0583

Federal Award Information**11. Award Number**

1R01HL169503-01A1

12. Unique Federal Award Identification Number (FAIN)

R01HL169503

13. Statutory Authority

42 USC 241 42 CFR 52

14. Federal Award Project Title

Geographically-Explicit Ecological Momentary Assessment Protocol to Assess the
Linkages Between Intersectional Discrimination and CVD Risk Among Sexual and
Gender Minorities

15. Assistance Listing Number

93.837

16. Assistance Listing Program Title

Cardiovascular Diseases Research

17. Award Action Type

New Competing (REVISED)

19. Is the Award R&D?

Yes

Summary Federal Award Financial Information**10. Budget Period Start Date 04/01/2024 – End Date 03/21/2025****20. Total Amount of Federal Funds Obligated by this Action**

\$0

20 a. Direct Cost Amount

\$0

20 b. Indirect Cost Amount

\$0

21. Authorized Carryover**22. Offset****23. Total Amount of Federal Funds Obligated this budget period**

\$636,567

24. Total Approved Cost Sharing or Matching, where applicable

\$0

25. Total Federal and Non-Federal Approved this Budget Period

\$636,567

26. Project Period Start Date 04/01/2024 – End Date 03/21/2025**27. Total Amount of the Federal Award including Approved Cost**

\$636,567

Sharing or Matching this Project Period

29. Authorized Treatment of Program Income

Additional Costs

20. Grants Management Official - Signature

Anthony Agresti

30. Remarks

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.



RESEARCH

Department of Health and Human Services
National Institutes of Health

Notice of Award



NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

SECTION I – AWARD DATA – 1R01HL160503-01A1 RE: ISED
Principal Investigator(s)

Stephanie Hazel Cook, DRPH

Award e-mailed to Yosp.agency@nyu.edu

Dear Authorized Official:

The National Institutes of Health hereby revises this award (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to NEW YORK UNIVERSITY in support of the above referenced project. This award is pursuant to the authority of 42 USC 241 42 CFR 52 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.

Each publication, press release, or other document about research supported by an NIH award must include an acknowledgment of NIH award support and a disclaimer such as "Research reported in this publication was supported by the National Heart, Lung, And Blood Institute of the National Institutes of Health under Award Number R01HL169503. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health." Prior to issuing a press release concerning the outcome of this research, please notify the NIH awarding IC in advance to allow for coordination.

Award recipients must promote objectivity in research by establishing standards that provide a reasonable expectation that the design, conduct and reporting of research funded under NIH awards will be free from bias resulting from an Investigator's Financial Conflict of Interest (FCOI), in accordance with the 2011 revised regulation at 42 CFR Part 50 Subpart F. The Institution shall submit all FCOI reports to the NIH through the eRA Commons FCOI Module. The regulation does not apply to Phase I Small Business Innovative Research (SBIR) and Small Business Technology Transfer (STTR) awards. Consult the NIH website <http://grants.nih.gov/grants/policy/coi/> for a link to the regulation and additional important information.

If you have any questions about this award, please direct questions to the Federal Agency contacts.

Sincerely yours,

Anthony Agresti
Grants Management Officer
NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

Additional information follows

Cumulative Award Calculations for this Budget Period (U.S. Dollars)
Salaries and Wages

\$229,874

Fringe Benefits	\$71,260
Personnel Costs (Subtotal)	\$301,134
Consultant Services	\$15,000
Materials & Supplies	\$8,000
Travel	\$5,000
z ther	\$21,330
Subawards\Consortium\Contractual Costs	\$57,070
Federal Direct Costs	\$407,534
Federal F&A Costs	\$229,033
Approved Budget	\$636,567
Total Amount of Federal Funds Authori8ed (Federal Share)	\$636,567
Tz TAL FEDERAL AWARD AMz UNT	\$636,567
AMz UNT z F THIS ACTiz N (FEDERAL SHARE)	\$0

SUMMAR/ Tz TALS Fz R ALL / EARS (for this Document Number)		
/ R	THIS AWARD	CUMULATI: E Tz TALS
1	\$636,567	\$636,567

Fiscal InformationY

Payment System IdentifierY 1135562308A1
Document NumberY RHL169503A
PMS Account TypeY P (Subaccount)
Fiscal / earY 2024

IC	CAN	2024
HL	8475146	\$636,567

NIH Administrative DataY

PCC: HHCBMN / **z C:** 41021 / **Released:** 03/24/2025

Award ProcessedY03/25/2025 12:11:34 AM

SECTiz N II – PA/ MENTVHz TLINE INFz RMATiz N – 1R01HL160503-01A1 RE: IS ED

For payment and HHS Office of Inspector General Hotline information, see the NIH Home Page at <http://grants.nih.gov/grants/policy/awardconditions.htm>

SECTiz N III – STANDARD TERMS AND Cz NDTiz NS – 1R01HL160503-01A1 RE: IS ED

This award is based on the application submitted to, and as approved by, NIH on the above-titled project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- The grant program legislation and program regulation cited in this Notice of Award.
- Conditions on activities and expenditure of funds in other statutory requirements, such as those included in appropriations acts.
- 45 CFR Part 75.
- National Policy Requirements and all other requirements described in the NIH Grants Policy Statement, including addenda in effect as of the beginning date of the budget period.
- Federal Award Performance Goals: As required by the periodic report in the RPPR or in the final progress report when applicable.
- This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

(See NIH Home Page at <http://grants.nih.gov/grants/policy/awardconditions.htm> for certain references cited above.)

Research and Development (R&D)Y All awards issued by the National Institutes of Health (NIH) meet the definition of "Research and Development" at 45 CFR Part§ 75.2. As such, auditees should identify NIH awards as part of the R&D cluster on the Schedule of Expenditures of Federal Awards (SEFA). The auditor should test NIH awards for compliance as instructed in Part V, Clusters of Programs. NIH recognizes that some awards may have another classification for purposes of indirect costs. The auditor is not required to

report the disconnect (i.e., the award is classified as R&D for Federal Audit Requirement purposes but non-research for indirect cost rate purposes), unless the auditee is charging indirect costs at a rate other than the rate(s) specified in the award document(s).

This institution is a signatory to the Federal Demonstration Partnership (FDP) Phase VII Agreement which requires active institutional participation in new or ongoing FDP demonstrations and pilots.

An unobligated balance may be carried over into the next budget period without Grants Management Officer prior approval.

This grant is subject to Streamlined Noncompeting Award Procedures (SNAP).

This award is subject to the requirements of 2 CFR Part 25 for institutions to obtain a unique entity identifier (UEI) and maintain an active registration in the System for Award Management (SAM). Should a consortium/subaward be issued under this award, a UEI requirement must be included. See <http://grants.nih.gov/grants/policy/awardconditions.htm> for the full NIH award term implementing this requirement and other additional information.

This award has been assigned the Federal Award Identification Number (FAIN) R01HL169503. Recipients must document the assigned FAIN on each consortium/subaward issued under this award.

Based on the project period start date of this project, this award is likely subject to the Transparency Act subaward and executive compensation reporting requirement of 2 CFR Part 170. There are conditions that may exclude this award; see <http://grants.nih.gov/grants/policy/awardconditions.htm> for additional award applicability information.

In accordance with P.L. 110-161, compliance with the NIH Public Access Policy is now mandatory. For more information, see NOT-OD-08-033 and the Public Access website: <http://publicaccess.nih.gov/>.

This award represents the final year of the competitive segment for this grant. See the NIH Grants Policy Statement Section 8.6 Closeout for complete closeout requirements at: <http://grants.nih.gov/grants/policy/policy.htm#gps>.

A final expenditure Federal Financial Report (FFR) (SF 425) must be submitted through the Payment Management System (PMS) within 120 days of the period of performance end date; see the NIH Grants Policy Statement Section 8.6.1 Financial Reports, <http://grants.nih.gov/grants/policy/policy.htm#gps>, for additional information on this submission requirement. The final FFR must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. There must be no discrepancies between the final FFR expenditure data and the real-time cash drawdown data in PMS. NIH will close the awards using the last recorded cash drawdown level in PMS for awards that do not require a final FFR on expenditures. It is important to note that for financial closeout, if a grantee fails to submit a required final expenditure FFR, NIH will close the grant using the last recorded cash drawdown level.

A Final Invention Statement and Certification form (HHS 568), (not applicable to training, construction, conference or cancer education grants) must be submitted within 120 days of the expiration date. The HHS 568 form may be downloaded at: <http://grants.nih.gov/grants/forms.htm>. This paragraph does not apply to Training grants, Fellowships, and certain other programs—i.e., activity codes C06, D42, D43, D71, DP7, G07, G08, G11, K12, K16, K30, P09, P40, P41, P51, R13, R25, R28, R30, R90, RL5, RL9, S10, S14, S15, U13, U14, U41, U42, U45, UC6, UC7, UR2, X01, X02.

Unless an application for competitive renewal is submitted, a Final Research Performance Progress Report (Final RPPR) must also be submitted within 120 days of the period of performance end date. If a competitive renewal application is submitted prior to that date, then an Interim RPPR must be submitted by that date as well. Instructions for preparing an Interim or Final RPPR are at: https://grants.nih.gov/grants/rppr/rppr_instruction_guide.pdf. Any other specific requirements set forth in the terms and conditions of the award must also be addressed in the Interim or Final RPPR. *Note that data reported within Section I of the Interim and Final RPPR forms will be made public and should be written for a lay person audience.*

NIH requires electronic submission of the final invention statement through the Closeout feature in the Commons.

NOTE: If this is the final year of a competitive segment due to the transfer of the grant to another institution, then a Final RPPR is not required. However, a final expenditure FFR is required and must be submitted electronically as noted above. If not already submitted, the Final Invention Statement is required and should be sent directly to the assigned Grants Management Specialist.

Recipients must administer the project in compliance with federal civil rights laws that prohibit discrimination on the basis of race, color, national origin, disability, age, and comply with applicable conscience protections. The recipient will comply with applicable laws that prohibit discrimination on the basis of sex, which includes discrimination on the basis of gender identity, sexual orientation, and pregnancy. Compliance with these laws requires taking reasonable steps to provide meaningful access to persons with limited English proficiency and providing programs that are accessible to and usable by persons with disabilities. The HHS Office for Civil Rights provides guidance on complying with civil rights laws enforced by HHS. See <https://www.hhs.gov/civil-rights/for-providers/provider-obligations/index.html> and <https://www.hhs.gov/>.

- Recipients of FFA must ensure that their programs are accessible to persons with limited English proficiency. For guidance on meeting the legal obligation to take reasonable steps to ensure meaningful access to programs or activities by limited English proficient individuals, see <https://www.hhs.gov/civil-rights/for-individuals/special-topics/limited-english-proficiency/fact-sheet-guidance/index.html> and <https://www.lep.gov>.
- For information on an institution's specific legal obligations for serving qualified individuals with disabilities, including providing program access, reasonable modifications, and to provide effective communication, see <http://www.hhs.gov/ocr/civilrights/understanding/disability/index.html>.
- HHS funded health and education programs must be administered in an environment free of sexual harassment; see <https://www.hhs.gov/civil-rights/for-individuals/sex-discrimination/index.html>. For information about NIH's commitment to supporting a safe and respectful work environment, who to contact with questions or concerns, and what NIH's expectations are for institutions and the individuals supported on NIH-funded awards, please see <https://grants.nih.gov/grants/policy/harassment.htm>.
- For guidance on administering programs in compliance with applicable federal religious nondiscrimination laws and applicable federal conscience protection and associated anti-discrimination laws, see <https://www.hhs.gov/conscience/conscience-protections/index.html> and <https://www.hhs.gov/conscience/religious-freedom/index.html>.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than \$10,000,000 must report and maintain information in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75. This term does not apply to NIH fellowships.

Treatment of Program Income^Y Additional Costs

SECTION I: – HL SPECIFIC AWARD CREDIT – 1R01HL160503-01A1 RE: ISED

Clinical Trial Indicator: No

This award does not support any NIH-defined Clinical Trials. See the NIH Grants Policy Statement Section 1.2 for NIH definition of Clinical Trial.

TERMINATION

It is the policy of NIH not to prioritize Research programs based on gender identity are often unscientific, have little identifiable return on investment, and do nothing to enhance the health of many Americans. Many such studies ignore, rather than seriously examine, biological realities. It is the policy of NIH not to prioritize these research programs.

Therefore, this project is terminated. NEW YORK UNIVERSITY may request funds to support patient safety and orderly closeout of the project. Funds used to support any other research activities will be disallowed

and recovered. Please be advised that your organization, as part of the orderly Closeout process will need to submit the necessary closeout documents (i.e., Final Research Performance Progress Report, Final Invention Statement, and the Final Federal Financial Report (FFR), as applicable) within 120 days of the end of this grant. NIH is taking this enforcement action in accordance with 2 C.F.R. § 200.340 as implemented in NIH GPS Section 8.5.2. This revised award represents the final decision of the NIH. It shall be the final decision of the Department of Health and Human Services (HHS) unless within 30 days after receiving this decision you mail or email a written notice of appeal to Dr. Matthew Memoli. Please include a copy of this decision, your appeal justification, total amount in dispute, and any material or documentation that will support your position. Finally, the appeal must be signed by the institutional official authorized to sign award applications and must be dated no later than 30 days after the date of this notice.

REVISION #2 - RESTORATION OF FUNDS

This revised award increases the Total Costs authorized consistent with the NIH fiscal policy for FY2024. The NHLBI Operating Guidelines can be found at:

<http://www.nhlbi.nih.gov/research/funding/general/current-operating-guidelines>

REVISION #1 - ADMINISTRATIVE UPDATE

This award has been revised to process an NHLBI administrative revision regarding human subjects coding on this award. No action is required from New York University.

All previous terms and conditions remain in effect

CONSORTIUM/CONTRACTUAL

This award includes funds awarded for consortium activity with Downstate College of Medicine (SUNY). The recipient, as the direct and primary recipient of NIH grant funds, is accountable to NIH for the performance project, the appropriate expenditures of grant funds by all parties, and all other obligations of the recipient, as specified in the NIH Grants Policy Statement. In general, the requirements that apply to the recipient, including the intellectual property requirements also apply to consortium participant(s).

KEY PERSONNEL

In addition to the PI, any absence, replacement, or substantial reduction in effort of the following individual(s) below, requires written prior approval of the National Institutes of Health awarding component.

Mari Armstrong-Hough

GRADUATE STUDENT COMPENSATION

In accordance with the Guide Notice: [NOT-OD-02-017](#), published on December 10, 2001, in the NIH Guide for Grants and Contracts, total direct costs (salary, fringe benefits and tuition remission) for graduate students are provided at the NIH maximum allowable amount (zero level of the Ruth L. Kirschstein National Research Service Award stipend in effect at the time of the competing award). Support recommended for future years has been adjusted accordingly, if applicable. The full guide notice describing the Fiscal Year 2023 level of compensation allowed for a graduate student can be found at: [NOT-OD-23-076](#).

OTHER SUPPORT REMINDER INFORMATION

This award is contingent upon the following: No individual who receives salary support from this project may receive compensation for more than 12 calendar months (i.e., 100%) total effort from all of their sources of support.

SALARY CAP

None of the funds in this award shall be used to pay the salary of an individual at a rate in excess of the current salary cap. This award and/or future years may have been adjusted accordingly. Current salary cap levels can be found at the following URL: http://grants.nih.gov/grants/policy/salcap_summary.htm.

PRIOR APPROVAL REQUEST

It is recommended that applicable prior approval requests be submitted via the eRA Commons Prior Approval Module (link: prior_approval.nih.gov). Please refer to Part II Chapter 8 of the NIH Grants Policy Statement for the activities and/or expenditures that require NIH approval at <http://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>

NON-COMPETING RENEWAL (SNAP)

The NIH requires the use of the Research Performance Progress Report (RPPR) for all Type 5 progress reports. The RPPR and other documents applicable to this SNAP grant are due the 15th of the month preceding the month in which the budget period ends (e.g., if the budget period ends 11/30, the due date is 10/15). Please see <http://grants.nih.gov/grants/rppr/index.htm> for additional information on the RPPR.

FOREIGN TRAVEL

Recipients must comply with the requirements of the Fly America Act (49 U.S.C. 40118) which generally provides that foreign air travel funded by Federal funds may only be conducted on U.S. flag air carriers and under applicable Open Skies Agreements.

Data Management and Sharing Policy: Applicable

This project is expected to generate scientific data. Therefore, the [Final NIH Policy for Data Management and Sharing](#) applies. The approved Data Management and Sharing (DMS) Plan is hereby incorporated as a term and condition of award, and the recipient shall manage and disseminate scientific data in accordance with the approved plan. Any significant changes to the DMS Plan (e.g., new scientific direction, a different data repository, or a timeline revision) require NIH prior approval. Failure to comply with the approved DMS plan may result in suspension and/or termination of this award, withholding of support, audit disallowances, and/or other appropriate action. See NIH Grants Policy Statement [Section 8.2.3](#) for more information on data management and sharing expectations.

SPREADSHEET SUMMARY/

AWARD NUMBERY1R01HL169503-01A1 REVISED

INSTITUTIONNYNEW YORK UNIVERSITY

Budget	Year 1
Salaries and Wages	\$229,874
Fringe Benefits	\$71,260
Personnel Costs (Subtotal)	\$301,134
Consultant Services	\$15,000
Materials & Supplies	\$8,000
Travel	\$5,000
Other	\$21,330
Subawards/Consortium/Contractual Costs	\$57,070
TOTAL FEDERAL DC	\$407,534
TOTAL FEDERAL F&A	\$229,033
TOTAL COST	\$636,567

Facilities and Administrative Costs	Year 1
F&A Cost Rate 1	61%
F&A Cost Base 1	\$375,464
F&A Costs 1	\$229,033

EXHIBIT 25

UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MASSACHUSETTS

COMMONWEALTH OF
MASSACHUSETTS; et al.,

Plaintiffs,

v.

ROBERT F. KENNEDY, JR., et al.,

Defendants.

No. 1:25-cv-_____

DECLARATION OF AMY HEQUEMBOURG

I, Amy Hequembourg, PhD, declare under the penalty of perjury pursuant to 28 U.S.C. § 1746 that the foregoing is true and correct:

1. I am an associate professor of the State University of New York University at Buffalo in the School of Nursing.
2. I am familiar with the information in the statements set forth below either through personal knowledge, in consultation with the University at Buffalo staff including my Co-Principal Investigator Jennifer Livingston, PhD, or from documents that have been provided to and reviewed by me.
3. I submit this Declaration in support of the States' Motion for Temporary Restraining Order.

Professional Background

4. I am an associate professor at the University at Buffalo School of Nursing, dedicated to investigating health disparities among sexual and gender minoritized (SGM) populations. My research has identified risks associated with sexual victimization among sexual

minority women, offering insights into their unique post-assault disclosure and coping experiences. I have also contributed to understanding the distinct health challenges faced by bisexual women. Collaborating with interdisciplinary teams, my work explores the link between alcohol use and violence within SGM communities. My current funded research examines mechanisms linking peer victimization and alcohol use among lesbian, gay, bisexual queer and individuals who identify as something other than exclusively heterosexual (LGBQ+) adolescents.

5. The University at Buffalo is a scholarly community dedicated to bringing the benefits of our research, scholarship, creative activities and educational excellence to local and global communities in ways that impact and positively change the world.

The University views the three traditional pillars of the public higher education mission—research, education and service—as interdependent endeavors that continually enrich and inform each other. Groundbreaking research, transformative educational experiences and deeply engaged service to our communities define the University at Buffalo’s mission as a premier, research-intensive public university.

6. University at Buffalo, a flagship of the State University of New York, has three campuses, over 32,000 students, almost 12,000 employees, and performs over \$544,000,000.00 in vital research annually.

Reliance on NIH Funding

7. In fiscal year 2024, University at Buffalo received funding through the National Institutes of Health (“NIH”) to support 224 projects, totaling \$60,654,347.

8. University at Buffalo receives NIH grants across a variety of institutes encompassed within the NIH, including the National Institute on Minority Health and Health

Disparities, the National Institute of Mental Health, and the National Institute for Alcohol Abuse & Alcoholism.

9. Through those NIH grants, University at Buffalo funds 1,003 researchers.

10. The work done by University at Buffalo on NIH funded projects provides education and training in Biomedical Engineering, Biochemistry, Chemistry, Dentistry, Family Medicine; Internal Medicine; Microbiology and Immunology, Neurology, Nursing, Ophthalmology, Pathology, Pediatrics, Pharmacology, Psychology, Public Health and Health Professions, Radiology, and other programs.

11. University at Buffalo provides considerable employment benefits in the Science, Technology, Engineering and Mathematics workforce to the New York State economy.

Terminations of NIH Grants

12. Since March 12, 2025, University at Buffalo has had three NIH grants terminated, not including terminated grants for which the University was a sub-awardee.

13. The terminations received as of March 28, 2025 are attached hereto as Exhibits A-C.

14. These terminations will result in the loss of at least \$4,481,711 in research funding to University at Buffalo.

15. The termination notices for these grants have provided very little to explain the termination, instead noting that the research is no longer consistent with newly conceived agency priorities. Specifically, the termination notices state that: "This award no longer effectuates agency priorities. Research programs based primarily on artificial and non-scientific categories, including amorphous equity objectives, are antithetical to the scientific inquiry, do nothing to expand our knowledge of living systems, provide low returns on investment, and ultimately do

not enhance health, lengthen life, or reduce illness. Worse, so-called diversity, equity, and inclusion (“DEI”) studies are often used to support unlawful discrimination on the basis of race and other protected characteristics, which harms the health of Americans. Therefore, it is the policy of NIH not to prioritize such research programs.”

16. In my 19 years working in NIH funded research at University at Buffalo, I have not seen this language previously used to cancel grants.

17. The termination notices have also stated that there is no corrective action that can be taken to ensure the grant aligns with agency priorities. However, prior to receipt of the termination, University at Buffalo had not been given notice of any opportunity to submit any “corrected” grant materials to align with agency priorities. Nor was University at Buffalo provided with any updated “agency priorities” with which its research must align.

18. I am the Co-Principal Investigator (with Jennifer Livingston, PhD, Associate Professor, School of Nursing, University at Buffalo) on one of the terminated grants. This grant, Award No. 92615, is titled Peer Victimization and Risky Alcohol Use among Sexual Minority Youth: Understanding Mechanisms and Contexts. In this grant we investigate the impact of peer victimization (PV) on health outcomes among LGBQ+ youth. These youth experience significant health disparities, including higher risk for suicide, greater mental health symptoms, and riskier alcohol and other substance use behaviors compared to exclusively heterosexual youth. These disparities are due, in part, to the exposure to unique and chronic minority stressors targeting their sexual identities. The relationship between PV and adverse health outcomes has been well-established for heterosexual youth, but the role of PV on these outcomes when accounting for sexual minority stressors is understudied. In this grant, we seek a better understanding of the complex and unique factors that elevate and ameliorate harmful outcomes for LGBQ+ youth in

the presence of minority stress and PV. Our study is novel in that we are using a developmental lens to assess participants over an 18-month period during which data are collected using surveys administered every 6 months, daily reports collected over two 4-week bursts, and qualitative interviews with a targeted subsample. This research is vital to improving the public health of millions of American youth who identify as LGBQ+ thereby reducing economic burden related to healthcare costs for these youth as they mature into adulthood. We have recruited 325 participants, representing 81.3% of the target sample. To date, only 11.4% of these participants have progressed through all phases of study. Preliminary unpublished results from this study underscore the negative impact of PV on health outcomes among LGBQ+ youth and identify heterogeneity of risks among these youth based on their sexual identity. Interviews with these youth underscore the negative emotional and psychological impact of PV on LGBQ+ youth, while also identifying factors that protective against these poor outcomes. Results indicate that parental support, LGBQ+ friendly school climate, and receipt of care from educated and culturally competent health providers are critical factors to consider as targets for future interventions to improve the health and well-being of these youth.

Comparisons Across Administrations

19. In prior years, under both Democratic and Republican administrations, our institution never experienced this volume of unexplained delays or procedural breakdowns.

20. Renewals were routine and predictable. This year, even long-standing, high-performing programs are in limbo.

21. Terminations were exceedingly rare and followed due process. The current approach is without precedent in our experience.

Impact on Research-Related Operations

22. Termination of this grant has halted recruitment of new participants and ongoing longitudinal data collection, thereby jeopardizing our ability to achieve the stated aims. We are currently in the fourth year of the grant award, and anticipated an additional year of direct costs funding, which would have allowed us to complete participant recruitment and the follow-up assessments necessary to achieve the stated aims. Our grant supports the salaries of three highly trained research staff, all of whom were to be terminated without any warning and without cause. This termination renders them immediately unemployed, resulting in their loss of benefits accrued over years of service in the State University of New York (SUNY) system. Furthermore, loss of these three staff members impedes our ability to conduct activities in coordination with our staff to close out the grant as per NIH requirements, as instructed in the termination notice (i.e., closing records, notifying participants, paying final bills, reconciling expenses, preparing data for analysis and archiving). Loss of the project data analyst would also disrupt dissemination and scholarship, thereby hindering our team's contributions to the research and scholarship central to the University at Buffalo's mission. Overall, our inability to complete the study represents a significant loss of investment already made by the NIH and the American taxpayers.

23. These terminations have forced the dean of our school to implement bridge funding to support our staff and compensate participants who have recently completed their assessments but were not compensated prior to receipt of the termination notice. Our school's capacity is limited to providing two weeks of bridge funds, after which our three staff members will be unemployed, preventing the completion of the project close-out. These staff were long-term SUNY Research Foundation employees and have been supported by our grant funding for

nearly four years. The sudden loss of employment with no due cause is economically and psychologically damaging to them.

Admissions, Training and Workforce Disruptions

24. The instability resulting from unanticipated grant terminations will affect the recruitment and retention of quality Ph.D. students in the School of Nursing and the University at Buffalo. Nursing Ph.D. students are required to participate in research as part of their program and a loss of the grant and the data that it would generate would adversely impact training opportunities. The inability to retain quality Ph.D. student research trainees will have continuing effects on the research capabilities of the University at Buffalo and will undermine the advancement of nursing science and public health.

Irreparable Harm

25. These termination notices have forced us and other researchers at the University at Buffalo and across the nation to abandon studies, miss deadlines, and/or lose key personnel. In many cases, there is no way to recover the lost time, research continuity, or training value once disrupted.

26. The termination of our grant and thousands of other NIH-funded grants across the nation will undermine and stagnate scientific progress to understand the nature of health disparities among LGBTQ+ populations. Recent estimates indicate that 9.3% of the U.S. adult population is LGBTQ+, and the numbers of adolescents identifying as LGBTQ+ is higher now than any time in prior history. The terminations have broad implications for the future of LGBTQ+ research and the health of significant numbers of Americans. The impact is unmeasurable and has implications that will be seen far into the future for today's LGBTQ+ youth. The health and well-being of a sizeable and vulnerable segment of our population is in jeopardy.

27. Given the longitudinal and developmental nature of the current research, the study had the potential to contribute to prevention and intervention efforts to improve the health and well-being of millions who identify as LGBTQ+ in our nation. Such breakthroughs would have advanced public health and will now not occur.

Conclusion

28. The breakdown in NIH processes is affecting institutional operations, planning, and public health partnerships. Terminations and delays with no explanation or remedy are undermining confidence in the system. These harms are ongoing and, in many instances, irreparable.

29. The termination of the NIH R01 grant has halted critical research investigating the impact of peer victimization on health outcomes among LGBTQ+ youth, disrupting participant recruitment and data collection in the study's final year. The abrupt loss of funding has left three highly trained research staff unemployed without warning, preventing the completion of required closeout activities such as data reconciliation and analysis. The resulting instability has also jeopardized Ph.D. student research opportunities in the School of Nursing, undermining both immediate and long-term contributions to nursing science and public health.

30. Beyond institutional disruptions, this termination undermines scientific progress in understanding health disparities among LGBTQ+ populations. With growing numbers of adolescents identifying as LGBTQ+, this research had the potential to inform vital prevention and intervention strategies. The premature termination not only wastes prior NIH investments but also has long-term consequences for public health, leaving a vulnerable population without the

benefits of evidence-based policy and healthcare improvements. Many of these harms—particularly the loss of data continuity, personnel, and research momentum—are irreparable.



Amy Hequembourg, PhD

Date: 4-1-25

EXHIBIT A



National Institutes of Health
Office of Extramural Research

March 12, 2025

Amy Lagowski
Research Foundation for the State University of New York
Amy.Lagowski@buffalo.edu

Dear Amy Lagowski:

Funding for Project Number 1P50MD019473-01 is hereby terminated pursuant to the 2024 National Institutes of Health ("NIH") Grants Policy Statement,¹ and 2 C.F.R. § 200.340(a)(2). This letter constitutes a notice of termination.²

The 2024 Policy Statement applies to your project because NIH approved your grant on July 19, 2024, and "obligations generally should be determined by reference to the law in effect when the grants were made."³

The 2024 Policy Statement "includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards."⁴ According to the Policy Statement, "NIH may ... terminate the grant in whole or in part as outlined in 2 CFR Part 200.340."⁵ At the time your grant was issued, 2 C.F.R. § 200.340(a)(2) permitted termination "[b]y the Federal awarding agency or pass-through entity, to the greatest extent authorized by law, if an award no longer effectuates the program goals or agency priorities."

This award no longer effectuates agency priorities. Research programs based primarily on artificial and non-scientific categories, including amorphous equity objectives, are antithetical to the scientific inquiry, do nothing to expand our knowledge of living systems, provide low returns on investment, and ultimately do not enhance health, lengthen life, or reduce illness. Worse, so-called diversity, equity, and inclusion ("DEI") studies are often used to support unlawful discrimination on the basis of race and other protected characteristics, which harms the health of Americans. Therefore, it is the policy of NIH not to prioritize such research programs.

Although "NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination

¹ <https://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>.

² 2 C.F.R. § 200.341(a); 45 C.F.R. § 75.373

³ *Bennett v. New Jersey*, 470 U.S. 632, 638 (1985).

⁴ 2024 Policy Statement at IIA-1.

⁵ *Id.* at IIA-155.

decision,”⁶ no corrective action is possible here. The premise of this award is incompatible with agency priorities, and no modification of the project could align the project with agency priorities.

Costs resulting from financial obligations incurred after termination are not allowable.⁷ Nothing in this notice excuses either NIH or you from complying with the closeout obligations imposed by 2 C.F.R. §§ 75.381-75.390. NIH will provide any information required by the Federal Funding Accountability and Transparency Act or the Office of Management and Budget’s regulations to *USAspending.gov*.⁸

Administrative Appeal

You may object and provide information and documentation challenging this termination.⁹ NIH has established a first-level grant appeal procedure that must be exhausted before you may file an appeal with the Departmental Appeals Board.¹⁰

You must submit a request for such review to Dr. Matt Memoli no later than 30 days after the written notification of the determination is received, except that if you show good cause why an extension of time should be granted, Dr. Memoli may grant an extension of time.¹¹

The request for review must include a copy of the adverse determination, must identify the issue(s) in dispute, and must contain a full statement of your position with respect to such issue(s) and the pertinent facts and reasons in support of your position. In addition to the required written statement, you shall provide copies of any documents supporting your claim.¹²

Sincerely,

Michelle G. Bulls -S  Digitally signed by Michelle G.
Bulls -S
Date: 2025.03.12 22:17:03 -04'00'

Michelle G. Bulls, on behalf Priscilla Grant, Chief Grants Management Officer, NIMHD
Director, Office of Policy for Extramural Research Administration
Office of Extramural Research

⁶ 2024 Policy Statement at IIA-156.

⁷ See 2 C.F.R. § 200.343 (2024).

⁸ 2 C.F.R. § 200.341(c); 45 C.F.R. § 75.373(c)

⁹ See 45 C.F.R. § 75.374.

¹⁰ See 42 C.F.R. Part 50, Subpart D

¹¹ 11 *Id.* § 50.406(a)

¹² 12 *Id.* § 50.406(b)

EXHIBIT B

Wshen7@buffalo.edu

From: Bulls, Michelle G. (NIH/OD) [E] <michelle.bulls@nih.gov>
Sent: Friday, March 21, 2025 12:31 PM
To: Wei Shen <wshen7@buffalo.edu>
Subject: Grant Termination Notification



3/21/2025

Wei Shen
 State University Of New York At Buffalo
wshen7@buffalo.edu

Dear Wei Shen:

Effective with the date of this letter, funding for Project Number 5K01MH130270-03 is hereby terminated pursuant to the Fiscal Year 2024 National Institutes of Health ("NIH") Grants Policy Statement,^[1] and 2 C.F.R. § 200.340(a)(2). This letter constitutes a notice of termination.^[2]

The 2024 Policy Statement applies to your project because NIH approved your grant on 8/1/2024, and "obligations generally should be determined by reference to the law in effect when the grants were made."^[3]

The 2024 Policy Statement "includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards."^[4] According to the Policy Statement, "NIH may ... terminate the grant in whole or in part as outlined in 2 CFR Part 200.340."^[5] At the time your grant was issued, 2 C.F.R. § 200.340(a)(2) permitted termination "[b]y the Federal awarding agency or pass-through entity, to the greatest extent authorized by law, if an award no longer effectuates the program goals or agency priorities."

This award no longer effectuates agency priorities. Research programs based primarily on artificial and non-scientific categories, including amorphous equity objectives, are antithetical to the scientific inquiry, do nothing to expand our knowledge of living systems, provide low returns on investment, and ultimately do not enhance health, lengthen life, or reduce illness. Worse, so-called diversity, equity, and inclusion ("DEI") studies are often used to support unlawful discrimination on the basis of race and other protected characteristics, which harms the health of Americans. Therefore, it is the policy of NIH not to prioritize such research programs.

Although "NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination decision,"^[6] no corrective action is possible here. The premise of this award is incompatible with agency priorities, and no modification of the project could align the project with agency priorities.

Costs resulting from financial obligations incurred after termination are not allowable.^[7] Nothing in this notice excuses either NIH or you from complying with the closeout obligations imposed by 2 C.F.R. §§ 75.381-75.390. NIH will provide any information required by the Federal Funding Accountability and Transparency Act or the Office of Management and Budget's regulations to *USAspending.gov*.^[8]

Administrative Appeal

You may object and provide information and documentation challenging this termination.^[9] NIH has established a first-level grant appeal procedure that must be exhausted before you may file an appeal with the Departmental Appeals Board.^[10]

You must submit a request for such review to Dr. Matt Memoli no later than 30 days after the written notification of the determination is received, except that if you show good cause why an extension of time should be granted, Dr.

Memoli may grant an extension of time.^[11]

The request for review must include a copy of the adverse determination, must identify the issue(s) in dispute, and must contain a full statement of your position with respect to such issue(s) and the pertinent facts and reasons in support of your position. In addition to the required written statement, you shall provide copies of any documents

^[12]

supporting your claim.

Sincerely,



Michelle G. Bulls, on behalf of Theresa Jarosik, Chief Grants Management Officer, NIMH
Director, Office of Policy for Extramural Research Administration
Office of Extramural Research

^[1] <https://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>.

^[2] 2 C.F.R. § 200.341(a); 45 C.F.R. § 75.373

^[3] *Bennett v. New Jersey*, 470 U.S. 632, 638 (1985).

^[4] NIH Grants Policy Statement at IIA-1.

^[5] *Id.* at IIA-155.

^[6] NIH Grants Policy Statement at IIA-156.

^[7] See 2 C.F.R. § 200.343 (2024).

^[8] 2 C.F.R. § 200.341(c); 45 C.F.R. § 75.373(c)

^[9] See 45 C.F.R. § 75.374.

^[10] See 42 C.F.R. Part 50, Subpart D

^[11] 11 *Id.* § 50.406(a)

^[12] 12 *Id.* § 50.406(b)

EXHIBIT C



3/21/2025

Mical, Alison
State University Of New York At Buffalo
alodojew@buffalo.edu

Dear Mical, Alison:

Effective with the date of this letter, funding for Project Number 5R01AA028810-04 is hereby terminated pursuant to the Fiscal Year 2024 National Institutes of Health (“NIH”) Grants Policy Statement,^[1] and 2 C.F.R. § 200.340(a)(2). This letter constitutes a notice of termination.^[2]

The 2024 Policy Statement applies to your project because NIH approved your grant on 7/1/2024, and “obligations generally should be determined by reference to the law in effect when the grants were made.”^[3]

The 2024 Policy Statement “includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards.^[4]” According to the Policy Statement, “NIH may ... terminate the grant in whole or in part as outlined in 2 CFR Part 200.340.^[5]” At the time your grant was issued, 2 C.F.R. § 200.340(a)(2) permitted termination “[b]y the Federal awarding agency or pass-through entity, to the greatest extent authorized by law, if an award no longer effectuates the program goals or agency priorities.”

This award no longer effectuates agency priorities. Research programs based on gender identity are often unscientific, have little identifiable return on investment, and do nothing to enhance the health of many Americans. Many such studies ignore, rather than seriously examine, biological realities. It is the policy of NIH not to prioritize these research programs.

Although “NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination decision,”^[6] no corrective action is possible here. The premise of this award is incompatible with agency priorities, and no modification of the project could align the project with agency priorities.

Costs resulting from financial obligations incurred after termination are not allowable.^[7] Nothing in this notice excuses either NIH or you from complying with the closeout obligations imposed by 2 C.F.R. §§ 75.381-75.390. NIH will provide any information required by the Federal Funding Accountability and Transparency Act or the Office of Management and Budget’s regulations to *USAspending.gov*.^[8]

Administrative Appeal

You may object and provide information and documentation challenging this termination.^[9] NIH has established a first-level grant appeal procedure that must be exhausted before you may file an appeal with the Departmental Appeals Board.^[10]

You must submit a request for such review to Dr. Matt Memoli no later than 30 days after the written notification of the determination is received, except that if you show good cause why an extension of time should be granted, Dr. Memoli may grant an extension of time.^[11]

The request for review must include a copy of the adverse determination, must identify the issue(s) in dispute, and must contain a full statement of your position with respect to such issue(s) and the pertinent facts and reasons in support of your position. In addition to the required written statement, you shall provide copies of any documents supporting your claim.^[12]

Sincerely,



Michelle G. Bulls, on behalf of Judy Fox, Chief Grants Management Officer, NIAAA
Director, Office of Policy for Extramural Research Administration
Office of Extramural Research

^[1] <https://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>.

^[2] 2 C.F.R. § 200.341(a); 45 C.F.R. § 75.373

^[3] *Bennett v. New Jersey*, 470 U.S. 632, 638 (1985).

^[4] NIH Grants Policy Statement at IIA-1.

^[5] *Id.* at IIA-155.

^[6] NIH Grants Policy Statement at IIA-156.

^[7] See 2 C.F.R. § 200.343 (2024).

^[8] 2 C.F.R. § 200.341(c); 45 C.F.R. § 75.373(c)

^[9] See 45 C.F.R. § 75.374.

^[10] See 42 C.F.R. Part 50, Subpart D

^[11] 11 *Id.* § 50.406(a)

^[12] 12 *Id.* § 50.406(b)

EXHIBIT 26

**UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MASSACHUSETTS**

COMMONWEALTH OF MASSACHUSETTS;
et al.,

Plaintiffs,

v.

ROBERT F. KENNEDY, JR., et al.,

Defendants.

No. 1:25-cv-_____

DECLARATION OF BETHANY D. JENKINS

I, Bethany D. Jenkins, declare under the penalty of perjury pursuant to 28 U.S.C. § 1746 that the foregoing is true and correct:

1. I am the Vice President for Research and Economic Development and Professor of Cell and Molecular Biology at the University of Rhode Island. I have personal knowledge of the facts set forth in this declaration, and if required to testify, would and could competently do so.

2. I submit this Declaration in support of the States' Motion for Temporary Restraining Order.

Professional Background

3. I am the Vice President for Research and Economic Development and Professor of Cell and Molecular Biology at University of Rhode Island. As the Vice President for Research and Economic Development I help our community receive competitive federal awards that augment significant investments made by the State of Rhode Island in URI as our State's flagship land and sea grant university.

4. University of Rhode Island's mission is one as a student-centered research institution, that actively partners with other organizations globally and locally to advance knowledge and to develop

informed residents and leaders. URI is committed to high-quality education, community engagement, and solving the world's most important challenges. Situated on the traditional land and territories of the Narragansett Nation and the Niantic People, URI strives to create a diverse and inclusive environment for researchers, teachers, learners, and community members.

5. University of Rhode Island has three campuses throughout the state of Rhode Island, that serve approximately 14,000 undergraduate students and approximately 3,000 graduate students.

6. I am providing this declaration to document the impacts of NIH grant terminations on the University of Rhode Island.

Reliance on NIH Funding

7. In fiscal year 2024, University of Rhode Island received funding through the National Institutes of Health ("NIH") to support over 90 projects, totaling \$22.1 M.

8. University of Rhode Island receives NIH grants across a variety of institutes encompassed within the NIH, including the National Center for Complementary and Integrative Health, , the National Institute on Aging, the National Institute on Alcohol Abuse and Alcoholism, The National Institute of Allergy and Infectious Disease, National Institute of Arthritis & Musculoskeletal & Skin Diseases, the National Institute of Biomedical Imaging and Bioengineering, the National Institute of Dental and Craniofacial Research, the National Institute of Diabetes and Digestive and Kidney Diseases, the National Institute of Environmental Health Sciences, the National Institute of General Medical Sciences, the National Institute National Institute of Neurological Disorders and Stroke, the National Institute of Nursing Research, the Office of the Director, and the Office of Research Infrastructure Programs.

9. The work done by University of Rhode Island on NIH funded projects provides education and training in Agriculture, Biology, Biomedical Engineering, Chemistry, Chemical Engineering, Civil Engineering, Computational Biology, Computer Sciences, Electrical Engineering, Health Sciences, Kinesiology, Mathematics, Mechanical Engineering, Public Health, Neuroscience, Nutrition, Nursing, Pharmaceutical Sciences, Physics, Psychology, Sociology, and other programs.

10. University of Rhode Island provides considerable employment benefits in the Science, Technology, Engineering and Mathematics (“STEM”) workforce to the Rhode Island economy.

Typical Timeline and Processes for NIH Grant Awards

11. The Division of Research and Economic Development at University of Rhode Island works with researchers to submit grant applications and tracks grant applications and awards.

12. Based on my work as Vice President for Research and Economic Development, I have an understanding of the NIH grant process based on my 2 years in the role and 19 years as Principal Investigator managing federal awards.

Terminations of NIH Grants

13. Since March 21, the University of Rhode Island has had two NIH grants terminated.

14. The terminations received as of April 1 are attached hereto as Exhibits A and B.

15. These terminations will result in the loss of \$3.7 million in research money to University of Rhode Island.

16. The termination notices for these grants have provided very little to explain the termination, instead noting that the research no longer “effectuates agency priorities. Research programs based primarily on artificial and non-scientific categories, including amorphous equity objectives, are antithetical to the scientific inquiry, do nothing to expand our knowledge of living systems, provide low returns on investment, and ultimately do not enhance health, lengthen life, or reduce illness. Worse, so-called diversity, equity, and inclusion (“DEI”) studies are often used to support unlawful discrimination on the basis of race and other protected characteristics, which harms the health of Americans. Therefore, it is the policy of NIH not to prioritize such research programs.” In my 2 years as the Vice President for Research at University of Rhode Island, I have not seen this language previously used to cancel grants.

17. The termination notices have also stated that there is no corrective action that can be taken to ensure the grant aligns with agency priorities. However, prior to receipt of the termination, University of Rhode Island had not been given notice of any opportunity to submit any “corrected” grant

materials to align with agency priorities. Nor was University of Rhode Island provided with any updated “agency priorities” with which its research must align.

18. On March 20, NIH terminated Project Number 1R01 DA058994-01A1, Network-based study design, statistical, and modeling solutions for HIV among populations that use illicit substances: informing interventions and policy in real-world settings using existing data had been “hereby terminated pursuant to the Fiscal Year 2024 National Institutes of Health (“NIH”) Grants Policy Statement, and 2 C.F.R. § 200.340(a)(2). The terminated project is a transdisciplinary collaboration led by the University of Rhode Island with performance sites at Boston University, The New York University School of Medicine, the University of Chicago and Brown University. The terminated research is innovative and essential to advance HIV research by contributing to the investigation of causal mechanisms among networks of populations at high risk for HIV infection compounded by illicit substance use, specifically men at risk for HIV.

19. On March 21, NIH terminated ESTEEMED Scholars Program at the University of Rhode Island Project Number 5R25EB034489-02. The URI ESTEEMED program provides students from underrepresented backgrounds with the skills and resources necessary to pursue advanced education and degree programs in bioengineering and related disciplines. The goals of URI ESTEEMED program are (1) to develop a cohort of scholars who embody critical thinking, engineering design, and fundamental research skills that enable them to develop an early scientific inquiry and research mindset, and (2) to support the development of Scholars’ STEM identity and self-efficacy through self-exploration, faculty and near-peer mentoring, academic and professional development advising, academic support and preparation, and positive research experiences. The impact on student achievement and the inclusive environment at URI will be hit particularly hard. Without URI ESTEEMED, several of our current trainees would have had to drop out of URI due to the lack of academic support the program provided and the stipend that allowed them to focus on their academics and research instead of working an outside job. The loss of URI ESTEEMED means that we will not have the resources to cultivate a community of diverse scholars on the same level and devalues the importance of the work the trainees have achieved

thus far. Furthermore, faculty mentors who volunteer their time and resources to mentor our trainees will not have the opportunity to work with such a diverse group of students under the support of the URI ESTEEMED program.

Comparisons Across Administrations

20. In prior years, terminations were exceedingly rare and followed due process. The current approach is without precedent in our experience.

Impact on Institutional Operations

21. Each loss of support for grant funded staff and students is a significant impact on URI's budget. URI is in the process of trying to determine how and to what extent it can continue to support students, staff and faculty time that were supported by federal funds that were terminated

22. Use of internal funds to replace federally funded salaries prevents the use of these funds for any other purpose, including other planned improvements to our programs and research.

Conclusion

23. NIH grant terminations with no explanation or remedy are undermining confidence in the system. These harms are ongoing and, in many instances, irreparable.



Bethany Diane Jenkins

Date: 4/1/2025

EXHIBIT A



National Institutes of Health
Office of Extramural Research

March 20, 2025

Bethany Jenkins

■ University of Rhode Island
[REDACTED]

Dear Bethany Jenkins:

Effective with the date of this letter, funding for Project Number 1R01 DA058994-01A1 is hereby terminated pursuant to the Fiscal Year 2024 National Institutes of Health (“NIH”) Grants Policy Statement,¹ and 2 C.F.R. § 200.340(a)(2). This letter constitutes a notice of termination.²

The 2024 Policy Statement applies to your project because NIH approved your grant on September 15, 2024, and “obligations generally should be determined by reference to the law in effect when the grants were made.”³

The 2024 Policy Statement “includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards.”⁴ According to the Policy Statement, “NIH may ... terminate the grant in whole or in part as outlined in 2 CFR Part 200.340.”⁵ At the time your grant was issued, 2 C.F.R. § 200.340(a)(2) permitted termination “[b]y the Federal awarding agency or pass-through entity, to the greatest extent authorized by law, if an award no longer effectuates the program goals or agency priorities.”

This award no longer effectuates agency priorities. Research programs based primarily on artificial and non-scientific categories, including amorphous equity objectives, are antithetical to the scientific inquiry, do nothing to expand our knowledge of living systems, provide low returns on investment, and ultimately do not enhance health, lengthen life, or reduce illness. Worse, so-called diversity, equity, and inclusion (“DEI”) studies are often used to support unlawful discrimination on the basis of race and other protected characteristics, which harms the health of Americans. Therefore, it is the policy of NIH not to prioritize such research programs.

¹ <https://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>.

² 2 C.F.R. § 200.341(a); 45 C.F.R. § 75.373

³ *Bennett v. New Jersey*, 470 U.S. 632, 638 (1985).

⁴ 2024 Policy Statement at IIA-1.

⁵ *Id.* at IIA-155.

Although “NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination decision,”⁶ no corrective action is possible here. The premise of this award is incompatible with agency priorities, and no modification of the project could align the project with agency priorities.

Costs resulting from financial obligations incurred after termination are not allowable.⁷ Nothing in this notice excuses either NIH or you from complying with the closeout obligations imposed by 2 C.F.R. §§ 75.381-75.390. NIH will provide any information required by the Federal Funding Accountability and Transparency Act or the Office of Management and Budget’s regulations to *USAspending.gov*.⁸

Administrative Appeal

You may object and provide information and documentation challenging this termination.⁹ NIH has established a first-level grant appeal procedure that must be exhausted before you may file an appeal with the Departmental Appeals Board.¹⁰

You must submit a request for such review to Dr. Matt Memoli no later than 30 days after the written notification of the determination is received, except that if you show good cause why an extension of time should be granted, Dr. Memoli may grant an extension of time.¹¹

The request for review must include a copy of the adverse determination, must identify the issue(s) in dispute, and must contain a full statement of your position with respect to such issue(s) and the pertinent facts and reasons in support of your position. In addition to the required written statement, you shall provide copies of any documents supporting your claim.¹²

Sincerely,

**Michelle G.
Bulls -S**

Digitally signed by
Michelle G. Bulls -S
Date: 2025.03.20 10:11:04
-04'00'

Michelle G. Bulls, on behalf of Pamela Fleming, Chief Grants Management Officer, National Institute on Drug Abuse
Director, Office of Policy for Extramural Research Administration
Office of Extramural Research

⁶ 2024 Policy Statement at IIA-156.

⁷ See 2 C.F.R. § 200.343 (2024).

⁸ 2 C.F.R. § 200.341(c); 45 C.F.R. § 75.373(c)

⁹ See 45 C.F.R. § 75.374.

¹⁰ See 42 C.F.R. Part 50, Subpart D

¹¹ 11 *Id.* § 50.406(a)

¹² 12 *Id.* § 50.406(b)

EXHIBIT B

----- Forwarded message -----

From: **Jean** [REDACTED]
Date: Fri, Mar 21, 2025 at 12:33 PM
Subject: Fwd: Grant Termination Notification
To: Kate Barber <k[REDACTED]>

Hi Kate,

Sorry for this news.

This letter is in regards to Samantha [REDACTED] project P11444 and P13130.

Kind regards,

Jean

----- Forwarded message -----

From: **Bulls, Michelle G. (NIH/OD)** [E] <[REDACTED]v>
Date: Fri, Mar 21, 2025 at 12:29 PM
Subject: Grant Termination Notification
To: [REDACTED]>



National Institutes of Health
Office of Extramural Research

3/21/2025

Jean [REDACTED]

University Of Rhode Island

[REDACTED]

Dear Jean [REDACTED] :

Effective with the date of this letter, funding for Project Number 5R25EB034489-02 is hereby terminated pursuant to the Fiscal Year 2024 National Institutes of Health (“NIH”) Grants Policy Statement,^[1] and 2 C.F.R. § 200.340(a)(2). This letter constitutes a notice of termination.^[2]

The 2024 Policy Statement applies to your project because NIH approved your grant on 5/1/2024, and “obligations generally should be determined by reference to the law in effect when the grants were made.”^[3]

The 2024 Policy Statement “includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards.^[4]” According to the Policy Statement, “NIH may ... terminate the grant in whole or in part as outlined in 2 CFR Part 200.340.^[5]” At the time your grant was issued, 2 C.F.R. § 200.340(a)(2) permitted termination “[b]y the Federal awarding agency or pass-through entity, to the greatest extent authorized by law, if an award no longer effectuates the program goals or agency priorities.”

This award no longer effectuates agency priorities. Research programs based primarily on artificial and non-scientific categories, including amorphous equity objectives, are antithetical to the scientific inquiry, do nothing to expand our knowledge of living systems, provide low returns on investment, and ultimately do not enhance health, lengthen life, or reduce illness. Worse, so-called diversity, equity, and inclusion (“DEI”) studies are often used to support unlawful discrimination on the basis of race and other protected characteristics, which harms the health of Americans. Therefore, it is the policy of NIH not to prioritize such research programs.

Although “NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination decision,”^[6] no corrective action is possible here. The premise of this award is incompatible with agency priorities, and no modification of the project could align the project with agency priorities.

Costs resulting from financial obligations incurred after termination are not allowable.^[7] Nothing in this notice excuses either NIH or you from complying with the closeout obligations imposed by 2 C.F.R. §§ 75.381-75.390. NIH will provide any information required by the Federal Funding Accountability and Transparency Act or the Office of Management and Budget’s regulations to USAspending.gov.^[8]

Administrative Appeal

You may object and provide information and documentation challenging this termination.^[9] NIH has established a first-level grant appeal procedure that must be exhausted before you may file an appeal with the Departmental Appeals Board.^[10]

You must submit a request for such review to Dr. Matt Memoli no later than 30 days after the written notification of the determination is received, except that if you show good cause why an extension of time should be granted, Dr. Memoli may grant an extension of time.^[11]

The request for review must include a copy of the adverse determination, must identify the issue(s) in dispute, and must contain a full statement of your position with respect to such issue(s) and the pertinent facts and reasons in support of your position. In addition to the required written statement, you shall provide copies of any documents supporting your claim.^[12]

Sincerely,

Michelle G. Bulls -S Digitally signed
by Michelle G.
G. Bulls -S Bulls -S

Michelle G. Bulls, on behalf of Mutema Nyankale, Chief Grants Management Officer, NIBIB
Director, Office of Policy for Extramural Research Administration
Office of Extramural Research

[1] <https://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>.

[2] 2 C.F.R. § 200.341(a); 45 C.F.R. § 75.373

[3] *Bennett v. New Jersey*, 470 U.S. 632, 638 (1985).

[4] NIH Grants Policy Statement at IIA-1.

[5] *Id.* at IIA-155.

[6] NIH Grants Policy Statement at IIA-156.

[7] See 2 C.F.R. § 200.343 (2024).

[8] 2 C.F.R. § 200.341(c); 45 C.F.R. § 75.373(c)

[9] See 45 C.F.R. § 75.374.

[10] See 42 C.F.R. Part 50, Subpart D

[11] 11 *Id.* § 50.406(a)

[12] 12 *Id.* § 50.406(b)

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Jean L. [REDACTED]

EXHIBIT 27

**UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MASSACHUSETTS**

COMMONWEALTH OF
MASSACHUSETTS; et al.,

Plaintiffs,

v.

ROBERT F. KENNEDY, JR., et al.,

Defendants.

No. 1:25-cv-_____

DECLARATION OF MARI OSTENDORF

I, Mari Ostendorf, declare under the penalty of perjury pursuant to 28 U.S.C. § 1746 that the foregoing is true and correct:

1. I am the Vice Provost of Research of University of Washington. I have personal knowledge of the facts set forth in this declaration, and if required to testify, would and could competently do so.

2. I submit this Declaration in support of the States' Motion for Temporary Restraining Order.

Professional Background

3. I am the Vice Provost for Research in the Office of Research at the University of Washington, a position I have held since 2021. As Vice Provost for Research, I have oversight over the pre-award process, reporting of institution-wide research statistics, and several research compliance offices. In addition, I oversee two major research units: the Applied Physics Laboratory and the Washington National Primate Research Center. Prior to holding this position, I served as Associate Vice Provost for Research in the Office of Research since 2017.

4. The University of Washington is the flagship university of the state of Washington. Since its founding in 1861, it has been a hub for learning, innovation, problem solving, economic development and community building. Driven by a mission to serve the greater good, our students, faculty and staff tackle today's most pressing challenges with courage and creativity, making a difference across Washington state—and around the world. As part of its mission, the UW engages in research and direct service, which frequently rely in whole or in part on federal financial assistance.

5. The University of Washington School of Medicine is dedicated to improving the general health and well-being of the public. In pursuit of its goals, the School is committed to excellence in biomedical education, research and healthcare. The School is also dedicated to ethical conduct in all its activities.

6. As the pre-eminent academic medical center in our region and as a national leader in biomedical research, we place special emphasis on educating and training physicians, scientists and allied health professionals dedicated to two distinct goals: 1) Meeting the healthcare needs of our region, especially by recognizing the importance of primary care and providing service to underserved populations; and 2) Advancing knowledge and assuming leadership in the biomedical sciences and in academic medicine.

7. The UW receives more federal research dollars than any other U.S. public university. In particular, funding from the National Institutes of Health is critical to UW's mission. In fiscal year 2024, UW received more than 1,220 NIH grants, totaling over \$648 million. However, recent actions by NIH, including cancelling study sections, delaying grant renewals, and terminating grants, have severely impacted UW's ability to accomplish its mission. Because of NIH's actions in delaying and cancelling grant awards, UW is now facing funding disruptions

which are forcing it to furlough and potentially lay off research staff and faculty, cut admissions to graduate programs, including not taking any new undergraduate researchers in labs during the summer semester, and causing unprecedented budget uncertainty. These cuts have also led individual researchers to scale back their research or to limit their research to less complex experiments.

UW Relies on NIH Funding

8. As noted, UW currently has over 1,200 NIH grants. These grants come from 23 different funding institutes within NIH.

9. Through those NIH grants, UW funds over 3000 researchers (faculty, graduate students, and research staff).

10. NIH grants support research, education, and training, into project areas spanning a dizzying array, from biomedical engineering, to suicide reduction, to health equity, to protein design using artificial intelligence, diabetes, cancer treatments, kidney disease, and countless other examples.

Typical Timeline and Processes for NIH Grant Awards

11. The Office of Sponsored Programs at UW works with researchers to submit grant applications and tracks grant applications and awards.

12. As detailed elsewhere, NIH grant applications are evaluated by study sections, who determine whether a project has scientific merit. Applications are scored, and if a grant application receives a “excellent priority score”, it will likely be funded.

13. After the study section, the grant application is sent to an “advisory council” where the ultimate decision on whether or not to fund the grant is made. After the advisory council meets,

a Notice of Award is issued confirming whether or not the grant will be funded after all administrative review steps are completed.

14. The process for competitive renewals is very similar.

15. The budget process at UW relies upon the regular NIH grant application submission, review, and approval cycle. Typically, we rely in grants being reviewed and scored within three to six months of submission and funding is generally awarded within nine to twelve months for meritorious grants.

16. Based upon those published NIH timelines, UW is able to make educated decisions around hiring research staff and graduate students. The regularity of the grant cycle is thus critical for UW in setting its budget.

Delays and Irregularities in the Processing of NIH Grant Applications

17. Since the Inauguration, UW has experienced unprecedented delays in the processing of NIH grant applications. NIH study sections and advisory councils have been canceled, delayed or otherwise not scheduled, and grant application scoring has been significantly delayed.

18. As of April 1, 2025, UW has more than 500 proposals awaiting NIH study section review.

19. As of April 1, 2025, UW has 54 proposals for \$138 million in total funding requested that received fundable scores, awaiting NIH advisory council and Notice of Award.

20. As of April 1, 2025, UW has 76 proposals for \$260 million in total funding requested with fundable scores that for which the NIH advisory council has met or voted electronically to approve a grant for funding, but the NOA has not yet been issued.

21. On top of that, UW is also experiencing significant delays in so-called non-competing or Type 5 renewals. These are grant awards for which NIH has issued an award for a given year (called the “award year”), with a commitment to fund further years (called “out years”), so long as the grantee demonstrates adequate progress. The out years typically require a new notice of award (NOA) after submission of a progress report (RPPR). This is generally pro forma, and unless the grantee gets nothing done or does not submit the progress report, the next year of funding is awarded. This decision is made by the NIH program officer without peer review. Type 5 NOAs are generally received at least one week (often more) before the start of the new budget period. There can be delays with a new administration or while on continuing resolution, however, the more common practice is to award them at 90% of the budgeted amount and then to increase to full budget once the FY budget is passed (assuming no major cuts to NIH).

22. As of April 1, 2025, UW has 73 overdue non-competing renewals totaling over \$61 million that have yet to receive NOAs.

23. I want to highlight four important research centers that are at risk because of delays in the grants review and award processes at NIH. They are the Alzheimer’s Disease Research Center (ADRC), the Nathan Shock Center of Excellence (NSC) in the Basic Biology of Aging, the joint UW/Allen Center “*A multimodal brain cell atlas and community resource of Alzheimer’s disease and comorbid dementias,*” and the Institute for Translational Health Science (ITHS). Three of these Centers are funded by the National Institute on Aging (NIA) and received excellent scores during their reviews in study section in the fall. Because the NIA Council did not meet as scheduled in the January, these large grants were not approved for award. They all end in March, April or May and would leave large research teams without support. The work being done by these

centers is longitudinal and lapse in funding will mean loss of critical cohorts that have been studied in some cases up to 40 years.

UW Alzheimer's Disease Research Center (ADRC)

24. The NIH-funded University of Washington Alzheimer's Disease Research Center ("ADRC"; P30 AG066509) is the main platform for Alzheimer's disease research in Washington state. Alzheimer's disease processes start 15 years before symptoms occur and run their course across decades. Serious study of Alzheimer's disease biology and treatment requires following research participants for years, characterizing their trajectories with genetic, cognitive, imaging, and biomarker tests, and doing detailed biological studies on brain tissue after death. The cycle of recruitment, long term evaluation and brain donation is the cornerstone of research that leads to effective new drugs. The Alzheimer's Disease Centers program maintains a stable network of 35 ADRC Centers and supporting programs that cooperate to study Alzheimer's disease and related disorders in a standard, long term way. The resulting data is pooled for widespread scientific analysis. The University of Washington ADRC has been continuously funded for 40 years and is one of the leading centers. We contributed key research identifying genetic causes of Alzheimer's disease and continue to study tissue and data from our families with ever more powerful techniques. We focus on the biology of degenerative dementia and the factors that counter degeneration and dementia. Many other studies depend on our UW ADRC and its sister ADRCs for participants and biospecimens like blood, spinal fluid, and brain tissue, to advance their work more powerfully and less expensively. In addition, the ADRC is part of the UW Medicine Memory and Brain Wellness Center that ensures state of the art care for patients with memory loss and dementia. As disease-modifying treatments,

like lecanemab and donanemab are now available, the ADRCs are becoming more tightly connected to their clinics.

25. Currently, the UW ADRC is in its renewal cycle, with a fundable score, but unable to move forward into the next five years of funding without NIA Advisory Council action. Lapse of funding for the ADRC, which appears likely, will mean serious interruption of the longitudinal research, loss of key personnel who have developed expertise over years of devoted service, and loss of availability of key resources, like appropriately curated brain tissue, that are essential for the affiliated studies. For example, we have a major project with the Allen Institute for Brain Science (U19 AG060909) that depends on our brain tissue. NIH funding means stability and longevity of resource centers like ours and is irreplaceable.

Nathan Shock Center of Excellence (NSC) in the Basic Biology of Aging

26. I would like to highlight our NIA P30 Nathan Shock Center of Excellence (NSC) in the Basic Biology of Aging and its companion training grant (T32) the Biological Mechanisms of Healthy Aging (BMHA) Training grant. We submitted the renewals last year and the NSC received an impact score of 15 and the BMHA received an impact score of 13. These scores reflect the outstanding impact the NSC and BMHA continue to have on aging research in both scientific discovery and training the next generation. Both grants have been "recommended for funding" but, like the ADRC, are awaiting final decision at the January NIA Advisory Council that has been postponed. Funding for the NSC and BMHA ends in May and April 2025, respectively.

27. The UW NSC is one of eight NSCs and is the longest running one in the country (over 30 years). It provides critical funding for pilot programs for junior investigators and collaborative projects with other centers from around the country to provide access to state-of-the-art expertise in protein phenotypes, metabolite phenotypes, invertebrate models and artificial

intelligence to understand the basic mechanisms of human aging. Three of these four cores have been part of the NSC for 15 years and the newer AI core is a world leader in state-of-the-art AI tools for health and medicine. They have ongoing collaborations both within the UW and across the country working to establish new biomarkers, identify new biological mechanisms, and testing new interventions to improve health in the aging population. Without timely renewal of the NSC these ongoing studies will be jeopardized, and our core laboratories face the risk of losing staff with critical expertise. The BMHA is a rigorous training program closely affiliated with the NSC that currently supports 6 predoctoral and 6 postdoctoral fellows. The training program not only includes laboratory-based research in aging biology, but career development programs, mentoring, and networking opportunities to help prepare the next generation of scientists to become independent scientists in basic and translational aging biology. A delay in renewal of the BMHA runs the risk of not only losing this current cohort of trainees but also risks dismantling the training program and staff. These are both critical centers to the UW infrastructure and educational programs and, with the ADRC, are key drivers of the international recognition of the UW as a leader in driving new treatments for improved health with age. We are extremely anxious about the impact of the ongoing delays at the NIH on their futures.

U19 UW/Allen Institute “*A multimodal brain cell atlas and community resource of Alzheimer's disease and comorbid dementias*”

28. The goal of this U19 Center Collaboration with UW and Allen Institute for Brain Science is to build a national brain tissue and data resource to stimulate cutting edge research in Alzheimer's Disease (AD). A unique aspect of this project is the tight integration with the NIH BRAIN Initiative's flagship Cell Census projects, which has allowed us to rapidly build on cutting edge advances in the BRAIN Initiative and use them to understand Alzheimer's disease in unprecedented detail, and also to disseminate these advances to the larger AD research and medical

communities. Over the first five years of this center, we developed techniques and tools to optimally preserve and characterize human brain tissue from the UW ADRC and affiliated studies. The Center has produced advances in our ability to manage, process, and analyze brain tissue for AD/ADRD that have led to substantial progress in our understanding of the cell type basis of these diseases. This has led to an openly accessible highly multimodal data resource that serves as a reference for the entire field of human AD research. The goal of this center is to identify early vulnerable cells in AD using cutting edge genomics tools and to identify potential therapeutic strategies to protect those cells. The renewal extends this study to build a national network of ADRCs to adopt these cutting-edge techniques across multiple cohorts to build this resource around Alzheimer's Disease related dementias (ADRD) including Lewy body dementia, Parkinson's disease, vascular dementia, etc. The renewal integrates new technology, including multimodal spatial genomics applications, to continue to understand AD and AD/ADRD mechanisms. The renewal proposes to develop a neuropathology consensus panel to improve existing or develop new ways to diagnose and differentiate AD and AD/ADRD. A critical aspect of this work is that all of the data is openly accessible, and has already served as a resource for many highly impactful studies across the US and internationally (<https://portal.brain-map.org/explore/seattle-alzheimers-disease>) with more than 29,000 users. The platform paper for SEA-AD was published last year (<https://www.nature.com/articles/s41593-024-01774-5>) and this work has been featured in local and national media (reaching over 70M people). But all of this work is now jeopardized by NIH's funding delays.

Institute of Translational Health Sciences (ITHS)

29. A partnership between the University of Washington, Fred Hutchinson Cancer Center, Seattle Children's, and regional institutions ITHS promotes the translation of scientific

discovery to clinical practice by fostering innovative research, cultivating multi-disciplinary research partnerships, and ensuring a pipeline of next generation researchers through robust educational and career development programs throughout the Washington, Wyoming, Alaska, Montana, and Idaho (WWAMI) region.

30. One example of the innovative work performed at ITHS' is the Gene & Cell Therapy Lab's (GCTL) acceleration of medical discoveries to clinical environments through partnerships. One such partnership involved a biopharmaceutical company that developed a therapy to treat advanced ovarian cancer, called UltraCAR-T Cell therapy. Scientists in the GCTL worked with the company to transfer the technology so that the product could be made quickly and effectively. A separate unit of ITHS, the Translational Research Unit, conducted the rigorous clinical trials necessary to advance the technology towards a clinical use.

31. ITHS supports collaboration between primary care practices and academic researchers that improves the health and well-being of patients in their communities and enhances primary care clinical practice through its WWAMI Practice and Research Network. This practice-based research network, known as the WPRN, spans 34 organizations and over 90 clinics in the five-state WWAMI region.

32. ITHS is supported by a \$10.5 million annual grant from NIH. UW did not receive an expected NOA generated by a non-competing renewal for ITHS on March 1, 2025. Without funding for over thirty days, UW was forced to institute staff reductions, furloughs, and elimination of positions at ITHS.

Terminations of NIH Grants

33. Since February 28, UW has had at least seven NIH grants terminated on which a UW researcher was the prime grantee.¹ UW has also had multiple grants terminated in which a UW researcher is a subgrantee.

34. The prime grantee terminations received as of April 1 are attached hereto as Exhibits A-G.

35. These terminations will result in the loss of over \$2.9 million in research money to UW.

36. The termination notices do not explain why the grants are being terminated, instead claiming that the research no longer “effectuates agency priorities.” Of course, these grants were initially approved through NIH’s rigorous process—some as recently as last year, while others have been continually funded for multiple years—and NIH failed to explain what changed. In my experience, I have never before seen NIH cancel a grant because it supposedly no longer comports with agency priorities.

37. The termination notices claim that there is no corrective action that can be taken to ensure the grant aligns with agency priorities. However, prior to the terminations, UW was not given any opportunity to submit revised grant materials to align with agency priorities, nor were grantees even given an opportunity to explain what their work was and how it might align with agency priorities. Nor was UW provided with any updated definition of “agency priorities” with which its research must align.

38. These grants all funded amazing work by UW researchers. For example, NIH terminated Grant No. 5R01MD017573-03 to UW Professor Emily Dworkin. That grant funded a groundbreaking study on the impact of anti-LGBTQ policies on sexual minority health across the

¹ This does exclude one grant that NIH terminated and then subsequently reinstated.

nation. Dr. Dworkin's study sought to understand the causes of disproportionately high rates PTSD and other mental health issues among sexual minority women who have experienced sexual assault with an eye toward understanding how the political and social environment affects people, and, consequently, how changing people's environments can improve mental health. This was year three of the project, meaning that significant work had already been done—which will now be wasted if funding is not restored.

39. In its cancellation letter, NIH wrote: "This award no longer effectuates agency priorities. Research programs based primarily on artificial and non-scientific categories, including amorphous equity objectives, are antithetical to the scientific inquiry, do nothing to expand our knowledge of living systems, provide low returns on investment, and ultimately do not enhance health, lengthen life, or reduce illness. Worse, so-called diversity, equity, and inclusion ("DEI") studies are often used to support unlawful discrimination on the basis of race and other protected characteristics, which harms the health of Americans. Therefore, it is the policy of NIH not to prioritize such research programs." Given that Dr. Dworkin's research sought to understand, and hopefully address, significant mental health issues among sexual minority women, it is hard to see how NIH could possibly have concluded that her research was unlikely to contributed to public health.

40. As another example, NIH terminated Grant No. 1F31 AI181431-01A1. That grant, to UW graduate student Gregory Zane, funded research into prophylactic antibiotic treatment for *Chlamydia trachomatis*, a bacterium that "causes roughly 128 million sexually transmitted infections globally each year." And, in light of "concerns of antibiotic resistance," Zane's research also sought to assess whether "CT vaccination a cost-effective prevention strategy compared to current screen-and-treat practices in the United States[.]" "To answer these questions," the NIH

grant funded research into “the frequency and factors associated with antibiotic use among” men who have sex with men to “predict the 50-year impact of national rollout of a theoretical vaccine.”

41. But yet again, the termination letter declared that this research—which was approved just eight months ago—“no longer effectuates agency priorities.” According to the letter, “[i]t is the policy of NIH not to prioritize research activities that focuses [on] gaining scientific knowledge on why individuals are hesitant to be vaccinated and/or explore ways to improve vaccine interest and commitment.” NIH otherwise offered no explanation for this about-face.

42. In addition to these outright terminations, I am also aware of at least two instances (so far) in which a UW researcher lost funding because of NIH’s new decision to no longer fund Diversity Supplements. Diversity Supplements are workforce development grants meant to increase diversity in the scientific profession by providing training, mentorship and career development opportunities to individuals from underrepresented populations.²

43. However, my understanding is that NIH has recently decided to cancel NOFOs for Diversity Supplements, meaning that researchers who have applied for, and in many cases, already received funding under a Diversity Supplement are now getting their funding pulled.

44. In one case, a research scientist at Seattle Children’s Hospital was awarded a \$177,553 diversity supplement grant to support a study on lupus aimed at developing new targeted therapies for the treatment of lupus. However, on January 28, NIH sent an email cancelling the researcher’s grant with no explanation.

² NIH has defined diversity broadly, to include not only “[i]ndividuals from racial and ethnic groups that have been shown by the NSF to be underrepresented in health-related sciences on a national basis,” but also “[i]ndividuals with disabilities,” and “[i]ndividuals from disadvantaged backgrounds,” including those who have experienced homelessness, who were in foster care, who experienced poverty, or who are from rural areas. <https://grants.nih.gov/grants/guide/pa-files/pa-20-222.html>.

45. In another case, a UW postdoctoral fellow lost their funding because a diversity NOFO was cancelled. This postdoctoral fellow had received funding under a K99 grant, which help post-docs transition to faculty roles. The K99 phase funds 1-2 years of postdoc, and then, if the researcher gets a faculty job, they receive 3 years of R00 funding at the institution where their faculty job is located (often a different institution). This researcher had received a \$132,381 K99, funded in response to a Diversity NOFO, to study the impact of air pollution on Alzheimer's disease and related dementias. However, when UW submitted the researcher's R00 transition application, it was rejected by NIH within a few hours. The email rejecting the application said, merely: "Because your application was in response to a Diversity NOFO that has been expired and is no longer a priority to the NIH, we will not be able to award the R00 phase of this grant."

46. In other words, this researcher had her funding cut off mid-stream not because of anything she had done or failed to do but because she had applied for a grant through a previously approved funding mechanism designed to increase participation of diverse individuals in research careers.

Impact on Institutional Operations

47. The failure of NIH to communicate deviation from the normal funding application cycle for reviews and approval of funding means that research team which often plan grant applications years in advance to maintain necessary funding to support their research teams are left without consistent funding and in some cases are needing to furlough or layoff research team members.

48. We have paused some new hires whose research programs depend on timely NIH awards to conserve funding to allow us to support research staff that would normally be funded on NIH grants. This includes several faculty searches that were underway for the 2024–2025

academic year, which had already been advertised and in some cases multiple candidates had already been interviewed on campus.

49. UW has also been forced to cut admissions to graduate programs across the University. Depending on the department, the cutbacks in admissions have ranged between 25 and 50%.

50. Moreover, the terminations, delays, and unprecedented disruptions in funding have had a profoundly negative effect on morale University wide. Faculty and staff don't know if their funding will be cut, if their research will be terminated, whether they will be able to attend conference, or even whether they will continue to have jobs. The stress of these funding disruptions is palpable, and even if I cannot measure it, I am certain it has negatively affected our mission as a University. Research staff that are stressed about losing their jobs on a daily basis are not able to focus their full creative energy on innovation and discovery.

Irreparable Harm

51. The delays have disrupted ongoing research, as well as setting back UW for research going forward. Funding gaps have forced researchers to abandon studies, miss deadlines, or lose key personnel. This is in spite of the interim measures being taken by UW to keep certain research going. UW has had to make decisions about which of these valuable programs to continue with these limited funds.

52. Some of these studies involve clinical trials for life-saving medications or procedures, and their closure would endanger the lives of patients. The Department of Neurology has had to provide interim funding to ensure patient safety in a clinical trial of sleep apnea treatment for stroke patients. Department of Medicine was not able to enroll any patients in a clinical trial for HIV patients.

53. At bottom, NIH's actions have fundamentally undermined UW's mission to pursue scientific research. In many cases, there is no way to recover the lost time, research continuity, or training value once disrupted.

I declare under penalty of perjury of the laws of the United States that the foregoing is true and correct.

Executed this 1st day of April 2025, in Seattle, Washington.

A handwritten signature in black ink, reading "Mari Ostendorf". The signature is written in a cursive, flowing style.

MARI OSTENDORF
Vice Provost of Research
University of Washington

Exhibit A



FW: Grant Termination Notification | A160406 [5UG4LM013725-04]

From Office Of Sponsored Programs <osp@uw.edu>

Date Fri 3/21/2025 3:22 PM

To Carol Rhodes <carhodes@uw.edu>

Cc Jenny Muilenburg <jmuil@uw.edu>

Hi Carol,

MOD47947 was created for this, assigned to you and is in OSP Setup status.

Best,

Dianna

From: Michael Snow <mi_esnow@uw.edu>

Sent: Friday, March 21, 2025 10:41 AM

To: Office Of Sponsored Programs <osp@uw.edu>

Cc: Ariadna A. Santander <limus@uw.edu> Amanda C Snyder <acs229@uw.edu> Josy S Combs <combsj3@uw.edu>

Subject: FW: Grant Termination Notification A1 040 5UG4LM013725-04

Hi Dianna,

Another NIH termination letter, please set this up as a MOD to AWD-005078. I believe there are subawards.

Thanks,
Mike

MICHAEL SNOW / Manager, Proposals and Awards Team Gold , Office of Sponsored Programs / 206.221.0553

From: Jonathan N. Geraghty <geraghti@uw.edu>

Sent: Friday, March 21, 2025 10:30 AM

To: Ariadna A. Santander <limus@uw.edu> Michael Snow <mi_esnow@uw.edu>

Subject: FW: Grant Termination Notification A1 040 5UG4LM013725-04

Hi Ari / Mike:

I must have received this because I was listed as AOR at some point.

A1 040 5UG4LM013725-04

Let me know how I should proceed.

Jon

OSP contacts: <https://www.washington.edu/research/contact-us/>

Jonathan Geraghty Compliance Analyst UW Office of Sponsored Programs 206-548-8542 geraghti@uw.edu

From: Bulls, Michelle G. NIH/OD E <michelle.bulls@nih.gov>

Sent: Friday, March 21, 2025 9:30 AM

To: Jonathan N. Geraghty <geraghti@uw.edu>

Subject: Grant Termination Notification



National Institutes of Health
Office of Extramural Research

3/21/2025

Jonathan Nicklen Geraghty
University Of Washington
geraghti@uw.edu

Dear Jonathan Nicklen Geraghty:

Effective with the date of this letter, funding for Project Number 5UG4LM013725-04 is hereby terminated pursuant to the Fiscal Year 2024 National Institutes of Health (NIH) Grants Policy Statement, ^[1] and 2 C.F.R. § 200.340(a)(2). This letter constitutes a notice of termination. ^[2]

The 2024 Policy Statement applies to your project because NIH approved your grant on 5/1/2024, and obligations generally should be determined by reference to the law in effect when the grants were made. ^[3]

The 2024 Policy Statement includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards. ^[4] According to the Policy Statement, NIH may terminate the grant in whole or in part as outlined in 2 CFR Part 200.340. ^[5] At the time your grant was issued, 2 C.F.R. § 200.340(a)(2) permitted termination [b]y the Federal awarding agency or pass-through entity, to the greatest extent authorized by law, if an award no longer effectuates the program goals or agency priorities.

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Although NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination decision, ^[6] no corrective action is possible here. The premise of this award is incompatible with

agency priorities, and no modification of the project could align the project with agency priorities.

Costs resulting from financial obligations incurred after termination are not allowable.^[7] Nothing in this notice excuses either NIH or you from complying with the closeout obligations imposed by 2 C.F.R. §§ 75.381-75.390. NIH will provide any information required by the Federal Funding Accountability and Transparency Act or the Office of Management and Budget's regulations to

d

Administrative Appeal

You may object and provide information and documentation challenging this termination.^[9] NIH has established a first-level grant appeal procedure that must be exhausted before you may file an appeal with the Departmental Appeals Board.^[10]

You must submit a request for such review to Dr. Matt Memoli no later than 30 days after the written notification of the determination is received, except that if you show good cause why an extension of time should be granted, Dr. Memoli may grant an extension of time.^[11]

The request for review must include a copy of the adverse determination, must identify the issue(s) in dispute, and must contain a full statement of your position with respect to such issue(s) and the pertinent facts and reasons in support of your position. In addition to the required written statement, you shall provide copies of any documents supporting your claim.^[12]

Sincerely,

Michelle G. Bulls -S Digitally signed
by Michelle G.
Bulls -S

Michelle G. Bulls, on behalf of Andrea Culhane, Chief Grants Management Officer, NLM
Director, Office of Policy for Extramural Research Administration
Office of Extramural Research

¹ <https://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>.

² 2 C.F.R. 200.341 a 45 C.F.R. 75.373

³ *Bennett v. New Jersey*, 470 U.S. 32, 38 1985 .

⁴ NIH Grants Policy Statement at IIA-1.

5 *Id.* at IIA-155.

6 NIH Grants Policy Statement at IIA-15 .

7 See 2 C.F.R. 200.343 2024 .

8 2 C.F.R. 200.341 c 45 C.F.R. 75.373 c

9 See 45 C.F.R. 75.374.

10 See 42 C.F.R. Part 50, Subpart D

11 11 *Id.* 50.40 a

12 12 *Id.* 50.40 b

Exhibit B

Emily R Dworkin

From: Office Of Sponsored Programs <osp@uw.edu>
Sent: Friday, March 21, 2025 3:01 PM
To: Carol Rhodes
Cc: Emily R Dworkin
Subject: FW: Grant Termination Notification

Categories: Blue

Hello Carol,

MOD47944 has been created for this, assigned to you and is in "OSP Setup".

Best,

Dianna

From: Bulls, Michelle G. (NIH/OD) [E] <michelle.bulls@nih.gov>
Sent: Friday, March 21, 2025 9:30 AM
To: Office Of Sponsored Programs <osp@uw.edu>
Subject: Grant Termination Notification



National Institutes of Health
Office of Extramural Research

3/21/2025

Rhodes, Carol
University Of Washington
osp@uw.edu

Dear Rhodes, Carol:

Effective with the date of this letter, funding for Project Number 5R01MD017573-03 is hereby terminated pursuant to the Fiscal Year 2025 National Institutes of Health ("NIH") Grants Policy Statement,^[1] and 2 C.F.R. § 200.340(a)(2). This letter constitutes a notice of termination.^[2]

The 2025 Policy Statement applies to your project because NIH approved your grant on 12/1/2024, and "obligations generally should be determined by reference to the law in effect when the grants were made."^[3]

The 2025 Policy Statement "includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards."^[4] According to the Policy Statement, "NIH may ... terminate the grant in whole or in part as outlined in 2 CFR Part 200.340."^[5] At the

time your grant was issued, 2 C.F.R. § 200.340(a)(2) permitted termination “[b]y the Federal awarding agency or pass-through entity, to the greatest extent authorized by law, if an award no longer effectuates the program goals or agency priorities.”

This award no longer effectuates agency priorities. Research programs based primarily on artificial and non-scientific categories, including amorphous equity objectives, are antithetical to the scientific inquiry, do nothing to expand our knowledge of living systems, provide low returns on investment, and ultimately do not enhance health, lengthen life, or reduce illness. Worse, so-called diversity, equity, and inclusion (“DEI”) studies are often used to support unlawful discrimination on the basis of race and other protected characteristics, which harms the health of Americans. Therefore, it is the policy of NIH not to prioritize such research programs.

Although “NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination decision,”^[6] no corrective action is possible here. The premise of this award is incompatible with agency priorities, and no modification of the project could align the project with agency priorities.

Costs resulting from financial obligations incurred after termination are not allowable.^[7] Nothing in this notice excuses either NIH or you from complying with the closeout obligations imposed by 2 C.F.R. §§ 75.381-75.390. NIH will provide any information required by the Federal Funding Accountability and Transparency Act or the Office of Management and Budget’s regulations to *USAspending.gov*.^[8]

Administrative Appeal

You may object and provide information and documentation challenging this termination.^[9] NIH has established a first-level grant appeal procedure that must be exhausted before you may file an appeal with the Departmental Appeals Board.^[10]

You must submit a request for such review to Dr. Matt Memoli no later than 30 days after the written notification of the determination is received, except that if you show good cause why an extension of time should be granted, Dr. Memoli may grant an extension of time.^[11]

The request for review must include a copy of the adverse determination, must identify the issue(s) in dispute, and must contain a full statement of your position with respect to such issue(s) and the pertinent facts and reasons in support of your position. In addition to the required written statement, you shall provide copies of any documents supporting your claim.^[12]

Sincerely,

Michelle G. Bulls -S
Digitally signed
by Michelle G.
Bulls -S

Michelle G. Bulls, on behalf of Priscilla Grant, Chief Grants Management Officer, NIMHD
Director, Office of Policy for Extramural Research Administration
Office of Extramural Research

^[1] <https://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>.

^[2] 2 C.F.R. § 200.341(a); 45 C.F.R. § 75.373

^[3] *Bennett v. New Jersey*, 470 U.S. 632, 638 (1985).

^[4] NIH Grants Policy Statement at IIA-1.

^[5] *Id.* at IIA-155.

^[6] NIH Grants Policy Statement at IIA-156.

^[7] See 2 C.F.R. § 200.343 (2024).

^[8] 2 C.F.R. § 200.341(c); 45 C.F.R. § 75.373(c)

^[9] See 45 C.F.R. § 75.374.

^[10] See 42 C.F.R. Part 50, Subpart D

^[11] 11 *Id.* § 50.406(a)

^[12] 12 *Id.* § 50.406(b)

Exhibit C



National Institutes of Health
Office of Extramural Research

March 18, 2025

Carol Rhodes
University of Washington
osp uw.edu

Dear Carol Rhodes:

Effective with the date of this letter, funding for Project Number 1F31 AI181431-01A1 is hereby terminated pursuant to the Fiscal Year 2024 National Institutes of Health (NIH) Grants Policy Statement,¹ and 2 C.F.R. § 200.340(a)(2). This letter constitutes a notice of termination.²

The 2024 Policy Statement applies to your project because NIH approved your grant on 08/16/2024, and obligations generally should be determined by reference to the law in effect when the grants were made.³

The 2024 Policy Statement includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards.⁴ According to the Policy Statement, NIH may terminate the grant in whole or in part as outlined in 2 CFR Part 200.340.⁵ At the time your grant was issued, 2 C.F.R. § 200.340(a)(2) permitted termination [b]y the Federal awarding agency or pass-through entity, to the greatest extent authorized by law, if an award no longer effectuates the program goals or agency priorities.

This award no longer effectuates agency priorities. It is the policy of NIH not to prioritize research activities that focuses gaining scientific knowledge on why individuals are hesitant to be vaccinated and/or explore ways to improve vaccine interest and commitment. NIH is obligated to carefully steward grant awards to ensure taxpayer dollars are used in ways that benefit the American people and improve their quality of life. Your project does not satisfy these criteria.

Although NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination decision,⁶ no corrective action is possible here. The premise of this award is incompatible with

¹ <https://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>.

² 2 C.F.R. § 200.341(a); 45 C.F.R. § 75.373

³ *Bennett v. New Jersey*, 470 U.S. 632, 638 (1985).

⁴ 2024 Policy Statement at IIA-1.

⁵ *Id.* at IIA-155.

⁶ 2024 Policy Statement at IIA-156.

agency priorities, and no modification of the project could align the project with agency priorities.

Costs resulting from financial obligations incurred after termination are not allowable.⁷ Nothing in this notice excuses either NIH or you from complying with the closeout obligations imposed by 2 C.F.R. §§ 75.381-75.390. NIH will provide any information required by the Federal Funding Accountability and Transparency Act or the Office of Management and Budget's regulations to _____ d

Administrative Appeal

You may object and provide information and documentation challenging this termination.⁹ NIH has established a first-level grant appeal procedure that must be exhausted before you may file an appeal with the Departmental Appeals Board.¹⁰

You must submit a request for such review to Dr. Matt Memoli no later than 30 days after the written notification of the determination is received, except that if you show good cause why an extension of time should be granted, Dr. Memoli may grant an extension of time.¹¹

The request for review must include a copy of the adverse determination, must identify the issue(s) in dispute, and must contain a full statement of your position with respect to such issue(s) and the pertinent facts and reasons in support of your position. In addition to the required written statement, you shall provide copies of any documents supporting your claim.¹²

Sincerely,

Michelle

G. Bulls -S

Digitally signed by
Michelle G. Bulls -S
Date: 2025.03.18
09:26:19 -04'00'

Michelle G. Bulls, on behalf Emily Linde, Chief Grants Management Officer, National Institute of Allergy and Infectious Diseases
Director, Office of Policy for Extramural Research Administration
Office of Extramural Research

⁷ See 2 C.F.R. § 200.343 (2024).

⁸ 2 C.F.R. § 200.341(c); 45 C.F.R. § 75.373(c)

⁹ See 45 C.F.R. § 75.374.

¹⁰ See 42 C.F.R. Part 50, Subpart D

¹¹ 11 *Id.* § 50.406(a)

¹² 12 *Id.* § 50.406(b)

Exhibit D



National Institutes of Health
Office of Extramural Research

03/20/2025

Lester Warnac Villaflor
UNIVERSITY OF WASHINGTON
gcsfund uw.edu

Dear Lester Warnac Villaflor:

Effective with the date of this letter, funding for Project Number 5R01LM013301-05 is hereby terminated pursuant to the Fiscal Year 2024 National Institutes of Health (NIH) Grants Policy Statement,¹ and 2 C.F.R. § 200.340(a)(2). This letter constitutes a notice of termination.²

The 2024 Policy Statement applies to your project because NIH approved your grant on 08/01/2023, and obligations generally should be determined by reference to the law in effect when the grants were made.³

The 2024 Policy Statement includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards.⁴ According to the Policy Statement, NIH may terminate the grant in whole or in part as outlined in 2 CFR Part 200.340.⁵ At the time your grant was issued, 2 C.F.R. § 200.340(a)(2) permitted termination [b]y the Federal awarding agency or pass-through entity, to the greatest extent authorized by law, if an award no longer effectuates the program goals or agency priorities.

This award no longer effectuates agency priorities. Research programs based primarily on artificial and non-scientific categories, including amorphous equity objectives, are antithetical to the scientific inquiry, do nothing to expand our knowledge of living systems, provide low returns on investment, and ultimately do not enhance health, lengthen life, or reduce illness. Worse, so-called diversity, equity, and inclusion (DEI) studies are often used to support unlawful discrimination on the basis of race and other protected characteristics, which harms the health of Americans. Therefore, it is the policy of NIH not to prioritize such research programs. Although NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient

¹ <https://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>.

² 2 C.F.R. § 200.341(a); 45 C.F.R. § 75.373

³ *Bennett v. New Jersey*, 470 U.S. 632, 638 (1985).

⁴ 2024 Policy Statement at IIA-1.

⁵ *Id.* at IIA-155.

an opportunity to take appropriate corrective action before NIH makes a termination decision,⁶ no corrective action is possible here. The premise of this award is incompatible with agency priorities, and no modification of the project could align the project with agency priorities.

Costs resulting from financial obligations incurred after termination are not allowable.⁷ Nothing in this notice excuses either NIH or you from complying with the closeout obligations imposed by 2 C.F.R. §§ 75.381-75.390. NIH will provide any information required by the Federal Funding Accountability and Transparency Act or the Office of Management and Budget's regulations to *USAspending.gov*.⁸

Administrative Appeal

You may object and provide information and documentation challenging this termination.⁹ NIH has established a first-level grant appeal procedure that must be exhausted before you may file an appeal with the Departmental Appeals Board.¹⁰

You must submit a request for such review to Dr. Matt Memoli no later than 30 days after the written notification of the determination is received, except that if you show good cause why an extension of time should be granted, Dr. Memoli may grant an extension of time.¹¹

The request for review must include a copy of the adverse determination, must identify the issue(s) in dispute, and must contain a full statement of your position with respect to such issue(s) and the pertinent facts and reasons in support of your position. In addition to the required written statement, you shall provide copies of any documents supporting your claim.¹²

Sincerely,

**Michelle G.
Bulls -S**

Digitally signed by Michelle
G. Bulls -S
Date: 2025.03.20 16:19:56
-04'00'

Michelle G. Bulls, on behalf of Andrea Culhane, Chief Grants Management Officer,
National Library of Medicine
Director, Office of Policy for Extramural Research Administration
Office of Extramural Research

⁶ 2024 Policy Statement at IIA-156.

⁷ See 2 C.F.R. § 200.343 (2024).

⁸ 2 C.F.R. § 200.341(c); 45 C.F.R. § 75.373(c)

⁹ See 45 C.F.R. § 75.374.

¹⁰ See 42 C.F.R. Part 50, Subpart D

¹¹ 11 *Id.* § 50.406(a)

¹² 12 *Id.* § 50.406(b)

Exhibit E



National Institutes of Health
Office of Extramural Research

March 12, 2025

Carole Rhodes
University of Washington
carhodes uw.edu

Dear Carol Rhodes :

Funding for Project Number 1G13LM014426-01 is hereby terminated pursuant to the 2024 National Institutes of Health (NIH) Grants Policy Statement,¹ and 2 C.F.R. § 200.340(a)(2). This letter constitutes a notice of termination.²

The 2024 Policy Statement applies to your project because NIH approved your grant on August 15, 2024, and obligations generally should be determined by reference to the law in effect when the grants were made. ³

The 2024 Policy Statement includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards.⁴ According to the Policy Statement, NIH may terminate the grant in whole or in part as outlined in 2 CFR Part 200.340.⁵ At the time your grant was issued, 2 C.F.R. § 200.340(a)(2) permitted termination [b]y the Federal awarding agency or pass-through entity, to the greatest extent authorized by law, if an award no longer effectuates the program goals or agency priorities.

This award no longer effectuates agency priorities. Research programs based primarily on artificial and non-scientific categories, including amorphous equity objectives, are antithetical to the scientific inquiry, do nothing to expand our knowledge of living systems, provide low returns on investment, and ultimately do not enhance health, lengthen life, or reduce illness. Worse, so-called diversity, equity, and inclusion (DEI) studies are often used to support unlawful discrimination on the basis of race and other protected characteristics, which harms the health of Americans. Therefore, it is the policy of NIH not to prioritize such research programs.

Although NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination

¹ <https://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>.

² 2 C.F.R. § 200.341(a); 45 C.F.R. § 75.373

³ *Bennett v. New Jersey*, 470 U.S. 632, 638 (1985).

⁴ 2024 Policy Statement at IIA-1.

⁵ *Id.* at IIA-155.

decision,⁶ no corrective action is possible here. The premise of this award is incompatible with agency priorities, and no modification of the project could align the project with agency priorities.

Costs resulting from financial obligations incurred after termination are not allowable.⁷ Nothing in this notice excuses either NIH or you from complying with the closeout obligations imposed by 2 C.F.R. §§ 75.381-75.390. NIH will provide any information required by the Federal Funding Accountability and Transparency Act or the Office of Management and Budget's regulations to *USAspending.gov*.⁸

Administrative Appeal

You may object and provide information and documentation challenging this termination.⁹ NIH has established a first-level grant appeal procedure that must be exhausted before you may file an appeal with the Departmental Appeals Board.¹⁰

You must submit a request for such review to Dr. Matt Memoli no later than 30 days after the written notification of the determination is received, except that if you show good cause why an extension of time should be granted, Dr. Memoli may grant an extension of time.¹¹

The request for review must include a copy of the adverse determination, must identify the issue(s) in dispute, and must contain a full statement of your position with respect to such issue(s) and the pertinent facts and reasons in support of your position. In addition to the required written statement, you shall provide copies of any documents supporting your claim.¹²

Sincerely,

Michelle G.
Bulls -S

Digitally signed by
Michelle G. Bulls -S
Date: 2025.03.12 23:15:18
-04'00'

Michelle G. Bulls, on behalf Andrea Culhane, Chief Grants Management Officer, NLM
Director, Office of Policy for Extramural Research Administration
Office of Extramural Research

⁶ 2024 Policy Statement at IIA-156.

⁷ See 2 C.F.R. § 200.343 (2024).

⁸ 2 C.F.R. § 200.341(c); 45 C.F.R. § 75.373(c)

⁹ See 45 C.F.R. § 75.374.

¹⁰ See 42 C.F.R. Part 50, Subpart D

¹¹ 11 *Id.* § 50.406(a)

¹² 12 *Id.* § 50.406(b)

Exhibit F