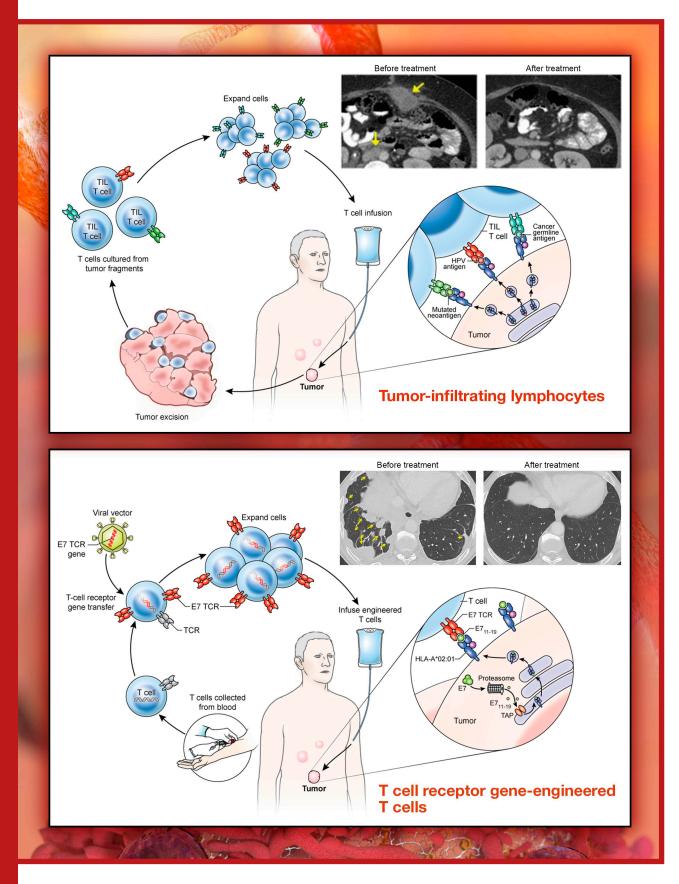
Division of Extramural Activities Annual Report 2018



T-Cell Receptor Gene Therapy for Epithelial Cancers

T-cell receptor (TCR) gene therapy is an emerging class of cancer treatment that is based on the infusion of autologous T cells genetically engineered to express a tumor antigen-targeting TCR. This treatment strategy permits high-avidity T cell-targeting of a defined tumor antigen with numerous T cells. It also permits targeting of the full range of cell membrane and intracellular antigens—in contrast with antibodies and chimeric antigen receptor T cells (CAR-Ts), which can only target cell membrane antigens. Finally, the extracorporeal generation of therapeutic T cells enables host conditioning to improve engraftment and function of the infused T cells.

The first clinical trial to demonstrate that a single infusion of therapeutic T cells could mediate durable, complete regression of (i.e., apparently cure) a metastatic epithelial cancer involved treatment of human papillomavirus (HPV)-associated cervical cancer with tumor-infiltrating lymphocytes (TILs; T cells grown *ex vivo* from a resected tumor deposit; top panel of the figure).² Tumor responses occurred in three of nine patients, and two were durable, complete responses (i.e., the patients appeared to be cured). In an expansion of this treatment, patients with HPV-associated oropharyngeal cancer and anal cancer also showed tumor responses.³ This novel type of cancer treatment is now being developed by Iovance Biotherapeutics.

A study of patients whose metastatic cervical cancer appeared to be cured by TIL therapy revealed therapeutic T-cell targeting of diverse tumor antigens, including HPV oncoproteins, a cancer germline antigen, and "private" neoantigens.⁴ HPV oncoproteins and cancer germline antigens are shared between the tumors of different patients and inconsistently targeted by TILs. However, they can be consistently targeted by TCR-engineered T cells (TCR-Ts; bottom panel of the figure). One cancer germline antigen, Kita-Kyushu lung cancer antigen 1 (KK-LC-1), was highly targeted by a TCR from the TILs of a patient with cervical cancer who appeared to be cured by TIL therapy. TCR-Ts expressing this TCR show targeting of diverse types of cancer that express KK-LC-1.⁴ Similarly, TCR-Ts expressing TCRs against the E6 or E7 HPV oncoproteins can target diverse types of HPV16-associated cancer.^{5,6}

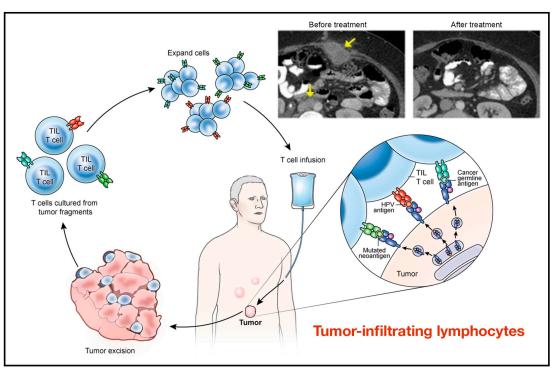
Recent clinical trials have demonstrated proof of principle that TCR-Ts can mediate regression of epithelial cancers in humans. A clinical trial of HPV16 E6-targeting TCR-Ts (E6 TCR-T cells) showed tumor responses in some patients and identified antigen processing and presentation defects in tumors that did not respond to treatment, thereby suggesting possible mechanisms of treatment resistance. Subsequently, a TCR that targets HPV16 E7 was identified; T cells expressing this TCR (E7 TCR T cells) displayed higher avidity targeting of HPV-associated tumors than E6 TCR T cells. A phase I clinical trial of E7 TCR T cells for metastatic HPV-associated cancers showed no targeting of healthy tissues, and cell dose was not limited by toxicity. Tumor responses occurred in 6/12 patients and included marked regression of extensive disease. This treatment is now being developed by Kite, a Gilead company.

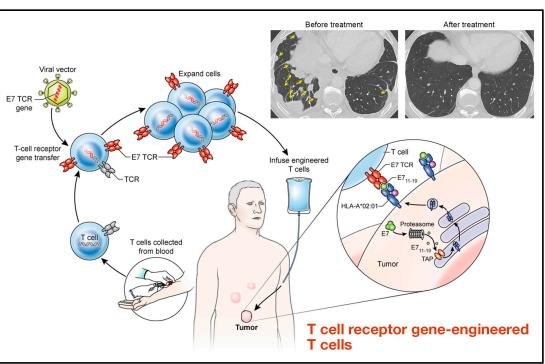
These findings lay the foundation for the development of cellular therapy for a wide range of epithelial cancers. Ongoing work is focused on the discovery of new TCRs to extend this class of treatment to new types of cancer, and also is seeking to discover new technologies to enhance the efficacy of the therapeutic T cells. Finally, new research is defining the tumor-intrinsic molecular defects that may contribute to treatment resistance, work that is important to delineate and overcome tumor resistance to achieve more effective treatments.

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Division of Extramural Activities Annual Report 2018





Images and narrative are the courtesy of Dr. Christian Hinrichs, Lasker Clinical Research Scholar, Experimental Transplantation and Immunology Branch, Center for Cancer Research, NCI.

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Introduction



The Division of Extramural Activities (DEA) is the organizational component of the National Cancer Institute (NCI) responsible for coordinating the scientific peer review of extramural research proposed before funding and for conducting system-

atic surveillance of that research after funding. A major responsibility of the DEA is the solicitation of advice from individuals and/or committees of experts on the technical and scientific merit of grants, cooperative agreements, and contracts. The peer review process is critically important to science in that it allows good ideas to surface and to be evaluated based on their merit and promise of the proposed research effort. This system is the keystone for ensuring that the best science is supported.

The DEA coordinates the activities of: (1) the National Cancer Advisory Board (NCAB), which consists of members appointed by the U.S. President, conducts the second-level review of grants and cooperative agreements, and advises the NCI Director on policy for the conduct of the National Cancer Program; (2) the Board of Scientific Advisors (BSA), which is composed of distinguished scientists from outside the NCI and representatives from the advocacy community who advise the NCI leadership on the progress and future direction of the NCI extramural program, evaluates NCI extramural programs and reviews NCI-initiated research concepts; (3) the Frederick National Laboratory Advisory Committee (FNLAC), which reviews the state of research at the Frederick National Laboratory for Cancer Research (FNLCR); and (4) extramural training opportunities for NCI Program and Review staff.

The DEA evaluates the content of all extramural research funded by the NCI and annually tracks the NCI research portfolio of more than 9,000 research and training awards by: using consistent budget-linked scientific information to

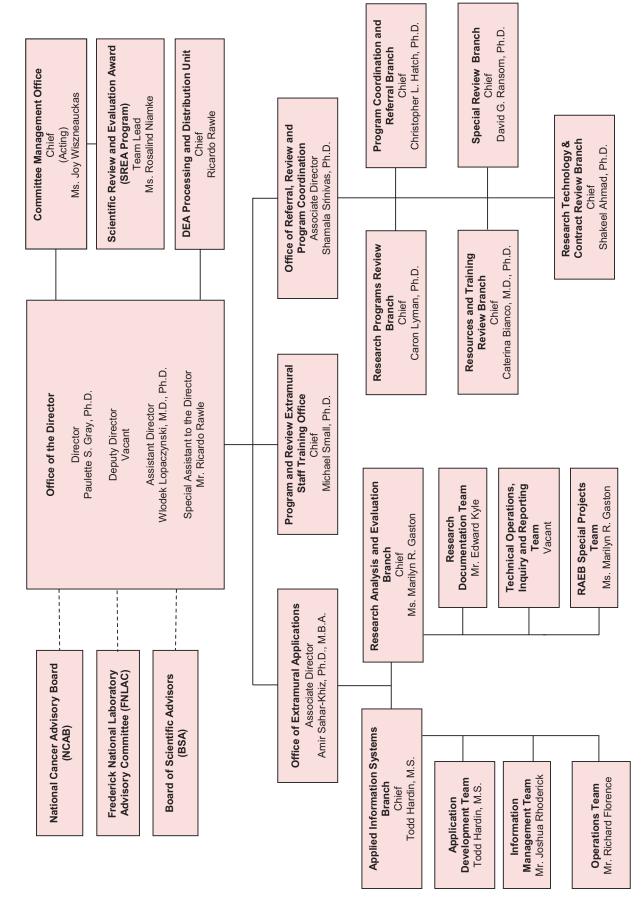
provide a basis for budget projections; maintaining extensive records of this research; providing specialized analyses of the costs, goals, and accomplishments of the research; and serving as an NCI resource to others for reporting and dissemination of the NCI's research portfolio. The DEA monitors budgetary limitations for grant applications; participates in establishing policies to expedite funding; and initiates and implements changes to applications, guidelines, and award processes. Additionally, the Division coordinates the review and response to appeals from applicants regarding the peer review process or the subsequent disposition and management of grants, cooperative agreements, and contracts. It also responds to and coordinates requests from the NIH Office of Extramural Research's Agency Extramural Research Integrity Officer (RIO) for information and assistance regarding scientists (or institutions) supported by NCI research funds who were the subject of allegations, inquiries, and/or investigations of possible research misconduct.

The intent of this annual report is to provide insight and useful information about the role of the DEA in support of NCI's mission and the research funding process. A comprehensive look at each of the major areas of responsibility within the Division is provided. The data presented cover Fiscal Year (FY) 2018 (1 October 2017 – 30 September 2018) and provide data comparison with previous years.

To implement a biomedical research program of the highest quality, the NCI draws on the national pool of scientists actively engaged in research for assistance in selecting the best research and training projects. A sincere thanks to the more than 2,500 researchers, clinicians, and advocates who gave unselfishly of their time in FY2018. Their contribution to the continuing success of NCI's peer review and advisory activities is most appreciated.

Paulette S. Gray, Ph.D.
Director
Division of Extramural Activities

Division of Extramural Activities



Overview of the Division of Extramural Activities

The paramount goal of the National Cancer Institute (NCI) is to develop the knowledge base that will ultimately lessen the impact of cancer. Among the most important contributors to this base are the outstanding extramurally funded scientists supported by the NCI through grants, contracts, and cooperative agreements. The DEA was established within the NCI to provide the Institute and the scientific community with expert scientific review of the merits of extramural research. An important function of the DEA's mission is to manage and coordinate: the second level grant review by the National Cancer Advisory Board (NCAB); concept review of new and reissue requests for applications (RFAs), research and development (R&D) requests for proposals (RFPs), and program announcements with special receipt (PARs), referral, or review considerations by the Board of Scientific Advisors (BSA); and coordination of activities of the Frederick National Laboratory Advisory Committee (FNLAC), which reviews the state of research at the Frederick National Laboratory for Cancer Research (FNLCR).

The Committee Management Office (CMO) provides oversight of all NCI-chartered advisory boards and committees, subcommittees, working groups, task forces, and review groups. The CMO also serves as an NIH service center for the National Institutes of Health (NIH) Advisory Committee to the Director (ACD), Council of Councils (CoC), Advisory Committee on Research on Women's Health (ACRWH), and the National Institute on Alcohol Abuse and Alcoholism (NIAAA). The CMO provides policy guidance and assistance to ensure that the NCI and client HHS/NIH Institutes, Centers, and Offices operate within the appropriate Federal Advisory Committee Act (FACA), the Government in Sunshine Act, and various other policies, procedures, and guidelines.

The Office of Referral, Review, and Program Coordination (ORRPC), which consists of four review branches and a program coordination and referral branch, provides: coordination of development and issuance of NCI program initiatives; execution of grant receipt and referral; and management of NCI peer review activities. Review activities

include the organization and management of peer review for all applications and proposals received in response to RFAs, PAs, PARs, multi-component grant and cooperative agreement initiatives, and R&D requests for proposals. The program coordination responsibilities of the DEA, in cooperation with NCI extramural program Divisions, Offices, and Centers (DOCs), extend to the development of all new extramural program guidelines and funding opportunity announcements (FOAs).

Another program coordination activity is the development and maintenance of referral guidelines for assignment of grant applications to the NCI. These guidelines, included in the *Referral Guidelines for Funding Components of PHS*, are critical to the development of program initiatives across the NIH, as well as the prompt referral of unsolicited grant applications to the NCI. These guidelines differ from the NCI Internal Referral Guidelines, which are vital to the prompt referral of grant applications to the appropriate NCI programmatic areas.

The Research Analysis and Evaluation Branch (RAEB) works closely with the NCI Office of Budget and Finance (OBF) to provide budget-linked portfolio data from NCI grants, cooperative agreements, and contracts. In doing so, the NCI has the capability of responding expeditiously to congressional and other inquiries. The RAEB has historical budget-linked portfolio data that go back to the 1930s.

The DEA conducts continual evaluation of program initiatives and coordinates policies and procedures to ensure adherence by NCI staff, advisory groups, and applicants. The DEA Office of Extramural Applications (OEA), through the Applied Information Systems Branch (AISB), maintains a Web-based information system to provide key information on new initiatives. This system includes information on approved concepts, listings of active PARs, recently published RFAs, and policies related to the clearance of new program initiatives. As such, information is accessible to the public at https://deainfo.nci.nih.gov/funding.htm and to staff via NCI limited access Intranet sites.

Special Activities in the Office of the Director, DEA

In addition to managing and coordinating the extramural operations described in this report, the DEA Office of the Director (OD) is a focal point and repository of information and policies related to various funding mechanisms for NIH grants, staff and awardee responsibilities, eligibility requirements, receipt dates for all granting mechanisms, and special programs. Also, the DEA OD ensures that the NCI meets the congressional mandate to promote increased participation of women, children, and members of minority and medically underserved populations in the research areas of cancer cause, prevention, control, diagnosis, and treatment. The NIH Revitalization Act of 1993 mandates that women and members of minority groups be included as subjects in each research project, unless there are clear scientific or ethical reasons that inclusion is inappropriate with respect to the health of the subject or the purpose of the research. In 1998, an NIH inclusion policy was implemented requiring applicants and grantees to include children (as defined as an individual less than 18 years of age) in clinical research, unless there is strong justification for their exclusion. Administrative procedures allow NCI staff to resolve inclusion problems after initial review of grant applications that are otherwise highly meritorious. In the event an applicant believes the proposed study does not warrant or require inclusion of women, children, or persons from minority or medically underserved population groups, he or she can apply for a waiver of this requirement. The DEA Director is the Appeals Officer for the NCI and has the authority to grant waivers. In FY2018, 17 applications with preliminary bars to award were received by the DEA. Through corrective action, working with the applicants and NCI program directors, all bars-to-award were brought into compliance before awards were made.

Additionally, the DEA Director serves as the locus for implementation and oversight of NCI policies concerning extramural research integrity and serves as a resource to all NCI staff with questions in this area. In this role, the DEA Director and designees work to address concerns about extramural research misconduct, misuse of human and animal research subjects, financial mismanagement, and financial conflict of interest involving NCI-supported research. The DEA Director functions as the NCI Research Integrity Officer (RIO) and receives from the appropriate sources all documents related to research misconduct for transmittal and reporting to relevant sources. In FY2018, 30 cases of alleged research misconduct involving NCI funding were opened and referred to the DEA Director, and they are under investigation by the Office of Research Integrity, HHS. Nine cases were closed, and one case was found to involve research misconduct.*

In addition, the *Standard Operating Practice Guide* for *DEA Scientific Review Officers* (SROs) was initiated in FY2018. The intent of this document is to guide SROs who manage the review of grant applications, cooperative agreements, and contracts. It is expected that the SOPs will ensure SRO uniformity in managing peer review.

Extramural Staff Training

Program and Review Extramural Staff Training Office (PRESTO)

The Program and Review Extramural Staff Training Office (PRESTO), which resides in the DEA OD, develops and coordinates the training of NCI Program, Review, and other extramural staff members. The mission of PRESTO is to increase the knowledge base of new and experienced staff members and optimize their effectiveness in supporting the goals of the NCI. To accomplish this mission, PRESTO: (1) designs and implements a broad-based curriculum for Program and Review staff; (2) provides training on specialized topics related to understanding of and compliance with NIH policies; (3) identifies and develops resources

^{*}Cases found to involve research misconduct are published in the Federal Register and DHHS Office of Research Integrity.

to facilitate individual learning and performance; and (4) tracks the participation of extramural staff in NIH- and NCI-sponsored training activities as well as continuously evaluates the efficacy of these activities.

During FY2018, PRESTO activities included:

- An Electronic Tools Workshop Series specifically designed for new Program Officials to enhance their knowledge and skills related to the use of various portfolio management and analysis applications, including the Query, View and Report (QVR) system, NCI FOA Report, and Greensheets.
- A Time Mastery workshop organized in collaboration with the NCI Office of Workforce Planning and Development (OWPD).
- PRESTO-sponsored training focused on administrative, scientific, and research resource topics, including Clinical Trials Stewardship, Vertebrate Animal Welfare, Technology Development and Commercialization, and Immuno-Oncology in the context of Precision Medicine.
- A half-day Project Management Seminar featuring project management professionals addressing various issues of interest to NCI extramural staff, including team building and conflict resolution.
- A monthly SRO Discussion Luncheon series to provide an opportunity for SROs to share

- best practices as well as inform them of recent policy and electronic system updates.
- Participation as faculty in the NCI Office of Grants Administration (OGA) "Intro to the Grants Lifecycle."

During FY2019, PRESTO will continue to offer a variety of training opportunities with focus on new and emerging topics of broad interest to NCI extramural staff. Various information technology tools will be employed to enhance the effectiveness of PRESTO-sponsored training activities. In addition, PRESTO will support the NCI Clinical Trials Stewardship Committee in developing and implementing training on new Standard Operating Procedures for post-award management of grants involving clinical trials.

DEA Processing and Distribution Unit (DPDU)

Established in 2014, the DEA Processing and Distribution Unit (DPDU) maintains DEA facilities and provides services to DEA staff, including the coordination, consolidation, and purchasing of supplies; tracking of expenditures; and preparation of meeting folders, advisory board and committee books, orientation documents, and the division's annual report. In conjunction with the establishment of this unit, the number of DEA Purchase Cards was reduced, minimizing the hoarding of office supplies with an overall reduction in dollar costs associated with their use.

Program Coordination: A Resource for New Funding Initiatives

The DEA performs critical functions in the development of new strategic funding initiatives at the NCI and in the coordination of their publication as Funding Opportunity Announcements (FOAs), which comprise both RFAs and PAs. Members of the Program Coordination and Referral Branch (PCRB) provide expert assistance to NCI Program staff to develop and publish new (or reissue) FOAs. PCRB staff members disseminate various operating policies and procedures pertaining to extramural funding programs. To maintain consistency and completeness, all new and reissued NCI FOAs and Notices are reviewed, edited as needed, and cleared through the DEA under PCRB coordination, before being forwarded to the NIH Office of Extramural Research (OER) for approval and publication in the NIH Guide for Grants and Contracts. In these steps, the PCRB staff members help to streamline and clarify FOA technical parameters and requirements as well as optimize accuracy, precision, and clarity of their presentation in proper format. The PCRB verifies consistency with NIHwide requirements, provides quality control, and coordinates timelines throughout the development and publication processes. Overall, these services ensure the high quality and timely availability of NCI's funding opportunities for cancer researchers as prospective applicants.

Tables 1a and 1b show the variety of RFAs issued by the NCI in FY2018 and Table 2 lists RFAs

issued by other NIH Institutes or Centers (ICs) that the NCI has joined as a participating partner. **Tables 3a** and **3b** show the variety of PAs/PARs issued by the NCI in FY2018, and **Table 4** lists PAs/PARs issued by other NIH ICs that the NCI has joined as a participating partner.

PCRB staff members continue to provide relevant information and timely updates to all NCI extramural staff members on activities and results related to the requirements for and uses of electronic grant applications. The Branch also serves as a direct source of guidance on this topic for program officials at the NCI and applicants in the extramural scientific community. The Referral Officers (ROs) in PCRB collaborated with NCI information technology staff members and their contractors to examine and improve the business systems used for grant application receipt and referral, which contributes to an improved efficiency of use by NCI staff members and quality of service for the NCI's grant applicants and awardees. In addition to performing their program coordination and referral responsibilities, PCRB Health Scientist Administrators also served as SROs in managing the reviews of 504 student loan repayment program (LRP) contract proposals as well as of 74 R13 conference grant applications and a variety of other proposals in FY2018.

Grant Referral: A First Point of Contact for NCI Grantees and Applications

In FY2018, a total of 16,236 grant and cooperative agreement applications were submitted to the NCI for funding with appropriated funds (see Figure 1 and Table 5). Applications and proposals encompassed 75 different types of award mechanisms (Appendix F), including investigator-initiated Research Project (R01), Career Development (K series), Research Program Project (P01), Cancer Center Support (P30), Specialized Program of Research Excellence (SPORE, P50), Small Research Project (R03), Exploratory/Developmental Project (R21), Exploratory/Developmental Phase II Project (R33), Research Specialist Award (R50), Small Business Technology Transfer (STTR) (R41/R42), Small Business Innovation Research (SBIR, R43/R44), and Cooperative Agreement (U-series) activity codes.

All applications seeking NIH support are initially submitted to the NIH Center for Scientific Review (CSR) Division of Receipt and Referral (DRR), which assigns each application to a specific NIH funding Institute or Center (IC) and the locus of review for the application, i.e., either to a CSR Study Section or within a specific IC. The ICs, in turn, have well-defined processes in place for the internal assignment and review of submitted applications. Upon receipt of applications from the CSR, the NCI Referral Officers: (1) assign all incoming applications to one of the 54 NCI extramural research program areas; (2) track program acceptance of the applications; and, (3) if necessary, negotiate transfers of grant applications to and from the NCI to other NIH ICs, and even other HHS research funding agencies, such as the Agency

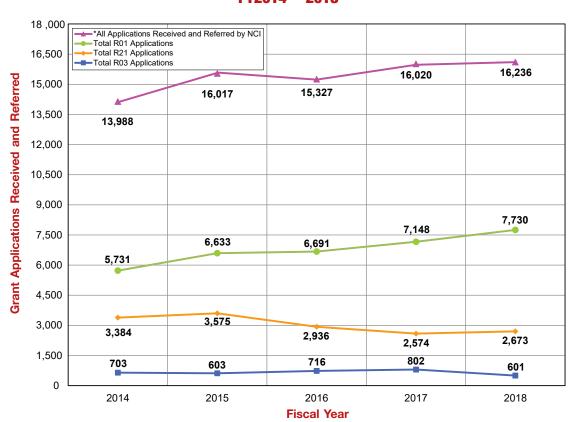


Figure 1. Receipt and Referral of NCI Grant Applications*
FY2014 - 2018

^{*}Includes NCI Primary and Secondary applications received and referred.

for Healthcare Research and Quality (AHRQ), the Centers for Disease Control and Prevention (CDC), and the Food and Drug Administration (FDA).

The first point of contact for applicants seeking NCI support for their research is often a PCRB Referral Officer (RO) who provides the investigators with information related to funding opportunities, peer review policies and process, and contact information of an NCI Program staff member who can provide guidance through the application process. In addition, the RO assists members of the extramural community in navigating NIH and NCI Web pages to obtain current information, forms, and guidelines. The PCRB also serves as the information and coordinating center at the NCI for the submission of applications for the Academic Research Enhancement Award (AREA, R15) grants for research at institutions and organizations that have little or no current NIH grant support.

For certain FOAs, in particular Program Projects and specialized initiatives, applicants are encouraged to submit a Letter of Intent (LOI) to the PCRB prior to the submission of their application. The LOI typically provides the name of the contact Principal Investigator (PI) and other participating key investigators, a listing of the specific aims of the application and a brief description of

the research, an approximate cost and years of support to be requested, and any additional information requested in the FOA. In most instances, the LOI is not mandatory or binding but provides the Institute with an estimate of the number of applications that might be submitted in response to a specific FOA.

All applications requesting \$500,000 or more in direct costs in any year require prior agreement by NIH staff to accept the assignment of that application to that IC unless stated otherwise in the FOA. This is accomplished by the applicant contacting Program staff well in advance of the anticipated submission date, but no later than 6 weeks before submission for prior approval. If the Program agrees to accept the application, the Program must submit an Awaiting Receipt of Applications (ARA) "form" through the NIH electronic Research Administration (eRA) to CSR DRR. ARAs are also used to facilitate requests for assignments from ICs and other information that needs to be connected to specific applications. For additional guidance on this process, the applicants are referred to NOT-OD-02-004, "Revised Policy on the Acceptance for Review of Unsolicited Applications That Request \$500,000 or More in Direct Costs," and NOT-OD-17-005, "Optional Electronic Submission Method to Request to Submit an Unsolicited Application That Will Exceed \$500,000 in Direct Costs."

Peer Review—The Next Step

Once applications are referred to the appropriate NCI program, they must be reviewed. The high caliber of NCI-sponsored research is maintained through a peer review process in which experts in the appropriate scientific fields review the scientific and technical merit of research grant applications, cooperative agreements, and contract proposals. The peer review process helps to ensure that the NCI uses its resources wisely and funds research that has the potential to make a significant contribution to science and medicine. The NCI's extramural programs and activities are funded primarily through peer reviewed grants and cooperative agreements. Programs that are funded through research and development contracts also are subjected to peer review, including contract-supported projects conducted within the intramural research program.

The NIH peer review system consists of two sequential levels of review mandated by statute. The first level of review is performed by either an NIH CSR study section, a chartered NCI Initial Review Group (IRG), or an NCI Special Emphasis Panel (SEP). The primary purpose of this initial review is to evaluate the scientific merit/impact of research grant and cooperative agreement applications. The second level of review, which is for program relevance, is conducted by the National Cancer Advisory Board (NCAB).

Most investigators are familiar with the NIH CSR study sections, which have the primary responsibility for managing the peer review of most investigator-initiated Research Project Grant (RPG, R01) and Fellowship (F) applications. It is less widely known, however, that grant applications representing requests for more than 50 percent of the NCI's extramural budget are reviewed by chartered NCI IRGs and SEPs that are directly formed and managed within the NCI by the DEA. Peer review managed by either the CSR or the DEA is usually determined by the type of grant mechanism.

The NCI has no direct input into the selection of peer reviewers who serve on CSR study sections. In contrast, members on NCI IRGs and SEPs are selected by DEA review staff, with suggestions from NCI program staff. All chartered NCI IRG Subcommittee members are approved by the DEA Director, based on their knowledge in various disciplines and fields related to cancer. The NCI has four specialized IRG Subcommittees. Subcommittee A reviews Cancer Center Support Grant (CCSG) applications. Subcommittee F reviews Institutional Training and Education applications. Subcommittee I reviews Transition to Independence applications, and Subcommittee J reviews Career Development applications. (The membership of NCI-chartered subcommittees may be found in Appendix D and at https://deainfo. nci.nih.gov/advisory/irg/irg.htm.) IRG members are appointed for varying terms of service, which may be up to 6 years. DEA SEPs may be formed to review grant and cooperative agreement applications received in response to RFAs, PAs, PARs, other special applications, or R&D contract proposals received in response to RFPs. Members of each panel are selected, on a one-time as-needed basis, to review specific grant and cooperative agreement applications, or contract proposals. Additional information about NCI SEPs can be accessed at https:// deainfo.nci.nih.gov/advisory/sep/sep.htm.

The peer review of grant applications and contract proposals generally occurs in the fall, winter, and spring prior to the February, June, and September NCAB meetings, respectively.

Review Workload

In FY2018, the DEA organized, managed, and reviewed a total of 4,222 research grant and cooperative agreement applications (Table 6) and 666 contract proposals (Table 12) assigned to the NCI for funding with appropriated dollars of \$2,094,421,873. The total number of grant applications, cooperative agreements, and contract

proposals reviewed in FY2018 was 4,888 (Figure 2). In addition, the DEA conducted 18 Cancer Center site visits, 12 IRG Subcommittee review meetings, 165 SEPs to review grant applications and contract proposals, and 51 other review-associated meetings, such as orientation teleconferences. Tables 7 and 12 provide a summary of the applications and proposals reviewed by NCI IRG Subcommittees and SEPs. Approximately 2,500 peer reviewers served on the NCI DEA-managed IRG Subcommittees, SEPs, and workgroups in FY2018. Members were selected on the basis of their demonstrated experience and expertise in relevant fields of biomedical research or their informed consumer perspectives.

Peer Review Functions

The Office of Referral, Review, and Program Coordination (ORRPC) is responsible for the coordination and management of the review of NCI grant applications, cooperative agreements, and contract proposals. The ORRPC is composed of

four review branches, a coordination and referral branch, and the Office of the Associate Director. The individual review branches are responsible for organizing, managing, and reporting the results of scientific peer review of grants, cooperative applications, and proposals for a wide variety of grant mechanisms and topics. Reviews of grant applications are conducted by either one of four NCI IRG Subcommittees or by specially convened SEPs as shown in Table 7. Contract proposals and Small Business Innovation Research (SBIR) Special Topics shown in Table 12 are reviewed by Technical Evaluation Panels (TEPs).

Research Programs Review Branch (RPRB)

Program Project (P01) Applications

A significant effort of RPRB during FY2018 was the review of unsolicited Program Project (P01) applications. These are multi-project, collaborative programs with a well-defined unifying cancer

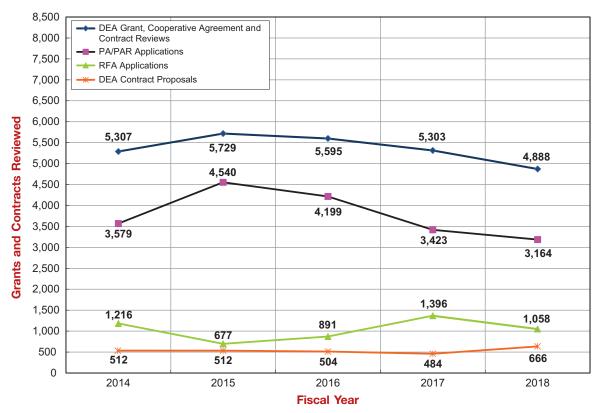


Figure 2. DEA Review Workload*

Grants and Contracts Reviewed FY2014 – 2018

^{*}Withdrawn applications not included.

research theme. For the review of P01s, the applications are grouped based on their scientific focus and typically clustered into groups of up to 10 applications in each group. The applications often represent a continuum of research from basic through translational to preclinical and clinical studies.

All P01 review panels are constituted as SEPs, with *ad hoc* reviewers recruited based on the scientific expertise needed for the applications being reviewed. The SEP review committees evaluate the potential impact of the individual projects and technical merit of the supporting core resources, determine the level of program integration and leadership, and then assign an overall impact score to each application.

During FY2018, RPRB managed the review of 106 new, renewal (competing), resubmitted (amended), and revised (competitive supplement) P01 applications (Figure 3 and Table 8). Seventy-seven (73%) of the applications proposed new multidisciplinary research programs, 25 (24%) were competitive renewals, and 33 (31%)

of the applications (both Type 1 and 2) were resubmitted applications (Table 8). Thirty-four of the 106 P01 applications (32%) included multiple PIs. Forty (38%) of the 106 applications were referred to the NCI's Division of Cancer Biology (DCB), 42 applications (40%) were referred to the Division of Cancer Treatment and Diagnosis (DCTD), 21 applications (20%) were referred to the Division of Cancer Control and Population Sciences (DCCPS), and three applications (3%) were referred to the Division of Cancer Prevention (DCP) (see Table 9). The 106 applications requested \$265,773,603 in total costs for the first year of support (see Tables 6 and 9) and \$1,337,656,706 in total costs for 5 years.

Specialized Programs of Research Excellence (SPORE, P50)

Another major responsibility of RPRB is the review of NCI Specialized Programs of Research Excellence (SPORE) P50 applications. These complex, multi-project, multidisciplinary, translational applications focus on research that is directly applicable to human disease in specific organ sites or that focuses on a common biological mechanism

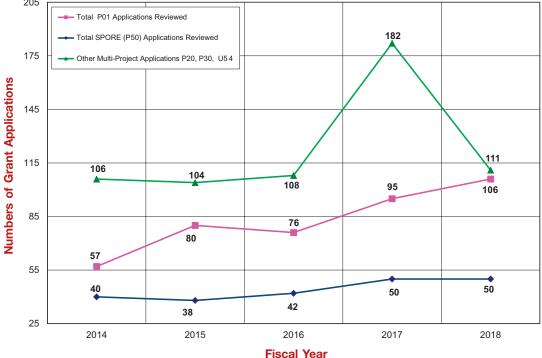
Figure 3. Program Project (P01), SPORE, and Other Multi-Project Research Applications Reviewed

FY2014 - 2018*

205

Total P01 Applications Reviewed

Total SPORE (P50) Applications Reviewed



^{*}Withdrawn applications not included.

critical for promoting tumorigenesis and/or cancer progression.

All SPORE review panels are constituted as SEPs, with reviewers recruited based on the scientific expertise needed for the applications being reviewed. SEP review committees evaluate and assign scores to the individual components of the applications (projects, cores, and developmental programs), and then assign an overall impact score to the SPORE application as a whole.

In FY2018, the RPRB organized and managed eight SEPs for the review of 50 SPORE applications (Figure 3 and Table 11). The applications addressed multiple organ sites, with the following distribution and numbers of applications: Brain (7); Breast (6); Gastrointestinal (7); Pancreas (2); Head and Neck (4); Thyroid (1); Hepatobiliary (1); Leukemia (2); Lymphoma (1); Skin (5); Myeloma (1); Ovarian (2); Prostate (5); Genitourinary (4); Sarcoma (1); and Eye (1). Overall, 27 (54%) of the 50 applications were submitted for new SPOREs, and 23 (46%) were competitive renewal applications, with 18 (36%) being resubmitted applications.

The disease sites addressed in the SPORE applications vary from round to round. For example, 15 applications addressing 10 different disease sites were reviewed for the October 2017 NCAB cycle; 10 applications addressing nine disease sites were reviewed for the January 2018 NCAB cycle, and 25 applications addressing 11 disease sites were reviewed for the May 2018 NCAB meeting. The applications requested \$117,914,855 in total costs for the first year of support (Table 11).

Additionally, 24 Feasibility and Planning P20 applications for the Development of SPOREs in Cancer Health Disparities were reviewed for the August 2018 NCAB cycle. These applications requested \$30,343,592 in total costs for the first year of support.

Other RPRB Activities

Potential applicants for P01 and P50 grant submissions are strongly encouraged to participate in a pre-submission discussion with appropriate NCI Program and DEA Review staff members so that they can fully understand the guidelines, requirements, and goals of these complex applications. SROs from the RPRB routinely participate in these pre-submission conferences to assist the applicants in understanding the review process, the special review criteria, and the scoring paradigms for these applications. In FY2018, RPRB SROs attended 74 of these pre-submission meetings.

The RPRB also manages review of investigator-initiated R01 applications proposing multi-center clinical trials. Of the 44 applications reviewed in FY2018, 12 (27%) were referred to the Division of Cancer Prevention (DCP), 21 (48%) were referred to the Division of Cancer Treatment and Diagnosis (DCTD), 10 (23%) were referred to the Division of Cancer Control and Population Sciences (DCCPS), and one (2%) was referred to the Division of Cancer Biology (DCB).

As needed, RPRB SROs also manage review of applications submitted to the DEA in response to other initiatives. In FY2018, this included coordinating review of U01, U24, U54, UH2/UH3, R03, R21, R25, R35, and SI2/R00 applications.

Resources and Training Review Branch (RTRB)

The RTRB has primary responsibility for review of Cancer Center Support, Training and Education, and Career Development applications. RTRB is also responsible for the management of the four NCI IRG Subcommittees: A, F, I, and J (Appendix E).

Review of Cancer Center Support Grant (CCSG) applications involves a two-tier initial peer review process. The first tier of the review involves a site visit to the applicant's institution by a non-FACA working group review panel. Site visit reviewers serve as a fact-finding body of experts to obtain updated information and/or clarification of any issues identified in the written application through an onsite face-to-face discussion with the Cancer Center investigators with focus on addressing CCSG-specific review criteria. The site visit committee prepares a site visit review report that is presented, along with the written CCSG application, to the NCI IRG Subcommittee A for

discussion, evaluation, and final impact scoring of the application. Final impact scoring by Subcommittee A provides a more uniform evaluation of the individual CCSG applications than scoring based solely on the initial site visit review group.

In 2014, guidelines were implemented in which Cancer Centers may elect not to have a site visit. In this case, the review is based only on the information provided in the written application (i.e., "paper" review), with final evaluation and impact scoring by NCI Subcommittee A. During FY2018 Subcommittee A reviewed 18 CCSG applications.

Training and Career Development

Career Development, and Training and Education grant applications are reviewed by IRG Subcommittees Institutional Training and Education (F), and Career Development (I and J). The number of Career Development applications increased to 553 in 2018 from 509 in 2017. The number of Training and Education grant applications increased from

139 applications in 2017 to 143 in 2018 (Figure 4). In addition, 73 applications submitted in response to the NCI Predoctoral to Postdoctoral Fellow Transition Award (F99) were reviewed.

Other RTRB Activities

In FY2018, RTRB review staff also reviewed applications received in response to initiatives that were coordinated by the SRB, i.e., the: (1) NCI Provocative Questions Initiative (PQ); (2) Exploratory/ Developmental Grant (R21); (3) Program Project (P01); (4) Research Project (R01); (5) Small Grant (R03); (6) Outstanding Investigator Award (R35); (7) Research Projects – Cooperative Agreements (U01); and (8) Specialized Center – Cooperative Agreements (U54).

Special Review Branch (SRB)

The SRB organizes and manages the peer review of applications submitted in response to NCI-issued RFAs, PAs, and PARs. Following approval of RFA

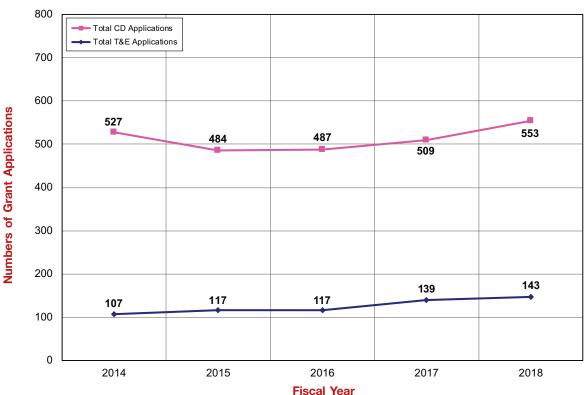


Figure 4. Numbers of Career Development (CD) and Training and Education (T&E)
Applications Reviewed FY2014 – 2018*

^{*}CD activity codes: K01, K07, K08, K22, and K99. T&E activity codes: K12, R25, and T32.

concepts by the NCI Scientific Program Leaders (SPL) and the Board of Scientific Advisors (BSA), NCI Program staff prepares RFAs for publication in the NIH Guide for Grants and Contracts. (Table 10 summarizes the number of applications submitted for the RFAs, and Table 11 summarizes the number of applications submitted in response to PAs or PARs reviewed by the DEA).

During FY2018, the SRB, with the assistance of the three other DEA review branches (RPRB, RTCRB, and RTRB), peer reviewed a total of 1,058 applications received in response to 39 RFAs (Table 10) and 3,163 applications in response to 85 PAs/PARs (Table 11). All the peer review meetings were conducted by 93 SEPs.

Moonshot Research Initiative

In December 2016, the U.S. Congress passed the 21st Century Cures Act, authorizing \$1.8 billion in funding for the Cancer Moonshot over 7 years. The Congress appropriated \$300 million to the NCI for FY2017, \$300 million for FY2018, and \$400 million for FY2019. A Blue Ribbon Panel of experts was established as a working group of the NCAB to ensure that the Cancer Moonshot's approaches are grounded in the best science. The Panel's report outlines recommendations to accelerate progress against cancer. Initiatives established to address the goals of the recommendations are as follows:

- Establish a Network for Direct Patient Engagement
- Create an Adult Immunotherapy Network
- Create a Pediatric Immunotherapy Discovery and Development Network (PI-DDN)
- Develop Ways to Overcome Cancer's Resistance to Therapy
- Build a National Cancer Data Ecosystem
- Intensify Research on the Major Drivers of Childhood Cancers
- Minimize Cancer Treatment's Debilitating Side Effects
- Prevention and Early Detection of Hereditary Cancers
- Expand Use of Proven Cancer Prevention and Early Detection Strategies

- Analyze Patient Data and Biospecimens from Past Clinical Trials to Predict Future Patient Outcomes
- Generation of Human Tumor Atlases
- Develop New Cancer Technologies

In FY2018, the DEA reviewed a total of 184 submitted applications in response to eight Moonshot Initiative RFAs (Table 10) and six RFPs (Table 12). The activity codes included the following mechanisms: U01 (103 applications), U24 (10 applications), U54 (11 applications), UM1 (10 applications), and R43/44 (50 proposals).

Research Answers to NCI's Provocative Questions (PQ)

Following input from the scientific community through focus groups, forums, and online postings, grant applications were solicited to respond to one of the 12 scientific questions designed to solve specific problems and paradoxes in cancer research. Also, revision (supplement) applications were solicited to add provocative questions/relevant research to active research projects. Two-hundred and fourteen R01 Research Project, 144 R21 Exploratory/ Development, three P50, two P01, and five R01 revision applications were submitted and reviewed in response to five RFAs (Table 10). These applications were peer reviewed in SEP meetings to assess the overall impact.

Exploratory/Developmental Research

In FY2018, the DEA reviewed 958 R21 applications submitted for the NCI Clinical and Translational Exploratory/Developmental Research Grant Program in response to PAR16-176 and PAR18-020 (Table 11). Applications were initially grouped based on their scientific focus; the groupings varied depending on the number of applications received and the science proposed. The applications represented a continuum of research from basic through translational to preclinical and clinical studies. The applications were reviewed in a total of 28 SEPs over the three review cycles in FY2018.

Small Grant Programs

The small grant (R03) PAR program initiative in the NCI Omnibus R03 for cancer research

(PAR16-416 and PAR 18-021) stimulated increased interest in the applicants' community. In FY2018, 562 applications were submitted and reviewed by the DEA in response to these FOAs (Table 11).

Other SRB Activities

As needed, SRB SROs also manage review of applications submitted to the DEA in response to other initiatives. In FY2018, this included coordinating review of F99/K00, P01, P20, R03, R21, R50, U01, U24, U54, UG3, and UH2/UH3 applications.

Research Technology and Contracts Review Branch (RTCRB)

The RTCRB organizes and manages the peer review of technology-related SBIR/STTR grant applications, SBIR Special Topics contract proposals, and R&D contract proposals submitted in response to RFPs. In most instances, the majority of technology research initiatives use either the R21

Exploratory/Developmental or the R33 Exploratory/Developmental Phase II award mechanism. The R21 mechanism is intended to encourage exploratory/developmental research by providing support for exploratory pilot projects in the early stages of project development; whereas, the R33 mechanism is suitable for projects for which "proof-of-principle" of the proposed technology or methodology already has been established and supportive preliminary data are available. These two mechanisms are well suited for technology development.

In 2018, 285 technology applications (Figure 5) for Exploratory/Developmental Phase I (R21) grants and Exploratory/Developmental Phase II (R33) grants were reviewed for: Innovative Molecular and Cellular Analysis Technologies for Basic and Clinical Cancer Research (RFA CA17-010 [R21]); Advanced Development and Validation of Emerging Molecular and Cellular Analysis Technologies for Basic and Clinical Cancer Research

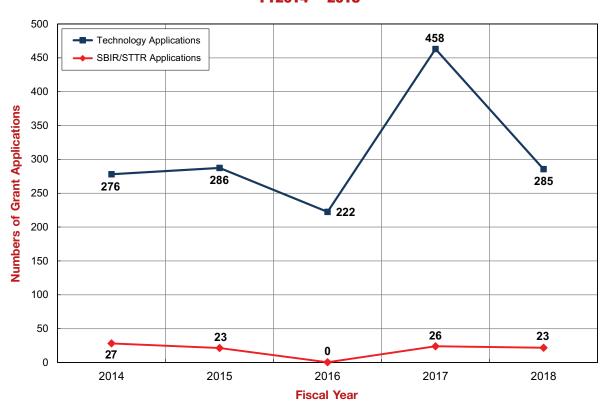


Figure 5. Technology Initiatives Applications Reviewed* FY2014 - 2018

^{*} Withdrawn applications are not included.

(RFA CA-17-011 [R33]); Innovative Technologies for Cancer-Relevant Biospecimen Science (RFA CA-17-012 [R21]); Advanced Development and Validation of Emerging Biospecimen Science Technologies for Basic and Clinical Cancer Research (RFA CA-17-013 [R33]); Innovative Molecular and Cellular Analysis Technologies for Basic and Clinical Cancer Research (RFA CA18-002 [R21]); Advanced Development and Validation of Emerging Molecular and Cellular Analysis Technologies for Basic and Clinical Cancer Research (RFA CA18-003 [R33]); Innovative Biospecimen Science Technologies for Basic and Clinical Cancer Research (RFA CA-18-004 [R21]); and, Advanced Development and Validation of Emerging Biospecimen Science Technologies for Basic and Clinical Cancer Research (RFA CA18-005 [R33]) (Table 10).

Research and Development (R&D) Contract Proposals

In FY2018, the RTCRB received and reviewed 162 contract proposals in response to two RFPs (Table 12). During review, specific elements of each proposal are individually evaluated and scored, with the combined score indicating the overall merit. After negotiations, contract awards are made for the specific RFP solicitation. Phase II SBIR proposals are submitted to the Topics and are announced in a Broad Agency Agreement Announcement.

Other RTCRB Activities

In FY2018, members of the branch also assisted in the review of applications for initiatives that were coordinated by the SRB, including the NCI Provocative Questions Initiative, the NCI Omnibus Exploratory Grant (R21) program, and the Small Grant (R03) program. In FY2018, the RTCRB also managed reviews of P01, U01, U24, U54, UG3, and UH2/UH3 applications.

NCI Grant and RFA Funding

The Board of Scientific Advisors (BSA) is responsible for advising the NCI Director on the extramural program and the future direction and funding of each Division's, Office's, and Center's (DOCs) extramural research. As such, the BSA provides concept review for NCI-sponsored RFAs. Figures 6 and 7 show total NCI Grant and RFA funding according to scientific concept area in FY2017 and FY2018. Figure 8 shows RFA concepts that the BSA approved from FY2015 through FY2018 according to the sponsoring NCI Division, Office, or Center.

Table 13 presents a summary of total funding of NCI grant awards by mechanism for FY2018. In

Table 14, a comparison is made of the average cost and number of NCI R01, P01, R03, R13, R21, P30, P50, U01/U19, U10, and U54 grants, and cooperative agreements awarded in FY2014 through FY2018, based on information received from the extramural Divisions, Offices, and Centers.

Trends in grant funding according to scientific discipline and organ site are provided in Tables 15 and 16. Table 17 reports NCI's funding of foreign research grants in FY2018, and Table 18 reports foreign components of U.S. domestic research grants in FY2018. Note: Some grant awards made during a fiscal year may have been for grant applications reviewed in a prior fiscal year.

Tumor Immunology Training & Education (3.05%; 0%) (4.78%; 0.19%) Special Populations Cancer Biology (2.59%; 0.08%) (20.27%: 2.76%) Organ Systems (3.69%; 0.01%) Cancer Causation Multi-Disciplinary (3.30%; 0.19%) (8.78%; 0%) Cancer Control Epidemiology/ (3.57%; 0.26%) Surveillance (5.35%: 0.53%) Cancer Genetics (1.67%; 0.59%) Developmental Cancer Prevention Therapeutics (4.71%; 1.36%) (8.54%; 0.58%) Cancer Technology (3.10%; 1.76%) **Detection & Diagnosis** (8.30%; 0.68%) Clinical Trials (13.62%; 8.74%) Community Oncology/Rehabilitation

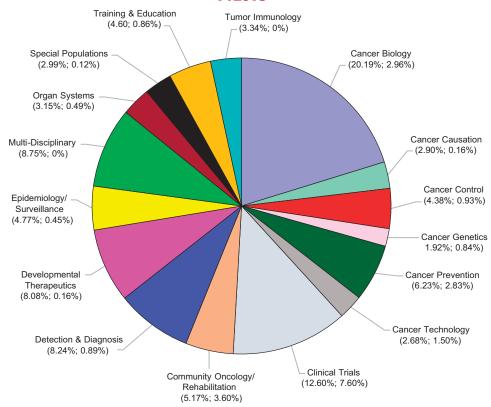
Figure 6. NCI Grant and RFA/Cooperative Agreement Funding Percentages by Concept Area FY2017

Percentages represent Total Funding and RFA Funding for the Concept Area as a percentage of Total NCI Grants.

Concept Area (% of Total Funding to Total NCI Grants; % of RFA Funding to Total NCI Grants)

(4.68%; 3.34%)

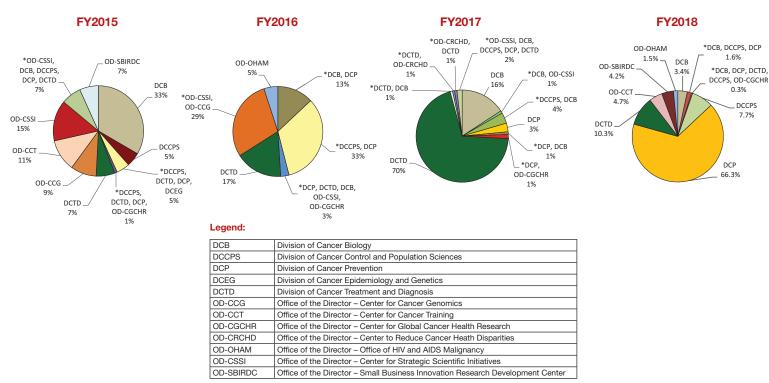
Figure 7. NCI Grant and RFA/Cooperative Agreement Funding Percentages by Concept Area FY2018



Percentages represent Total Funding and RFA Funding for the Concept Area as a percentage of Total NCI Grants.

Concept Area (% of Total Funding to Total NCI Grants; % of RFA Funding to Total NCI Grants)

Figure 8. BSA-Approved RFA/Cooperative Agreement Concept Set-Asides by Division/Office



Supporting Peer Review Consultants

Ensuring that highly qualified individuals are available for expert review of grant applications and contract proposals requires an efficient administrative support system. The DEA's Scientific Review and Evaluation Activities (SREA) unit, residing within the NCI Committee Management Office (CMO), supports the NCI peer review process by compensating consultants for their services on the NCI IRG subcommittees or SEPs and by reimbursing them for their travel and other expenses (see Appendices D and E). The SREA staff also approves and/or processes payments for other activities related to review, including hotel contracts, teleconferencing services, and contract-supported ticketing services.

The NCI SREA program is a multi-million-dollar program. The staff members of CMO continue to effectively oversee the successful reconciliation of peer review costs charged against the SREA account, identify erroneous charges, and keep an extensive tracking sheet on all costs related to approximately 198 peer-review-associated meetings to successfully manage the budget. The CMO is able to provide the DEA Director with a clear picture of funds spent against the SREA budget throughout the year to ensure there are enough funds to cover all NCI peer review activities.

During FY2018, approximately 2,392 consultants were reimbursed honoraria and flat rate payment for serving at more than 198 peer review meetings (Appendix E). There were 3,824 instances of honoraria and flat rate payments to NCI peer review consultants. The SREA staff works diligently to ensure reviewers are reimbursed in a timely manner and, when appropriate, contacts those reviewers with an unpaid or returned reimbursements status. The SROs have expressed their gratitude to the members of the SREA team for tracking the reviewers' payments and, when necessary, assisting reviewers complete their Secure Payee Registration System (SPRS) registration. Due to these proactive efforts by the SREA staff, only 1 out of the 3,824 instances of honoraria and flat rate payments to NCI peer review consultants were not paid out in FY2018.

Throughout the year the SREA staff ensures the timely review and submission of hotel contracts for processing to secure lodging and meeting room space for face-to-face peer review meetings. In

FY2018, 105 hotel contracts were processed by the SREA staff. The SREA is also responsible for ensuring all meeting logistic invoices, i.e., hotels, World Travel Service, and teleconference services charges, are accurate and valid before all invoices are processed for payment. All discrepancies are immediately addressed with the appropriate vendor and a revised invoice is requested. A total of 105 hotel invoices and 59 consultant travel invoices were reviewed and submitted for payment in FY2018.

The SREA staff collaborates with the Associate Director, ORRPC, NCI DEA Branch Chiefs, CMO, and Scientific Review Officers on the development of NCI SREA policies and procedures. On an ongoing basis they monitor and evaluate current SREA activities and initiate changes and improvements when warranted.

In addition, CMO and SREA staff were presenters at an NCI DEA review staff Brown Bag session, where they discussed the Department of Health and Human Services Waiver Policy and peer review meeting reimbursements. Some of the main points of discussion were:

- Policies and Components of a Reviewer's Reimbursement
- Secure Payee Registration System (SPRS)
- Peer Reviewer Travel Exception Requests
- Submission of Meeting Attendance Lists
- Scientific Review Officer Responsibilities in the following areas:
 - Federal Advisory Committee Act (FACA)
 - Meeting Requirements and Waiver Policies
 - SREA

The SREA staff also coordinated an NCI DEA review staff Brown Bag presentation from World Travel Service (WTS) on several updates, including changes to airline policies, the WTS travel system, and the use of iBank to track reviewer travel.

All CMO and SREA documents related to peer review meeting activities are sent to PRESTO to be posted on the "NCI/DEA Peer Review Reference Guide for Staff Assistants" page on the PRESTO website. The documents are then utilized by NCI DEA SROs and SAs. These training tools are imperative to the peer review process and the integrity of the NCI's mission.

DEA's Role in Advisory Activities

Beyond its central role in coordinating the referral of grants and peer review, perhaps the most far-reaching role that the DEA plays across the NCI is the coordination and administration of NCI's nine chartered Federal Advisory Committees. The memberships and activities of these advisory bodies are coordinated by the Office of the Director, DEA, and the Committee Management Office, DEA, in consultation with the NCI **Director**. A primary responsibility of the DEA is coordination of the activities of the National Cancer Advisory Board (NCAB), whose members are appointed by the U.S. President and whose responsibilities include the second-level review of grant and cooperative agreement applications as well as advising the NCI Director on policy for the conduct of the National Cancer Program. The DEA also coordinates administration of the Board of Scientific Advisors (BSA), the body responsible for the oversight and concept review of the extramural programs and initiatives of the NCI, and the Frederick National Laboratory Advisory Committee (FNLAC), which provides ovesight of research activities at the Frederick National Laboratory for Cancer Research (FNLCR). Under the various chartered committees, working groups, task forces, etc. are formed to address and make recommendations on important areas of cancer research related to basic science, clinical trials, diverse populations, cancer advocacy, treatment, cancer control, drug development, prevention, communication, education, etc. As such, the DEA plays a major role in the development and issuance of PAs, PARs, RFAs, and R&D RFPs, the major extramural program initiatives used by the NCI to fund extramural research. The DEA Director serves as an Executive Secretary to the NCAB and the BSA. (See Appendices A and B for highlights of the activities of these Boards in FY2018 and Appendix D for a list of current chartered committee members.)

Major NCI Advisory Bodies Administered by the DEA

National Cancer Advisory Board (NCAB). NCI's principal advisory body is the presidentially appointed NCAB. The NCAB advises the HHS Secretary and the NCI Director on issues related

to the entire National Cancer Program and provides a second level of review of grant applications referred to the NCI and for the Food and Drug Administration (FDA) (Appendix A).

President's Cancer Panel (PCP). The PCP consists of three members appointed by the U.S. President, who by virtue of their training, experience, and backgrounds, are exceptionally qualified to appraise the National Cancer Program. At least two members of the Panel are distinguished scientists or physicians, and the third member is a nationally recognized cancer research patient advocate. The Panel monitors the development and execution of the activities of the National Cancer Program and reports directly to the U.S. President. Any delays or hindrances in the rapid execution of the Program are immediately brought to the attention of the President.

Board of Scientific Advisors (BSA). The BSA represents the scientific community's voice in NCI-supported extramural research. The BSA, composed of distinguished scientists from outside the NCI and representatives from the advocacy community, advises NCI leadership on the progress and future direction of the Institute's extramural research program. Importantly, the BSA evaluates NCI extramural programs and policies, and reviews concepts for new research opportunities and solicitations to ensure that those concepts are meritorious and consistent with the Institute's mission (Appendix B).

Boards of Scientific Counselors (BSCs) for Basic Sciences and for Clinical Sciences and Epidemiology. The two BSCs, managed through the Office of the Director (OD), NCI, advise NCI leadership on the progress and future direction of NCI's Intramural Research Program residing in the Center for Cancer Research (CCR) and Division of Cancer Epidemiology and Genetics (DCEG). These groups of scientific experts from outside the NCI evaluate the performance and productivity of NCI Intramural Principal Investigators and staff scientists through periodic site visits of the intramural laboratories and provide evaluation and advice on the course of research for each laboratory and branch.

Frederick National Laboratory Advisory Council (FNLAC). The FNLAC provides advice and makes recommendations to the Director, NCI, and the Associate Director, NCI-Frederick, on the optimal use of the NCI-Frederick facility to rapidly meet the most urgent needs of the Institute. The NCI-Frederick Cancer Research Center (FCRC) in Frederick, Maryland, was established in 1972 as a government-owned, contractor-operated facility. In 1975, the facility was designated as a Federally Funded Research and Development Center (FFRDC) to provide a unique national resource for the development of new technologies and the translation of basic science discoveries into novel agents for the prevention, diagnosis, and treatment of cancer and AIDS. In 2012, the FCRC was renamed as the Frederick National Laboratory for Cancer Research (FNLCR). FNLAC reviews new projects proposed to be performed at FNLCR and advises the Director, NC I, and the Associate Director, NCI-Frederick, about the intrinsic merit of the projects and about whether they should be performed at the Frederick facility (Appendix C).

NCI Council of Research Advocates (NCRA). The NCRA, previously known as the Director's Consumer Liaison Group (DCLG), advises the NCI Director with respect to promoting research outcomes that are in the best interest of cancer patients. To this end, the NCRA conducts these activities with the intent to identify new approaches, promote innovation, recognize unforeseen risks or barriers, and identify unintended consequences that could result from NCI decisions or actions. Additionally, the NCRA provides insight into enhancing input, optimizing outreach, and promoting strong collaborations, all with respect to non-scientist stakeholders.

Clinical Trials and Translational Research Advisory Committee (CTAC). The CTAC advises and makes recommendations to the NCI Director, NCI Deputy Directors, and the NCI Division/Office/Center (DOC) Directors on the NCI-supported national clinical trials enterprise to build a strong scientific infrastructure by bringing together a broadly developed and engaged coalition of stakeholders involved in the clinical trials process. In addition, CTAC makes recommendations regarding the effectiveness of NCI's translational research management and administration program, including needs and opportunities across disease sites, patient populations, translational developmental pathways,

and the range of molecular mechanisms responsible for cancer development. CTAC also advises on the appropriate magnitude for dedicated translational research priorities and recommends allocation of translational research operations across organizational units, programs, disease sites, populations, developmental pathways, and molecular mechanisms. These responsibilities encompass oversight of all clinical trials, both extramural and intramural. In addition, the Committee provides broad scientific and programmatic advice on the investment of taxpayer dollars in clinical trials and related science.

NCI Initial Review Groups (IRGs). The NCI IRGs. composed of four active subcommittees, review grant applications for Cancer Center Support (Subcommittee A), Institutional Training and Education (Subcommittee F), and Career Development (Subcommittees I and J) in the areas of cancer cause, prevention, diagnosis, treatment, and control. IRG members may be appointed as standing committee members with overlapping terms of up to 6 years, or as "temporary" ad hoc members. Ad hoc members have all of the rights and obligations of IRG committee membership, including the right to vote on recommendations in which the individual fully participated as a reviewer for a specific meeting. Consultants also may be invited to serve as special experts to provide information or advice. These individuals generally serve on site-visit groups or work groups providing critical information to the chartered advisory subcommittees responsible for initial peer review.

NCI Special Emphasis Panels (SEPs). The SEPs advise the NCI Director and the DEA Director regarding research grant and cooperative agreement applications and concept reviews relating to basic, preclinical and clinical sciences, and applied research and development programs of special relevance to the NCI. Membership on a SEP is fluid, with experts designated to serve "as needed" for individual review meetings rather than for fixed terms. The SEP individuals have all of the rights and obligations of IRG committee membership, including the right to vote on recommendations.

NCI Technical Evaluation Panels (TEPs). The TEPs advise the NCI Director and the DEA Director regarding contract proposals. The TEPs provide an orderly, impartial, timely, yet comprehensive and discriminating technical evaluation of each prospective offeror's technical proposal.

Committee Management Activities

The NCI Committee Management Office (CMO) is critical to the continued success of all NCI Federal advisory committee activities, including Boards, Advisory Committees, subcommittees, working groups, blue ribbon panels and review panels, etc. The CMO is located in the Office of the Director, DEA, NCI. This office continues to provide expert advice to the Director, NCI, Deputy Directors, NCI, the Director, DEA, NCI, and other senior level Institute/Center/Client staff on all rules, regulations, guidelines, policies, procedures, etc. governing the Federal Advisory Committee Act (FACA). The CMPO is also an established Service Center for the management of other Institutes' Federal Advisory Committees. Currently, CMO serves as the Service Center for the NIH Council of Councils (CoC) located in the Division of Program Coordination, Planning, and Strategic Initiatives, Office of the Director (OD), National Institutes of Health (NIH); the Advisory Committee to the Director, NIH (ACD), located in the OD, NIH; the Advisory Committee on Research on Women's Health (ACRWH), located in the Office of Research on Women's Health in the Division of Program Coordination, Planning, and Strategic Initiatives, OD, NIH; the NIH Recombinant DNA Advisory Committee (RAC), located in the Office of Science Policy, OD, NIH; and the National Institute on Alcohol Abuse and Alcoholism (NIAAA). NIAAA has seven Federal Advisory committees, which includes an Advisory Council, a BSC, four IRG Subcommittees, and a SEP.

The CMO successfully manages 24 Federal advisory committees and numerous subcommittees and working groups. The Office is also responsible for providing logistical planning and support of the following: four National Cancer Advisory Board meetings, three Board of Scientific Advisors meetings, and three Frederick National Laboratory Advisory Committee meetings, as well as numerous subcommittees and working groups. Meetings are held via videoconference, Webinar, teleconference, or face to face. The Office also provides logistical support for three NIAAA Council and ACRWH meetings each year. Another important

responsibility of the Office is the management of the Division's SREA Program which includes reimbursement of thousands of peer review consultants, processing and payment of hotel contracts, teleconferences, and reconciliation of the SREA budget.

As a Service Center, the CMO provided exceptional service to the Client-Institutes and the NIH Office of the Director in the management of their Federal advisory committees. CMO effectively managed a comprehensive ethics program in support of CoC, ACD, ACRWH, and RAC. Ethics services include analysis and review of Special Government Employee OGE-450s and Foreign Activity Questionnaire and preparation of recusal lists and waivers of current members. Additionally, CMO prepares charter renewals, analyzes potential nominees and prepares nomination slates, issuances of waivers for membership requirements, Federal Register notices, and annual and fiscal year reports for its Service Center Clients.

Highlights of CMO activities in FY2018 include the following:

- Participated in several activities related to the NIH Optimize Initiative in Committee Management (CM), including representation on the following subcommittees: NIH Service Centers, Ethics, Human Resources/Nomination Slates, and Scope of CM Activities.
- Participated in a pilot project initiated as part of the NIH Optimize Initiative in Ethics and Committee Management to have advisory committee/board members use the NIH Enterprise Ethics System (NEES) to submit their OGE-450s electronically versus completing paper forms.
- Provided guidance to NCI staff on the creation of the NCI Clinical Trials and Translational Research Advisory Committee (CTAC) ad hoc Translational Research Strategy Subcommittee and the NCI Board of Scientific Advisors (BSA) ad hoc Working Group on Immunology of Therapies and Vaccines and Research Structure.

- Worked with the NCI DEA Director on the establishment of several NCAB ad hoc Working Groups, including Data Science, Global Health, SBIR/STTR Programs, and Strategic Approaches and Opportunities in Population Science, Epidemiology, and Disparities.
- Met with the Executive Secretary, ARCWH and NIH OD staff to provide guidance on FACA rules and regulations.
- Provided guidance to NIH OD Staff assigned to the NIH Recombinant DNA Advisory Committee (RAC).
- Continued to provide oversight of the NCI DEA SREA multi-million-dollar program and successfully closed out the FY18 budget.
- Oversaw travel authorizations and vouchering of over 200 SGE travel instances, many of which are complex and require negotiating with the board member.
- Continued to evaluate the current CM IMPAC II database and provide feedback to the Committee Management Users Group Representative on system enhancements for the creation of the new Committee Management Module (CMM) in the IMPAC II database.

The following **training sessions** were given by CMO to various Federal audiences over the course of the year:

 Brown Bag Presentation to SRO and SA staff on policies and components of Peer Reviewer reimbursement; Secure Payee Registration System (SPRS); Peer Reviewer travel exceptions; the submission of meeting attendance lists; NCI DEA peer review reimbursements policies and procedures; and Department of Health and Human Services (HHS) waiver policies and procedures.

- Brown Bag Presentation to SRO and SA staff from World Travel Service (WTS) on several updates, including changes to airline policies, the WTS travel system, and the use of iBank to track reviewer travel.
- FACA Training to Executive Secretary and ORWH Staff working on the Advisory Committee on Research on Women's Health.
- Working Group Overview and Training to newly assigned Designated Federal Officials (DFOs) of the NCAB ad hoc Working Group on Data Science; NCAB ad hoc Working Group on Global Health; NCAB ad hoc Working Group on SBIR/STTR; NCAB ad hoc Working Group on Strategic Approaches and Opportunities in Population Science, Epidemiology, and Disparities; and FNLAC NCI/Department of Energy (DOE) Collaborations Working Group.
- Responded to requests from senior NCI and Client staff on various non-FACA meetings and working group concerns.

Portfolio Tracking and Analysis

DEA's Research Analysis and Evaluation Branch (RAEB) is the officially designated contact for scientific information on NCI-supported research. The Branch collects and maintains consistent budget-linked scientific information across all of NCI's scientific programs to analyze the Institute's research funding portfolio. The RAEB staff members assist in making budget projections, and as requested, disseminate scientific cancer information. The DEA conducts analyses to project future NCI research expenditures and to provide budget justifications to the U.S. Congress. The work of the RAEB allows the DEA to respond immediately to requests for information from NCI staff, the broader NIH community, and requesters nationally and worldwide regarding the NCI Funded Research Portfolio. The RAEB reviews both unfunded applications and funded extramural grants supported by the NCI to consistently link scientific categories to budget categories on all Institute programs. These capabilities are based on a sophisticated system of indexing in which research documentation staff members analyze grant applications to classify each project for its degree of relevance to Special Interest Category (SIC) and Organ Site Codes (SITE). SIC Codes are meant to describe in a consistent way the major scientific disciplines that are of stated or growing interest to the NIH, HHS, the U.S. Congress, and the public. A critical characteristic of these data is comparability from one fiscal year to the next.

Trends in funding from FY2014 through FY2018 for selected organ sites and SIC Codes are presented in Tables 15 and 16. In addition, RAEB staff members serve as DEA or NCI representatives on NCI or NIH-wide scientific reporting initiatives. These groups and committees deal with various

aspects of NIH grants and contracts or tracking and reporting on areas of special interest to the NIH, NCI, and/or U.S. Congress.

Highlights in FY2018 include the following:

- FY2018 grant information provided to NCI Program Directors on various areas of scientific research, including Aging, Clinical Trials, Leukemia and Lymphoma, Obesity, Health Disparities, and Nutrition and Circadian Rhythms.
- Participation in the International Cancer Research Partners (ICRP), a group of international cancer funding organizations. NCI projects and cancer grants funded by other NIH Institutes are indexed to a Common Scientific Outline (CSO). Such indexing provides consistent scientific research information for all participating international funding institutions.
- Coordination with the NCI Office of Budget and Finance (OBF) to update and align budget reporting categories. FY2018 grant funding information provided on Rare Cancers and CAR-T therapy.
- Chaired the NCI Accrual Working Group for triennial reporting of NCI compliance with Congressional Inclusion reporting requirements.
- Served as NCI point of contact on the NIH Inclusion Operating Procedures Working Group.
- Served as DEA representative to the NCI Communications Committee.
- Served as DEA representative to the NCI Planning and Evaluation Special Interest Group (SIG).

Extramural Research by Foreign Research Institutions and Extramural NCI Research Grants with a Foreign Research Component

In FY2018, the NCI allocated \$14.5 million to support 30 projects received from foreign research institutions. These foreign grants are listed by country, mechanism, disease area, and total funding support in Table 17. Canadian institutions received the most funding from the NCI, with 11 grants and one contract adding up \$6.4 million. R01s were the most common mechanisms funded, with 12 grants receiving \$3 million. Disease areas receiving the most NCI funding to foreign institutions were Not Site Specific (\$3.6 million), and Colon (\$2.6 million), followed by Breast (\$1.5 million).

FY2018 Funding of Foreign Institutions

(See **Table 17** for more information.)

Country	Grants & Contracts	Funding \$
Canada	12	6,371,197
Australia	3	2,797,382
France	3	1,778,307
Costa Rica	1	843,352
Argentina	2	641,216
Sweden	2	634,524
Germany	1	413,604
United Kingdom	1	324,000
Netherlands	1	224,924
Switzerland	1	218,655
Japan	1	157,967
South Africa	1	81,956
Italy	1	25,000
TOTALS	30	14,512,084

In FY2018, the NCI supported 230 U.S. domestic projects with 281 foreign components. These projects are listed in Table 18 by country, mechanism, and number of projects. Because many projects have multiple foreign contributors, the total count is greater than the total number of projects. Institutions in Canada (47 grants), Germany (21 grants), the United Kingdom (17 grants), Netherlands (16 grants), China (16 grants), and Australia (12 grants) were the NCI's most frequent collaborators. R01 is the most common funding mechanism used for collaborations, with 145 grants, followed by U01 (33 grants), and R21 (27 grants).

Success Rates of Extramural Science Categories

The RAEB assigns scientific indexing to both funded and unfunded applications, so it is possible to calculate success rates for funding in scientific categories. For example, the following graphs and tables illustrate FY2018 success rates for selected Special Interest Categories and for the highest incidence cancers. The highest incidence cancer rankings are from the SEER rank of top 15 cancer sites, 2012–2016, age-adjusted incidence for all races and sexes.

Success rates were calculated by dividing the total number of newly and competing funded applications in 2018 for that research category (SIC or Organ Site) by the total number of applications reviewed for that research category (see Figures 9 and 10).

Bladder

Sorted by Success Rate 0% 15% 20% **Pancreas** 16.78% Leukemia 16.51% Thyroid 16.43% Colon, Rectum 16.31% Melanoma 16.23% Non-Hodgkin Lymphoma 16.08% 15.39% Liver Kidney 15.12% Stomach 14.54% 13.61% Lung Uterus 13.15% Prostate 13.01% Oral Cavity and Pharynx 12.64% Breast 12.37%

11.66%

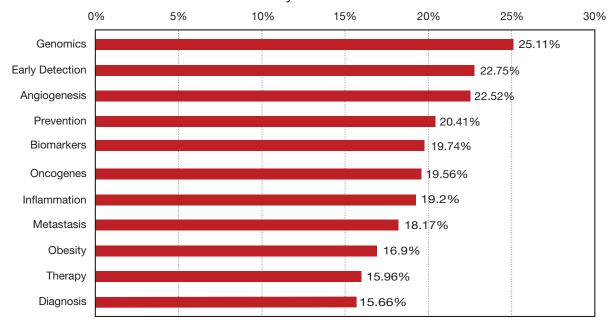
Figure 9. FY2018 Success Rates for Applications in High Incidence Cancers*

Selected Oncology Sites	SEER Rank*	Types 1 & 2 Funded	Total Applications Received	2018 Success Rate (%)	Total Funding for Types 1 & 2
Pancreas	12	130	774	16.78	\$44,155,306
Leukemia	11	126	641	16.51	\$64,627,594
Thyroid	9	12	763	16.43	\$2,954,352
Colon, Rectum	4	180	1,103	16.31	\$85,760,626
Melanoma	5	120	739	16.23	\$40,507,974
Non-Hodgkin Lymphoma	7	60	373	16.08	\$24,517,006
Liver	14	83	539	15.39	\$30,359,308
Kidney	8	31	205	15.12	\$7,996,647
Stomach	15	8	55	14.54	\$3,842,799
Lung	2	199	1,462	13.61	\$85,480,718
Uterus	10	10	76	13.15	\$1,584,462
Prostate	3	130	999	13.01	\$49,462,789
Oral cavity & pharynx	11	11	87	12.64	\$3,097,963
Breast	1	336	2,715	12.37	\$119,624,571
Bladder	16	21	180	11.66	\$10,256,528

^{*}RAEB 2018 data using SEER rank of top 15 cancer sites 2012-2016 age-adjusted incidence for all races and sexes.

Figure 10. FY2018 Success Rates for Applications in Selected Special Interest Categories (SIC)

Sorted by Success Rate



Special Interest Category	Types 1 & 2 Funded	Total Applications Received	2018 Success Rate (%)	Total Funding for Types 1 & 2
Genomics	325	1,294	25.11	\$147,198,7016
Early Detection	149	655	22.75	\$77,467,875
Angiogenesis	50	222	22.52	\$7,097,163
Prevention	219	1,073	20.41	\$82,369,740
Biomarkers	381	1,930	19.74	\$126,520,718
Oncogenes	241	1,232	19.56	\$68,784,638
Inflammation	120	625	19.20	\$25,819,992
Metastasis	376	2,069	18.17	\$107,911,615
Obesity Therapy	48	284	16.90	\$11,298,227
Therapy	1,133	7,095	15.96	\$503,522,311
Diagnosis	361	2,305	15.66	\$191,884,642

Information Resources Management

The Applied Information Systems Branch (AISB) provides integrated computer support, information technology expertise, and information systems development for the DEA. The AISB maintains and monitors the DEA Internet and Intranet websites; designs, develops, and maintains Division-specific software applications; administers and maintains DEA servers; provides information technology service desk support; provides oversight of hardware and connectivity; coordinates National Board and Committee virtual meetings; and serves as a liaison with the NIH Center for Information Technology (CIT) and the NCI Center for Biomedical Informatics and Information Technology (CBIIT). Its mission is critical to the Division in communicating current information technology activities and new developments to all components of the NCI and NIH, as well as to external reviewer and applicant communities.

DEA's Information Technology and Information Systems contracts are managed by the AISB. The AISB has a computer support team to track staff requests, manage the Division's computer equipment inventory, and provide information systems and application training, as needed. The branch is integrated into the business operations of all aspects of the division, supporting key activities with technological solutions and expertise. Specific projects utilizing the technologies and services provided by the AISB are described under the appropriate functions of the DEA throughout this report.

For FY2018, specific AISB accomplishments are highlighted below.

System Adiministration and Desktop Support

- Maintained and augmented the real-time security configurations and upkeep of Division IT assets, from mobile device and desktop to server and database.
- Performed DEA Information System (DEAIS) and Fiscal Linked Analysis of Research

- Emphasis (FLARE) Security and Assurance review and annual continuous monitoring exercises, including NIST 800-53(r4) controls update and assessment report (SAR).
- Documented updates for Contingency Plans (CP), CP Testing, CP Training; Configuration Management Policy.
- Conducted Audit Policy and Procedures; Risk Assessment; Annual Assessment; System Security Plan; E-Authentication (FIPS-199 Standards for Security Categorization of Federal Information and Information Systems Assessment); and Privacy Impact Analysis.
- Participated in NCI and NIH meetings, working groups, and forums on cybersecurity.
- Monitored and incorporated Federal cybersecurity regulations and industry best-practices into standard practices and procedures.
- Worked with ICs and the Agency on cybersecurity monitoring, auditing, reporting, and weekly preparation for the GAO audit.
- Worked with the NCI security team to prepare for the Government Accountability Office (GAO) audit of the Agency's information systems;
- Upgraded, remediated, and maintained server platforms and server-based environmental components; migrated SharePoint service to latest release;
- Coordinated with CBIIT on support of teleconferenced national board and committee meetings.
- Participated in NCI-CBIIT early rollouts of mobile device management and office to the cloud initiatives.

Desktop and Mobile Support – Provided service desk supports for the DEA staff; resolved 1,200 desktop support issues; performed a technology refresh and configuration for 45 percent of the DEA desktops and monitors; migrated division staff to NCI Office email to the cloud for more secure, compliant, and accessible email archive service; upgraded the IT asset accountability system

to achieve greater than 98 percent accountability of Division technology assets; and continued migration of electronic document distribution to replace paper for advisory board and committee meetings. Supported enterprise service desk response by assuming greater control and responsibility for desktop configuration and management, resulting in less equipment downtime and faster service response time. Coordinated with NCI CBIIT to conduct various technology pilot and early release projects.

Application Development Projects

- Inventory Deployed an application to manage the Division's office supplies. The application will centralize and automate request submission, fulfillment tracking, inventory management, and reporting; currently in pre-release testing. Trained staff in usage and initiated a first refinement cycle for development.
- Managed and maintained the portfolio of some 40 applications, utilities, and reporting tools through software development life cycle practices to support the Division's activities and mission. Each of the portfolio items is reviewed for maintenance, enhancement, replacement, or end-of-life action.
- Overall, there were more than 70 production releases of 34 different applications, and 32 application component updates. Numerous security, infrastructure, and host environment updates were made. Databases and application environments were upgraded and patched to maintain the highest quality and security of information.

User Training

- Co-led or participated in DEA's Program and Review Extramural Staff Training Office (PRESTO).
- Trained lead users on Inventory and Peer Review Roster applications.
- Trained users on various office automation software and collaboration tools.

DEA Website Development and Maintenance

- Continuously monitored the Federal-wide Web-page accessibility (508) refresh.
 Reviewed audit results and planned and initiated remediation of Web pages.
- Initiated a pilot of next-generation hosting services and infrastructure.

Development and Support of Software Applications for the Research Analysis and Evaluation Branch (RAEB) - Scientific Coding and Analysis

- Completed migration to Federated login.
- Supported the reconciliation of AIDS grants indexing by updating codes and data mapping.
- Performed routine and on-demand customized reporting activities.
- Adjusted reporting and data tools to align to emerging business needs, including the NIH-NIAID cooperative AIDS indexing initiative.
- Planned and implemented numerous code and database performance enhancements to reduce processing time and improve data reporting integrity.
- Defined scientific index interoperability between FLARE and NCI EVS.
- Refined and prepared core database redesign.
 Developed a replacement migration strategy.
- Improved the development and documentation workflow through adoption and implementation of team collaboration tools.

AISB Staff Involvement

AISB staff represented the needs and concerns of DEA staff through active participation in the following groups: NCI Research Funding Ecosystem Initiative, Weekly GAO Audit Prep Team, CBIIT Next Gen Hosting Task Force, Software Licensing Management Workgroup, Office 365 Email to the Cloud group, Service Now SIG, NCI Informatics and IT Advisory Group (IITAG), and NIH eRA Technical Users Group (eTUG).

Organizational Structure of the Division of Extramural Activities

Office of the Director (OD)

- Directs and administers the operations of the Division, including those activities relating to grant review, contract review, referral and program coordination of FOAs.
- Directly coordinates and manages the NCAB, BSA, and FNLAC activities.
- Coordinates coding of NCI's grant portfolio.
- Initiates, coordinates, and implements Institute policies and procedures relating to grants and contracts reviews.
- Oversees the NCI's Committee Management Office.
- Coordinates, develops, and implements extramural policy.
- Implements NCI policies regarding extramural research integrity and serves as the NCI Research Integrity Office.
- Advises the Scientific Program Leadership (SPL) Committee, NCI, on extramural guidelines, review, advisory activities, and implementation strategies.
- Coordinates NCI extramural staff training requirements with the NIH.
- Represents the NCI on the NIH-wide Extramural Program Management Committee (EPMC), with responsibility for development of extramural policy and procedures across all NIH Institutes and Centers.
- Oversees inclusion of genders, minorities, and children.
- Serves as the NCI Research Integrity Office.
- Coordinates, develops, and implements extramural policy.

Paulette Gray, Ph.D	Director
Vacant	Deputy Director
Wlodek Lopaczynski, M.D., Ph.D	Assistant Director
Ricardo Rawle	Special Assistant to the Director
Thu Nguyen	Program Analyst
Deneen Mattocks*	Program Specialist
Kathy Tiong [†]	Program Analyst
Peter Wirth, Ph.D	Contractor

^{*} Joined in January 2018.

DEA Processing and Distribution Unit (DPDU)

- Provides services to DEA staff, including the coordination, consolidation, purchasing of supplies, tracking of expenditures, and preparation of meeting folders, Board books, orientation documents, and annual reports.
- Maintains DEA facilities.

Ricardo Rawle	Lead Program Analyst
Clara Murphy	Program Specialist
Adrian Bishop	Program Specialist
Sanjeeb Choudhry*	File Clerk
Robert Kruth	Program Assistant

^{*}Left in May 2018.

[†]Transferred to the ORPPC Office in November 2017.

Committee Management Office (CMO), OD

- Coordinates functionally related Federal advisory committee activities across the Institute and its client-Institutes. The office manages NCI advisory committees and serves as an NIH Service Center for the NIH Council of Councils (CoC), Advisory Committee to the Director, NIH (ACD), Advisory Committee on Research on Women's Health (ACRWH), Recombinant DNA Advisory Committee (RAC), and to seven National Institute on Alcohol Abuse and Alcoholism (NIAAA) advisory committees to ensure that appropriate policies and procedures are in place to conduct the designated mission of each committee.
- Acts as a Service Center to provide advisory committee policy and management services to the Division of Program Coordination, Planning, and Strategic Initiatives; Office of Research on Women's Health; Office of Science Policy; Office of the Director; National Institutes of Health; and NIAAA.
- Provides policy guidance to the NCI and client-Institute staff on administrative and technical aspects of Federal Advisory Committees; coordinates activities with all other NCI Advisory Committees; implements policies and procedures designed to avoid conflicts in the nomination, selection, and recruitment of board members; develops CM Module business rules; implements CM Module guidelines and procedures to ensure that all committee-related data are correctly entered into the database for preparation and submission of required annual reports to the President of the United States, GSA, HHS, and NIH; provides logistical support for the NCAB, FNLAC, and BSA meetings, subcommittees, and work groups; and facilitates NCAB, FNLAC, and BSA committee-related travel.
- Researches and evaluates financial interests, covered relationships and foreign activities issues
 for client-Institutes, and provides advice on resolutions affecting advisory committee members
 serving as special government employees.
- Provides administrative support for the peer review system by compensating consultants for their services on NCI IRG subcommittees and SEPs, reimbursing consultants for travel and other expenses, and approving and processing payments for other activities related to review, such as hotel contracts and teleconferencing.

Claire L. Harris*	Committee Management Officer
	Acting Committee Management Officer
Etsegenet Abebe	
Ron Livingston†	Senior Committee Management Specialist
Alonda Lord	Committee Management Specialist
Rosalind Niamke	Committee Management Specialist
Kenny Nock	Committee Management Specialist
Sondra Sheriff	Senior Committee Management Specialist
Christine Skeens	Program Analyst
Margaret Vardanian	Contractor

^{*}On detail, OD NIH.

[†]Left in May 2018.

Program and Review Extramural Staff Training Office (PRESTO)

- Develops and implements both broad-based and focused curricula for NCI Program and Review staff.
- Coordinates training for other extramural staff upon request.
- Identifies and develops resources (electronic and human) to facilitate learning and optimal individual, group, and organizational performance.
- Collaborates with NCI Divisions, Offices, Centers, and groups, both internal and external to the NCI, to provide customized job-related training and career development opportunities.
- Tracks participation of extramural staff in NIH- and NCI-sponsored training activities.

Michael Small, Ph.D	Chief
Scot Chen, Ph.D	Health Scientist Administrator
Ivan Ding, M.D	Health Scientist Administrator
Gregory Jones*	Program Analyst
Denise Santeufemio	Program Analyst
Janet Craigie	Program Analyst
Sheila Hester	Program Analyst
Lauren McLaughlin	Program Staff Assistant

^{*} Left in September 2018.

Office of Referral, Review, and Program Coordination (ORRPC)

- Coordinates program concept development, publication functions, and receipt, referral, and assignment of all NCI applications.
- Coordinates review activities of the RTRB, RPRB, SRB, RTCRB, and PCRB.

Shamala Srinivas, Ph.D	Associate Director
Catherine Battistone*	Program Analyst
Linda Brown	Secretary
Kathy Tiong †	Program Analyst

^{*} Left in February 2018.

[†] Joined in November 2017.

Special Review Branch (SRB)

- Plans, manages, and assists in the scientific and technical review of grant and cooperative agreement applications received in response to RFAs, PAs, and PARs.
- Identifies and recommends appropriate review committee members as required for the review of assigned applications.
- Provides SROs and other support staff to manage technical review committees.
- Serves as the information and coordination center for all grant applications and cooperative agreements pending review by the Branch.
- Provides input and advice on grant review policy and procedures, application patterns, research trends, and other related information, as required.

David Ransom, Ph.D.*	Chief
Shamala Srinivas, Ph.D.†	Acting Chief
Eun Ah Cho, Ph.D	Scientific Review Officer
Robert Coyne, Ph.D	Scientific Review Officer
Hasan Sidiqui, Ph.D	Scientific Review Officer
Sage Kim, Ph.D	Scientific Review Officer
Ombretta Salvucci, Ph.D	Scientific Review Officer
Cliff Schweinfest, Ph.D	Scientific Review Officer
Jennifer Schiltz, Ph.D	Scientific Review Officer
Zhiqiang Zou, Ph.D	Scientific Review Officer
Imela Gradington-Jones	Program Specialist
Micah Traurig	Staff Assistant

^{*} Branch Chief since April 2018.

[†]Acting Branch Chief until April 2018.

Research Technology and Contract Review Branch (RTCRB)

- Plans, manages, and assists in the scientific and technical merit review of grant and cooperative agreement applications received in response to RFAs and PARs, and contract proposals received in response to RFPs.
- Identifies and recommends appropriate review committee members as required for the review of assigned applications and proposals.
- Provides SROs and other support staff for technical review committees.
- Serves as the information and coordination center for all technology-related grant applications and contract proposals pending review by the Branch.
- Provides input and advice on grant and contract review policy and procedures, application and proposal patterns, and research trends and other related information, as required.

Chief
Scientific Review Officer
Program Analyst
Staff Assistant
Staff Assistant
Staff Assistant
Staff Assistant

^{*}Left in September 2018.

[†]Left in August 2018.

Program Coordination and Referral Branch (PCRB)

- Serves as the information and coordination point within the NCI for the development, clearance, publication, and tracking of all NCI extramural program (funding) initiatives, which include all RFAs, PAs, and Notices submitted for publication in the NIH Guide for Grants and Contracts, and also for posting and availability on Grants.gov, which is a Federal-wide online portal for electronic submission of grant applications.
- Refers all NCI-assigned applications to the appropriate cancer activity area(s) according to the NCI Internal Referral Guidelines that define the program interests of each of the 54 cancer activity areas (which typically represent program branches in the NCI extramural divisions).
- Serves as the primary point of contact and provides assistance at the NCI for applicants who want to apply for Program Project (P01), conference grant (R13), Academic Research Enhancement Award (R15), and most large-budget grant applications.
- Serves as the NCI contact point and liaison to involved parties at the NIH for approval of the use of cooperative agreement mechanisms and for conversion of grants to cooperative agreements.
- Serves as the primary NCI information and referral point for the extramural scientific community on a broad range of subjects, including grant guidelines, application information, new initiatives announced as RFAs or PAs, and the review process.

Christopher L. Hatch, Ph.D	Chief
David Contois	Referral Officer, NCI/NIH Referral Liaison
Anandarup Gupta, Ph.D	RFA/PA Coordinator, Scientific Review Officer
Leota Hall	Referral Officer, NCI/NIH Referral Liaison
Bratin Saha, Ph.D	Referral Officer, Scientific Review Officer
Jan Woynarowski, Ph.D	RFA/PA Coordinator, Scientific Review Officer
Natacha P. Lassègue	Program Analyst
Quynh Tram Chiaramonte	Staff Assistant

Research Programs Review Branch (RPRB)

- Plans, coordinates, and manages the scientific review of program project grants, specialized centers, and other grant mechanisms, as necessary, by Special Emphasis Panels.
- Identifies and recommends appropriate review committee members for the review of assigned applications.
- Provides input and advice on grant review policy and procedures, application patterns, research trends, and other related information, as required.
- Coordinates grant review activities with staff of other NCI Divisions/Offices/Centers and other DEA Branches.

Caron A. Lyman, Ph.D	.Chief
Robert Bird, Ph.D	Special Assistant
Sanita Bharti, Ph.D	Scientific Review Officer
Majed Hamawy, Ph.D., M.B.A	Scientific Review Officer
Klaus Piontek, Ph.D	Scientific Review Officer
Anita Tandle, Ph.D	Scientific Review Officer
Mukesh Kumar, Ph.D	Scientific Review Officer
Charles Choi	Program Analyst
Deneen Mattocks*	Lead Staff Assistant
Stefanie Powell	Staff Assistant
Cameron Stansbury	Staff Assistant

^{*}Moved to OD in January 2018.

Resources and Training Review Branch (RTRB)

- Plans, coordinates, and manages the scientific merit review of cancer center, training, education, and career development grant and cooperative agreement applications by chartered IRG committees and Special Emphasis Panels.
- Arranges for and participates in onsite assessments (site visits) of the research capabilities and facilities of selected applicants (i.e., Cancer Centers).
- Identifies and recommends appropriate review committee members and site visitors, as required, for the review of assigned applications.
- Provides input and advice on grant review policy and procedures, application patterns, and research trends and other related information, as required.
- Coordinates grant review activities with staff of other NCI Divisions/Offices/Centers, other DEA Branches, and the Center for Scientific Review.

Caterina Bianco Ph.D	Chief
Tushar Deb, Ph.D	Scientific Review Officer
Byeong-Chel Lee, Ph.D	Scientific Review Officer
Timothy Meeker, M.D	Scientific Review Officer
David Ransom, Ph.D.*	Scientific Review Officer
Adriana Stoica, Ph.D	Scientific Review Officer
Delia Tang M.D	Scientific Review Officer
Donnell Wilson	Program Analyst
Linda Edwards	Staff Assistant
Leslie Kinney	Staff Assistant
Bridgette Wilson	Staff Assistant

^{*}Moved to SRB in April 2018.

Office of Extramural Applications

- Coordinates activities of the Research Analysis and Evaluation Branch (RAEB) and the Applied Information Systems Branch (AISB).
- Provides budget-linked research portfolio data and coordinates the information management of extramural NCI-supported research.

Amir Sahar-Khiz, Ph.D., M.B.A., PMP Associate Director Justin RhoderickProgram Analyst

Research Analysis and Evaluation Branch (RAEB)

- Serves as the Institute's officially designated, centralized source of scientific information and science-based budget information on NCI-supported research.
- Analyzes and classifies the science content of all Institute-supported research projects.
- Analyzes the distribution of funds among research areas; these analyses serve as a basis for budget projections.
- Reports and answers inquiries on the scientific and budgetary aspects of Institute-funded research, including research grants, center grants, training grants, and research contracts.
- Maintains liaisons with other organizations involved in related classification activities.
- Documents the need for proposed RFAs by comparing RFA concepts with existing NCI-supported research and with unsolicited applications.

Marilyn Gaston Chief Edward Kyle...... Deputy Chief

Research Documentation

- Analyzes and indexes grants and contracts for the Branch's computerized systems.
- Analyzes extramural projects for relevance to Special Interest Categories (SICs) and Anatomic Sites to determine the officially reported figures for Institute support and provide a basis for budget projections.
- Maintains liaison with other offices within the Institute to ensure consistent reporting of data.
- Monitors the results of NCI's grant-supported research.
- Assists other NCI organizations by indexing NCI research projects for attributes other than SICs and Sites, for example, Common Scientific Outline (CSO) Codes and AIDS Categories.125

Edward Kyle	Lead Biologist/Team Leader
Beth Buschling	Biologist
Me Hei, M.D	Health Specialist
Bernard Whitfield, M.S	Biologist
Tyrone Wilson	Biologist
Clarissa Douglas	Contractor

Technical Operations, Inquiry, and Reporting

- Provides specialized data querying, archiving, and reporting functions for the Division and the Institute.
- Coordinates Institute data reporting with the NCI Office of Budget and Financial Management, NIH Population Tracking and Inclusion Committee, and others.
- Answers inquiries from the U.S. Congress, the public, the press, and others concerning any phase of Institute-supported work.
- Conducts in-depth analyses of extramural research data, including trends analyses.
- Identifies emerging priority areas for data collection and analysis.
- Ensures that terms and categories for indexing are updated and reflect current trends in cancer research and maintains a thesaurus of term definitions.
- Manages RAEB's FLARE (Fiscal Linked Analysis Research Emphasis) grants documentation and indexing database, ensuring reliability and completeness of its contents.
- Maintains and updates archival document files.
- Works with contractors and the AISB to refine RAEB's computer applications to meet the Branch's needs and resolve FLARE computer application problems for the Branch.
- Represents the DEA as its communications coordinator in the Office of Communications and Education Steering Committee.

Marilyn Gaston Lead Biologist/Team Leader William Clark, M.S. Biologist Rajasri Roy, Ph.D. Epidemiologist

Applied Information Systems Branch (AISB)

- Fulfills the information technology (IT) requirements of the Division by coordinating information resources management (IRM) activities with other relevant NCI and NIH units, and by providing high-quality information analysis, design, development, and coordination of applications in support of the Division's business processes.
- Coordinates, conducts, and maintains the development and deployment of specialized software and database systems for the Division for the conduct of review, referral, coding, advisory, and other extramural-related operations.
- Serves as the liaison with the NCI Center for Biomedical Informatics and Information Technology (CBIIT) staff; NCI computer professionals; NCI units charged with execution of extramural IRM functions; trans-NIH functional units such as the CSR, Office of Policy for Extramural Research Administration (OPERA), and Office of Extramural Research (OER) and the IMPAC II and NIH eRA (electronic Research Administration) staff and systems.
- Supports connectivity and design of the DEA Internet and Intranet websites and applications.
- Establishes, administers, and monitors IT support contracts to provide design, development, maintenance, and support for Division information systems.
- Formulates and establishes the DEA-specific office automation policy.
- Provides desktop support and technology refresh for the Division and conducts training for the DEA IT applications.
- Coordinates general user support and training with NCI and NIH services. Co-leads or participates in Program and Review Extramural Staff Training Office (PRESTO) training sessions.
- Provides Division-specific video teleconferencing, audiovisual services, and application support for review and National Board and Committee activities.
- Conducts security assessment and authorization implementation for the Division's information systems.

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Application Development Team

- Analyzes and coordinates life-cycle software development for the Division.
- Develops, designs, and maintains applications to support the Division's business processes.
- Develops, administers, and monitors contracts for acquisition, support, and maintenance of the Division's information systems.
- Formulates system development policy and oversees eRA/IMPAC II operations for the Division. Coordinates internal user groups and training for specific DEA applications.

Todd Hardin	.Team Leader
Teresa Park	Information Technology Specialist
Vivien Yeh	Information Technology Specialist

Information Management Team

- Designs and maintains the Division's Intranet and Internet websites, ensures compliance with relevant Federal Web standards, policies, and guidelines.
- Works with DEA staff to ensure accurate and latest information postings and linkages across the DEA websites.
- Coordinates application development and supports the RAEB in the areas of scientific coding and analysis.
- Establishes partnerships and ongoing communications with staff and external customers to foster openness and collaboration in accomplishing the information initiatives of the Division.

Joshua Rhoderick	Team Leader
Michael Hu	Information Technology Specialist
Lorrie Smith	Information Technology Specialist
Vacant	Information Technology Specialist

Operations Team

- Administers and maintains the Division's server infrastructure in support of DEA applications, databases, and websites.
- Conducts configuration management in accordance with Federal cybersecurity policies and regulations.
- Coordinates network connectivity for the Division with NCI-CBIIT.
- Researches and recommends IT-related equipment, service, and support for the Division.
- Provides end-to-end technical service and IT service desk support for desktop and laptop computers, mobility solutions, office automation products, and licensed software applications.
- Acquires and administers the Division's information technology assets—computer hardware, software, IT maintenance contracts, and supplies.
- Maintains and is accountable for IT equipment inventory for the Division.
- Implements and maintains Federal policies for the use of office automation technology.
- Supports National Board meeting technological needs.

Richard Florence	. leam Leager
Roderick James	. Information Technology Specialist
Raymond Vidal	. Information Technology Specialist

Table 1a. Requests for Applications (RFAs) Published by the NCI in FY2018Sorted by Date of Publication

Date of Publication	RFA	Mechanism	Title	Division, Office, and Center
	CA17-047	U24	Immuno-Oncology Translation Network (IOTN): Data Management and Resource-Sharing Center (DMRC) (U24)	- DCB
10/10/2017	CA17-046	U01	Immuno-Oncology Translation Network (IOTN): Cancer Immunoprevention Research Projects (U01)	DOD
10/10/2017	CA17-048	U24	Immuno-Oncology Translation Network (IOTN): Cellular Immunotherapy Data Resource (CIDR) (U24)	DCTD
	CA17-045	U01	Immuno-Oncology Translational Network (IOTN): Cancer Immunotherapy Research Projects (U01)	DCB
	CA17-032	U54	Minority-Patient Derived Xenograft (PDX) Development and Trial Center (PDTC) Network (U54)	_
10/13/2017	CA17-033	P20	Feasibility and Planning Studies for Development of Specialized Programs of Research Excellence (SPOREs) to Investigate Cancer Health Disparities (P20)	CRCHD
10/18/2017	CA17-042	UM1	Research Centers for Improving Management of Symptoms Across Cancer Treatments (IMPACT) (UM1)	DCCPS
10/10/2017	CA17-043	U24	Coordinating Center for Improving Management of Symptoms Across Cancer Treatments (IMPACT) (U24)	рсого
10/10/0017	CA17-056	U10	Limited Competition: NCI National Clinical Trials Network - Network Group Operations Centers (U10)	DCTD
10/19/2017	CA17-057	U10	Limited Competition: NCI National Clinical Trials Network - Network Group Statistics and Data Management Centers (U10)	
	CA17-038	UG3, UH3	Accelerating Colorectal Cancer Screening and follow-up through Implementation Science (ACCSIS)(UG3/UH3)	DCCPS
	CA17-060	U24	Limited Competition: NCI National Clinical Trials Network - Network Radiotherapy and Imaging Core Services Center (U24)	-
	CA17-061	UG1	NCI National Clinical Trials Network - Network Group Integrated Translational Science Centers (UG1)	
	CA17-059	UG1	NCI National Clinical Trials Network (NCTN) - Network Lead Academic Participating Sites (UG1)	DCTD
10/20/2017	CA17-058	U10	Limited Competition: NCI National Clinical Trials Network - Canadian Collaborating Clinical Trials Network (U10)	
	CA17-044	U24	Mechanisms of Cancer Drug Resistance and Sensitivity: Coordinating Center (U24)	
	CA17-039	U24	Accelerating Colorectal Cancer Screening and follow-up through Implementation Science (ACCSIS): Coordinating Center (U24)	DCCPS
	CA17-036	U24	Human Tumor Atlas Network: Data Coordinating Center (U24)	CSSI
	CA17-035	U2C	Human Tumor Atlases (HTA) Precancer Atlas Research Centers (U2C)	DCP
	CA17-034	U2C	Human Tumor Atlases (HTA) Research Centers (U2C)	DCB DCTD
11/14/2017	CA18-001	F99, K00	The NCI Predoctoral to Postdoctoral Fellow Transition Award (F99/K00)	CCT

continued

Table 1a (cont'd). Requests for Applications (RFAs) Published by the NCI in FY2018

Sorted by Date of Publication

Date of Publication	RFA	Mechanism	Title	Division, Office, and Center
	CA18-003	R33	Advanced Development and Validation of Emerging Molecular and Cellular Analysis Technologies for Basic and Clinical Cancer Research (R33 - Clinical Trial Not Allowed)	
11/20/2017	CA18-002	R21	Innovative Molecular and Cellular Analysis Technologies for Basic and Clinical Cancer Research (R21 - Clinical Trial Not Allowed)	
11/20/2017	CA18-004	R21	Innovative Biospecimen Science Technologies for Basic and Clinical Cancer Research (R21 - Clinical Trial Not Allowed)	CSSI
	CA18-005	R33	Advanced Development and Validation of Emerging Biospecimen Science Technologies for Basic and Clinical Cancer Research (R33 - Clinical Trial Not Allowed)	
	CA18-009	P01	Revisions for Incorporation of Novel NCI-Supported Technology to Accelerate Cancer Research (P01 Clinical Trials Optional)	
	CA18-008	U54	Revisions for Incorporation of Novel NCI-Supported Technology to Accelerate Cancer Research (U54 Clinical Trials Optional)	
12/4/2017	CA18-007	U01	Revisions for Incorporation of Novel NCI-Supported Technology to Accelerate Cancer Research (U01 Clinical Trials Optional)	CSSI
	CA18-006	R01	Revisions for Incorporation of Novel NCI-Supported Technology to Accelerate Cancer Research (R01 Clinical Trials Optional)	
	CA18-010	P50	Revisions for Incorporation of Novel NCI-Supported Technology to Accelerate Cancer Research (P50 Clinical Trials Optional)	
2/14/2018	CA18-011	R44	SBIR Phase IIB Bridge Awards to Accelerate the Development of Cancer- Focused Technologies Toward Commercialization (R44 Clinical Trial Optional)	SBIRDC
3/9/2019	CA18-019	R01	Research Answers to National Cancer Institute's (NCI) Provocative Questions (R01 Clinical Trial Optional)	CSSI
3/9/2019	CA18-020	R21	Research Answers to National Cancer Institute's (NCI) Provocative Questions (R21 Clinical Trial Optional)	6991
	CA18-022	U01	Revision Applications to National Cancer Institute (NCI)-supported U01 Awards to Include Research on the NCI's Provocative Questions (U01 Clinical Trial Optional)	
4/3/2018	CA18-023	P01	Revision Applications to National Cancer Institute (NCI)-supported P01 Awards to Include Research on the NCIs Provocative Questions (P01 Clinical Trial Optional)	CSSI
4/3/2010	CA18-024	P50	Revision Applications to National Cancer Institute (NCI)-supported P50 Awards to Include Research on the NCI's Provocative Questions (P50 Clinical Trial Optional)	0331
	CA18-021	R01	Revision Applications to National Cancer Institute (NCI)-Supported R01 Awards to Include Research on the NCI's Provocative Questions (R01 Clinical Trial Optional)	
4/27/2018	CA18-026	R01	Improving the Reach and Quality of Cancer Care in Rural Populations (R01 Clinical Trial Required)	DCCPS
E (4.0/004.0	CA18-014	R21	Investigation of the Transmission of Kaposi Sarcoma-Associated Herpesvirus (KSHV)(R21 Clinical Trial Not Allowed)	Ollana
5/10/2018	CA18-013	R01	Investigation of the Transmission of Kaposi Sarcoma-associated Herpesvirus (KSHV)(R01 Clinical Trial Optional)	OHAM

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Table 1a (cont'd). Requests for Applications (RFAs) Published by the NCI in FY2018Sorted by Date of Publication

Date of Publication	RFA	Mechanism	Title	Division, Office, and Center
	CA18-017	UG1	NCI Community Oncology Research Program (NCORP) Minority/ Underserved Community Sites (UG1 Clinical Trial Required)	
6/13/2018	CA18-016	UG1	NCI Community Oncology Research Program (NCORP) Community Sites (UG1 Clinical Trial Required)	DCP
	CA18-015	UG1	NCI Community Oncology Research Program (NCORP) Research Bases (UG1 Clinical Trial Required)	
6/22/2018	CA18-025	UM1	Collaborative Human Tissue Network (CHTN) (UM1 Clinical Trials Not Allowed)	DCTD
8/9/2018	CA18-012	UM1	Limited Competition: AIDS and Cancer Specimen Resource (ACSR) (UM1 Clinical Trials Not Allowed)	DCTD
8/10/2018	CA19-017	U01	Approaches to Identify and Care for Individuals with Inherited Cancer Syndromes (U01 Clinical Trial Required)	DCCPS
8/13/2018	CA19-003	U54	Pediatric Immunotherapy Discovery and Development Network (PI-DDN) (U54 - Clinical Trial Not Allowed)	- DCB
0/13/2010	CA19-004	U01	Pediatric Immunotherapy Discovery and Development Network (PI-DDN) (U01 - No Clinical Trial Allowed)	
8/24/2018	CA18-028	R21	Improving Smoking Cessation Interventions among People Living with HIV (R21 Clinical Trial Optional)	- DCCPS
0/24/2010	CA18-027	R01	Improving Smoking Cessation Interventions among People Living with HIV (R01 Clinical Trial Optional)	росго
8/28/2018	CA18-018	U54	Prevention of HPV-related Cancers in HIV-infected individuals: United States-Latin American-Caribbean Clinical Trials Network: Partnership Centers (U54 Clinical Trial Required)	DCP
9/10/2018	CA19-001	U01	Communication and Decision Making for Individuals with Inherited Cancer Syndromes (U01 Clinical Trial Optional).	DCCPS
9/11/2018	CA19-016	U54	Fusion Oncoproteins in Childhood Cancers (FusOnC2) Consortium (U54 Clinical Trial Not Allowed)	DCB DCTD
9/14/2018	CA18-030	U24	Cancer Prevention Clinical Trials Network (CP-CTNet): Data Management, Auditing, and Coordinating Center (DMACC) (U24 Clinical Trials Required)	- DCP
3/14/2010	CA18-029	UG1	Cancer Prevention Clinical Trials Network (CP-CTNet): CP-CTNet Sites (UG1 Clinical Trial Required)	DOF
9/17/2018	CA19-002	R01	The NCI Predoctoral to Postdoctoral Fellow Transition Award (F99/K00)	CCT

Table 1b. Requests for Applications (RFAs) Published by the NCI in FY2018

Sorted by Division, Office, and Center

Division, Office, and Center	RFA	Mechanism	Title	Date of Publication
CCT	CA18-001	F99, K00	The NCI Predoctoral to Postdoctoral Fellow Transition Award (F99/K00)	11/14/2017
	CA19-002	R01	The NCI Predoctoral to Postdoctoral Fellow Transition Award (F99/K00)	9/17/2018
	CA17-032	U54	Minority-Patient Derived Xenograft (PDX) Development and Trial Center (PDTC) Network (U54)	
CRCHD	CA17-033	P20	Feasibility and Planning Studies for Development of Specialized Programs of Research Excellence (SPOREs) to Investigate Cancer Health Disparities (P20)	10/13/2017
	CA17-036	U24	Human Tumor Atlas Network: Data Coordinating Center (U24)	10/20/2017
	CA18-003	R33	Advanced Development and Validation of Emerging Molecular and Cellular Analysis Technologies for Basic and Clinical Cancer Research (R33 - Clinical Trial Not Allowed)	_
	CA18-002	R21	Innovative Molecular and Cellular Analysis Technologies for Basic and Clinical Cancer Research (R21 - Clinical Trial Not Allowed)	- 11/20/2017
	CA18-004	R21	Innovative Biospecimen Science Technologies for Basic and Clinical Cancer Research (R21 - Clinical Trial Not Allowed)	11/20/2017
	CA18-005	R33	Advanced Development and Validation of Emerging Biospecimen Science Technologies for Basic and Clinical Cancer Research (R33 - Clinical Trial Not Allowed)	
	CA18-009	P01	Revisions for Incorporation of Novel NCI-Supported Technology to Accelerate Cancer Research (P01 Clinical Trials Optional)	12/4/2017
	CA18-008	U54	Revisions for Incorporation of Novel NCI-Supported Technology to Accelerate Cancer Research (U54 Clinical Trials Optional)	
	CA18-007	U01	Revisions for Incorporation of Novel NCI-Supported Technology to Accelerate Cancer Research (U01 Clinical Trials Optional)	
CSSI	CA18-006	R01	Revisions for Incorporation of Novel NCI-Supported Technology to Accelerate Cancer Research (R01 Clinical Trials Optional)	
	CA18-010	P50	Revisions for Incorporation of Novel NCI-Supported Technology to Accelerate Cancer Research (P50 Clinical Trials Optional)	
	CA18-019	R01	Research Answers to National Cancer Institute's (NCI) Provocative Questions (R01 Clinical Trial Optional)	- 3/9/2018
	CA18-020	R21	Research Answers to National Cancer Institute's (NCI) Provocative Questions (R21 Clinical Trial Optional)	3/3/2010
	CA18-022	U01	Revision Applications to National Cancer Institute (NCI)-Supported U01 Awards to Include Research on the NCI's Provocative Questions (U01 Clinical Trial Optional)	_
	CA18-023	P01	Revision Applications to National Cancer Institute (NCI)-supported P01 Awards to Include Research on the NCIs Provocative Questions (P01 Clinical Trial Optional)	1015
	CA18-024	P50	Revision Applications to National Cancer Institute (NCI)-Supported P50 Awards to Include Research on the NCI's Provocative Questions (P50 Clinical Trial Optional)	- 4/3/2018
	CA18-021	R01	Revision Applications to National Cancer Institute (NCI)-Supported R01 Awards to Include Research on the NCI's Provocative Questions (R01 Clinical Trial Optional)	_

continued

Table 1b (cont'd). Requests for Applications (RFAs) Published by the NCI in FY2018Sorted by Division, Office, and Center

Division, Office, and Center	RFA	Mechanism	Title	Date of Publication
	CA17-046	U01	Immuno-Oncology Translation Network (IOTN): Cancer Immunoprevention Research Projects (U01)	10/10/2017
	CA19-003	U54	Pediatric Immunotherapy Discovery and Development Network (PI-DDN) (U54 - Clinical Trial Not Allowed)	8/13/2018
	CA19-004	U01	Pediatric Immunotherapy Discovery and Development Network (PI-DDN) (U01 - No Clinical Trial Allowed)	0/13/2010
DCB	CA17-047	U24	Immuno-Oncology Translation Network (IOTN): Data Management and Resource-Sharing Center (DMRC) (U24)	
	CA17-048	U24	Immuno-Oncology Translation Network (IOTN): Cellular Immunotherapy Data Resource (CIDR) (U24)	10/10/2017
	CA17-045	U01	Immuno-Oncology Translational Network (IOTN): Cancer Immunotherapy Research Projects (U01)	
	CA17-034	U2C	Human Tumor Atlases (HTA) Research Centers (U2C)	10/20/2017
	CA19-016	U54	Fusion Oncoproteins in Childhood Cancers (FusOnC2) Consortium (U54 Clinical Trial Not Allowed)	9/11/2018
	CA17-042	UM1	Research Centers for Improving Management of Symptoms Across Cancer Treatments (IMPACT) (UM1)	10/18/2017
	CA17-043	U24	Coordinating Center for Improving Management of Symptoms Across Cancer Treatments (IMPACT) (U24)	10/10/2017
	CA17-038	UG3, UH3	Accelerating Colorectal Cancer Screening and follow-up through Implementation Science (ACCSIS)(UG3/UH3)	- 10/20/2017
	CA17-039	U24	Accelerating Colorectal Cancer Screening and follow-up through Implementation Science (ACCSIS): Coordinating Center (U24)	10/20/2017
DCCPS	CA18-026	R01	Improving the Reach and Quality of Cancer Care in Rural Populations (R01 Clinical Trial Required)	4/27/2018
	CA19-017	U01	Approaches to Identify and Care for Individuals with Inherited Cancer Syndromes (U01 Clinical Trial Required)	8/10/2018
	CA18-028	R21	Improving Smoking Cessation Interventions among People Living with HIV (R21 Clinical Trial Optional)	0/24/2010
	CA18-027	R01	Improving Smoking Cessation Interventions among People Living with HIV (R01 Clinical Trial Optional)	8/24/2018
	CA19-001	U01	Communication and Decision Making for Individuals with Inherited Cancer Syndromes (U01 Clinical Trial Optional).	9/10/2018

continued

Table 1b (cont'd). Requests for Applications (RFAs) Published by the NCI in FY2018

Sorted by Division, Office, and Center

Division, Office, and Center	RFA	Mechanism	Title	Date of Publication
	CA18-017	UG1	NCI Community Oncology Research Program (NCORP) Minority/Under- served Community Sites (UG1 Clinical Trial Required)	6/13/2018
	CA18-016	UG1	NCI Community Oncology Research Program (NCORP) Community Sites (UG1 Clinical Trial Required)	
	CA18-015	UG1	NCI Community Oncology Research Program (NCORP) Research Bases (UG1 Clinical Trial Required)	_
DCP	CA18-018	U54	Prevention of HPV-related Cancers in HIV-infected individuals: United States-Latin American-Caribbean Clinical Trials Network: Partnership Centers (U54 Clinical Trial Required)	8/28/2018
	CA18-030	U24	Cancer Prevention Clinical Trials Network (CP-CTNet): Data Management, Auditing, and Coordinating Center (DMACC) (U24 Clinical Trials Required)	9/14/2018
	CA18-029	UG1	Cancer Prevention Clinical Trials Network (CP-CTNet): CP-CTNet Sites (UG1 Clinical Trial Required)	
	CA17-035	U2C	Human Tumor Atlases (HTA) Precancer Atlas Research Centers (U2C)	10/20/2017
	CA17-044	U24	Mechanisms of Cancer Drug Resistance and Sensitivity: Coordinating Center (U24)	10/20/2017
	CA18-025	UM1	Collaborative Human Tissue Network (CHTN) (UM1 Clinical Trials Not Allowed)	6/22/2018
	CA18-012	UM1	Limited Competition: AIDS and Cancer Specimen Resource (ACSR)(UM1 Clinical Trials Not Allowed)	8/9/2018
	CA17-056	U10	Limited Competition: NCI National Clinical Trials Network - Network Group Operations Centers (U10)	10/10/2017
DCTD	CA17-057	U10	Limited Competition: NCI National Clinical Trials Network - Network Group Statistics and Data Management Centers (U10)	- 10/19/2017
	CA17-060	U24	Limited Competition: NCI National Clinical Trials Network - Network Radiotherapy and Imaging Core Services Center (U24)	
	CA17-061	UG1	NCI National Clinical Trials Network - Network Group Integrated Translational Science Centers (UG1)	- 10/20/2017
	CA17-059	UG1	NCI National Clinical Trials Network (NCTN)Network Lead Academic Participating Sites (UG1)	10/20/2017
	CA17-058	U10	Limited Competition: NCI National Clinical Trials Network - Canadian Collaborating Clinical Trials Network (U10)	
OHAM	CA18-014	R21	Investigation of the Transmission of Kaposi Sarcoma-Associated Herpesvirus (KSHV) (R21 Clinical Trial Not Allowed)	- 5/10/2018
UITAIVI	CA18-013	R01	Investigation of the Transmission of Kaposi Sarcoma-associated Herpesvirus (KSHV)(R01 Clinical Trial Optional)	3/10/2016
SBIRDC	CA18-011	R44	SBIR Phase IIB Bridge Awards to Accelerate the Development of Cancer-Focused Technologies Toward Commercialization (R44 Clinical Trial Optional)	2/14/2018

Table 2. NCI Participation in Trans-NIH Requests for Applications (RFAs) in FY2018

Sorted by Date of Publication

Date of Publication	RFA	Mechanism	Title	Division, Office, and Center	Issuing NIH-IC
	0D18-003	R21	Tobacco Regulatory Science (R21 Clinical Trial Optional)		
11/20/2017	0D18-002	R01	Tobacco Regulatory Science (R01 Clinical Trial Optional)	DCCPS	NIH FDA
	0D18-001	R03	Tobacco Regulatory Science Small Grant Program for New Investigators (R03 Clinical Trial Optional)		
10/00/0017	HL19-007	U01	Limited Competition: Data Analysis and Coordination Center for the MACS/WIHS Combined Cohort Study, MACS/WIHS-CCS (U01 Clinical Trials Not Allowed)	OHAM	NIII I
12/22/2017	HL19-008	U01	Limited Competition: Clinical Research Sites for MACS/WIHS Combined Cohort Study, MACS/WIHS-CCS (U01-Clinical Trials Not Allowed)	OHAM	NIH
1/04/0010	RM18-017	U01	Expanding the Human Genome Editing Repertoire (U01 Clinical Trial Not Allowed)	ALL DIVISIONS	NIII DAA
1/24/2018	RM18-018	U24	Somatic Cell Genome Editing Dissemination and Coordinating Center (U24 Clinical Trial Not Allowed)		NIH-RM
2/8/2018	MD18-006	R21	Time-Sensitive Research on Health Risk and Resilience after Hurricanes Irma and Maria in Puerto Rico and the US Virgin Islands (R21 Clinical Trial Not Allowed)	DCCPS	NIH
4/3/2018	RM18-011	U01	Cutting Edge Informatics Tools for Illuminating the Druggable Genome (U01 Clinical Trial Not Allowed)	CCG	NIH-RM
	OD18-007	K99, R00	Pathway to Independence Award in Tobacco Regulatory Research (K99/R00 - Independent Clinical Trial Not Allowed)	CCT	
	OD18-006	K01	Mentored Research Scientist Career Development Award in Tobacco Regulatory Research (K01 - Independent Clinical Trial Required)		
5/15/2018	OD18-005	K01	Mentored Research Scientist Career Development Award in Tobacco Regulatory Research (K01 - Independent Clinical Trial Not Allowed)		NIH FDA
	0D18-008	K99, R00	Pathway to Independence Award in Tobacco Regulatory Research (K99/R00 - Independent Clinical Trial Required)		
6/8/2018	TR18-020	U54	Rare Diseases Clinical Research Consortia (RDCRC) for Rare Diseases Clinical Research Network (U54 Clinical Trials Optional)	DCTD	NIH
8/2/2018	NS18-041	R33, R61	Discovery of Biomarkers, Biomarker Signatures, and Endpoints for Pain (R61/R33 Clinical Trial Optional)	DCP	NIH

continued

Table 2 (cont'd). NCI Participation in Trans-NIH Requests for Applications (RFAs) in FY2018

Sorted by Date of Publication

Date of Publication	RFA	Mechanism	Title	Division, Office, and Center	Issuing NIH-IC
0/00/0010	ES18-011	U2C	Human Health Exposure Analysis Resource: Targeted Exposure Analysis Laboratories (U2C Clinical Trial Not Allowed)	DCCDC	NIII
8/30/2018	ES18-012	U2C	Human Health Exposure Analysis Resource: Untargeted Exposure Analysis Laboratories (U2C Clinical Trial Not Allowed)	DCCPS	NIH
	NS18-043	R01	Discovery and Validation of Novel Targets for Safe and Effective Pain Treatment (R01 Clinical Trial Not Allowed)		
9/19/2018	NS18-046	R33, R61	Analytical and/or Clinical Validation of a Candidate Biomarker for Pain (R61/R33 Clinical Trial Optional)	DCP	NIH
	NS18-042	R21	Discovery and Validation of Novel Targets for Safe and Effective Pain Treatment (R21 Clinical Trial Not Allowed)		
8/6/2018	RM18-027	UG3	Advancing Extracellular RNA (exRNA) Communication Research: Improved Isolation and Analysis of exRNA-Carrier Subclasses (UG3/UH3 Clinical Trial Not Allowed)	DCB	NIH-RM
0/10/0010	RM18-036	U01	Novel and Innovative Tools to Facilitate Identification, Tracking, Manipulation, and Analysis of Glycans and their Functions (U01 Clinical Trial Not Allowed)	DCD	NIII DM
8/10/2018	RM18-037	U01	Innovative Adaptations to Simplify Existing Technologies for Manipulation and Analysis of Glycans (U01 Clinical Trial Not Allowed)	- DCP	NIH-RM

Table 3a. Program Announcements (PAs) Published by the NCI in FY2018

Sorted by Date of Publication

Date of Publication	PA/PAR	Mechanism	Title	Division, Office, and Center
10/3/2017	PAR18-303	R43, R44	Innovative Molecular Analysis Technology Development for Cancer Research and Clinical Care (R43/R44 Clinical Trial Not Allowed)	DCB
	PAR18-317	UH2, UH3	Assay Validation of High Quality Markers for Clinical Studies in Cancer (UH2/UH3 - Clinical Trials Not Allowed)	
10/12/2017	PAR18-313	P50	Specialized Programs of Research Excellence (SPOREs) in Human Cancers for Years 2018, 2019, and 2020 (P50)	DCTD
10/12/2017	PAR18-310	UH3	Assay Validation of High Quality Markers for Clinical Studies in Cancer (UH3 - Clinical Trials Not Allowed	
	PA18-314	333*	Innovation Corps (I-Corps) at NIH Program for NIH and CDC Translational Research (Admin Supp)	SBIRDC
10/30/2017	PAR18-290	P01	National Cancer Institute Program Project Applications (P01 Clinical Trial Optional)	ALL DIVISIONS
10/31/2017	PAR18-337	K08	NCI Mentored Clinical Scientist Research Career Development Award to Promote Diversity (K08 - No Independent Clinical Trials)	CRCHD
10/01/2017	PAR18-336	K08	NCI Mentored Clinical Scientist Research Career Development Award to Promote Diversity (K08 - Clinical Trials Required)	ONOTID
11/1/2017	PA18-001	R01	Advancing Translational and Clinical Probiotic/Prebiotic and Human Microbiome Research (R01 Clinical Trial Optional)	ALL
11/1/2017	PAR18-009	R01	Academic-Industrial Partnerships to Translate and Validate (In Vivo Cancer Imaging Systems (R01 Clinical Trial Optional)	DIVISIONS
	PAR18-342	R50	NCI Research Specialist (Core-Based Scientist) Award (R50)	DCB
	PA18-002	R01	Examination of Survivorship Care Planning Efficacy and Impact (R01 Clinical Trial Optional)	
11/2/2017	PA18-003	R01	Improving Outcomes in Cancer Treatment-Related Cardiotoxicity (R01 Clinical Trial Optional)	
11/2/2017	PA18-012	R21	Examination of Survivorship Care Planning Efficacy and Impact (R21 Clinical Trial Optional)	DCCPS
	PA18-013	R21	Improving Outcomes in Cancer Treatment-Related Cardiotoxicity (R21 Clinical Trial Optional)	
	PAR18-341	R50	NCI Research Specialist (Laboratory-based Scientist) Award (R50)	
	PA18-014	R21	Oral Anticancer Agents: Utilization, Adherence, and Health Care Delivery (R21 Clinical Trial Optional)	
	PAR18-017	R21	Dissemination and Implementation Research in Health (R21 Clinical Trial Optional)	
11/3/2017	PAR18-016	R21	Physical Activity and Weight Control Interventions Among Cancer Survivors: Effects on Biomarkers of Prognosis and Survival (R21 Clinical Trial Optional)	DCCPS
	PAR18-007	R01	Dissemination and Implementation Research in Health (R01 Clinical Trial Optional)	
	PAR18-006	R01	Physical Activity and Weight Control Interventions Among Cancer Survivors: Effects on Biomarkers of Prognosis and Survival (R01 Clinical Trial Optional)	

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*Administrative Supplement.

Date of Publication	PA/PAR	Mechanism	Title	Division, Office, and Center
	PA18-015	R21	Reducing Overscreening for Breast, Cervical, and Colorectal Cancers among Older Adults (R21 Clinical Trial Optional)	
11/3/2017	PA18-005	R01	Reducing Overscreening for Breast, Cervical, and Colorectal Cancers among Older Adults (R01 Clinical Trial Optional)	DCCPS
	PA18-004	R01	Oral Anticancer Agents: Utilization, Adherence, and Health Care Delivery (R01 Clinical Trial Optional)	
11/6/2017	PAR18-011	R01	Early Phase Clinical Trials in Imaging and Image-Guided Interventions (R01 Clinical Trial Required)	DCTD
11/8/2017	PAR18-008	R01	Linking the Provider Recommendation to Adolescent HPV Vaccine Uptake (R01 Clinical Trial Optional)	- DCCPS
11/0/2017	PAR18-019	R21	Linking the Provider Recommendation to Adolescent HPV Vaccine Uptake (R21 Clinical Trial Optional)	
11/13/2017	PA18-286	R21	Exploratory/Developmental Bioengineering Research Grants (EBRG) (R21 Clinical Trial Optional)	ALL DIVISIONS
11/15/2017	PAR18-018	R21	Stimulating Innovations in Behavioral Intervention Research for Cancer Prevention and Control (R21 Clinical Trial Optional)	DCCPS
11/13/2017	PAR18-361	U54	Comprehensive Partnerships to Advance Cancer Health Equity (CPACHE) (U54)	CRCHD
	PAR18-020	R21	NCI Clinical and Translational Exploratory/Developmental Studies (R21 Clinical Trial Optional)	DCTD
11/17/2017	PAR18-364	K01	NCI Mentored Research Scientist Development Award to Promote Diversity (K01 -Independent Clinical Trial Not Allowed)	CRCHD
	PAR18-365	K01	NCI Mentored Research Scientist Development Award to Promote Diversity (Parent K01 - Clinical Trial Required)	
11/20/2017	PAR18-366	K22	NCI Transition Career Development Award to Promote Diversity (K22 - No Clinical Trials)	CRCHD
11/20/2017	PAR18-367	K22	NCI Transition Career Development Award to Promote Diversity (K22 Clinical Trial Required)	
11/21/2017	PAR18-021	R03	NCI Small Grants Program for Cancer Research (NCI Omnibus R03 Clinical Trial Optional)	ALL DIVISIONS
	PAR18-023	R01	Tobacco Use and HIV in Low and Middle Income Countries (R01 Clinical Trial Optional)	
	PAR18-022	R21	Tobacco Use and HIV in Low and Middle Income Countries (R21 Clinical Trial Optional)	_
11/28/2017	PAR18-024	R21	Predicting Behavioral Responses to Population-Level Cancer Control Strategies (R21 Clinical Trial Optional)	DCCPS
	PAR18-247	R21	Intervening with Cancer Caregivers to Improve Patient Health Outcomes and Optimize Health Care Utilization (R21 Clinical Trial Optional)	_
	PAR18-246	R01	Intervening with Cancer Caregivers to Improve Patient Health Outcomes and Optimize Health Care Utilization (R01 Clinical Trial Optional)	
11/20/2017	PAR18-249	U01	Quantitative Imaging Tools and Methods for Cancer Response Assessment (U01 Clinical Trial Optional)	- DCTD
11/29/2017	PAR18-248	UG3, UH3	Quantitative Imaging Tools and Methods for Cancer Therapy Response Assessment (UG3/UH3 Clinical Trial Optional)	טוט

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Date of Publication	PA/PAR	Mechanism	Title	Division, Office, and Center
	PAR18-292	K12	Paul Calabresi Career Development Award for Clinical Oncology (K12 Clinical Trial Optional)	CCT
11/30/2017	PAR18-250	R21	Improving Smoking Cessation in Socioeconomically Disadvantaged Populations via Scalable Interventions (R21 Clinical Trial Optional)	
	PAR18-252	R01	Image-guided Drug Delivery (R01 Clinical Trial Optional)	DCCPS
	PAR18-251	R01	Improving Smoking Cessation in Socioeconomically Disadvantaged Populations via Scalable Interventions (R01 Clinical Trial Optional)	
	PAR18-478	R25	Cancer Research Education Grants Program - Research Experiences (R25)	
12/5/2017	PAR18-477	R25	Cancer Research Education Grants Program - Courses for Skills Development (R25)	CCT
	PAR18-476	R25	Cancer Research Education Grants Program - Curriculum or Methods Development (R25)	
12/6/2017	PAR18-467	K22	The NCI Transition Career Development Award (K22 - Independent Clinical Trial Not Allowed)	ССТ
12/0/2017	PAR18-466	K22	The NCI Transition Career Development Award (K22 Independent Clinical Trial Required)	001
12/11/2017	PA18-493	R01	Using Information Technology to Support Systematic Screening and Treatment of Depression in Cancer (R01 Clinical Trial Optional)	DCCPS
12/11/2017	PA18-492	R21	Using Information Technology to Support Systematic Screening and Treatment of Depression in Cancer (R21 Clinical Trial Optional)	DOOPS
12/15/2017	PA18-496	333*	Administrative Supplements to NCI Grant and Cooperative Agreement Awards to Support Collaborations with the PDX Development and Trial Centers Research Network (PDXNet)(Admin Suppl - Clinical Trial Not Allowed)	DCTD
12/19/2017	PA18-517	333*	Innovation Corps (I-Corps) at NIH Program for NIH and CDC Translational Research (Admin Supp - Clinical Trial Not Allowed)	SBIRDC
	PA18-532	R21	Early-life Factors and Cancer Development Later in Life (R21 - Clinical Trial Not Allowed)	
12/20/2017	PA18-529	R01	Early-life Factors and Cancer Development Later in Life (R01 - Clinical Trial Not Allowed)	DCCPS
	PA18-531	R03	Early-life Factors and Cancer Development Later in Life (R03 - Clinical Trial Not Allowed)	
12/21/2017	PAR18-530	R01	Academic-Industrial Partnerships for Translation of Technologies for Diagnosis and Treatment (R01 - Clinical Trial Optional)	DCTD
12/22/2017	PAR18-552	U01	Partnership for Aging and Cancer Research (U01 - Clinical Trial Not Allowed)	DCB
1/5/2010	PAR18-559	R01	Cancer Prevention and Control Clinical Trials Grant Program (R01 Clinical Trial Required)	ncepe
1/5/2018	PAR18-560	R01	National Cancer Institute's Investigator-Initiated Early Phase Clinical Trials for Cancer Treatment and Diagnosis (R01 Clinical Trials Required)	DCCPS

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*Administrative Supplement.

Date of Publication	PA/PAR	Mechanism	Title	Division, Office, and Center	
1/30/2018	PAR18-606	R21	Leveraging Cognitive Neuroscience to Improve Assessment of Cancer Treatment-Related Cognitive Impairment (R21 Clinical Trial Optional)	DCCPS	
1/30/2016	PAR18-605	R01	Leveraging Cognitive Neuroscience to Improve Assessment of Cancer Treatment-Related Cognitive Impairment (R01 Clinical Trial Optional)		
2/1/2018	PAR18-616	U01	Traceback Testing: Increasing Identification and Genetic Counseling of Mutation Carriers through Family-based Outreach (U01 Clinical Trial Optional)	DCP	
2/5/2018	PA18-629	R01	Integration of Imaging and Fluid-Based Tumor Monitoring in Cancer Therapy (R01 Clinical Trial Optional)	DCTD	
	PAR18-641	R21	Perception and Cognition Research to Inform Cancer Image Interpretation (R21 Clinical Trial Optional)		
0/7/0010	PAR18-640	R01	Perception and Cognition Research to Inform Cancer Image Interpretation (R01 Clinical Trial Optional)	DOODC	
2/7/2018	PAR18-639	R21	Innovative Approaches to Studying Cancer Communication in the New Media Environment (R21 - Clinical Trial Optional)	DCCPS	
	PAR18-638	R01	Innovative Approaches to Studying Cancer Communication in the New Media Environment (R01 - Clinical Trial Optional)		
0/10/0010	PAR18-655	R21	Basic Research in Cancer Health Disparities (R21 Clinical Trial Not Allowed)	ALL	
2/13/2018	PAR18-654	R01	Basic Research in Cancer Health Disparities (R01 Clinical Trials Not Allowed)	DIVISIONS	
0/04/0040	PAR18-674	R21	U.S. Tobacco Control Policies to Reduce Health Disparities (R21 Clinical Trial Optional)	DCCDC	
2/21/2018	PAR18-675	R01	U.S. Tobacco Control Policies to Reduce Health Disparities (R01 Clinical Trial Optional)	DCCPS	
0/00/0010	PA18-677	R01	Epidemiologic Research on Emerging Risk Factors and Liver Cancer Susceptibility (R01 - Clinical Trial Not Allowed)	DOODC	
2/23/2018	PA18-678	R21	Epidemiologic Research on Emerging Risk Factors and Liver Cancer Susceptibility (R21 - Clinical Trial Not Allowed)	DCCPS	
2/27/2018	PAR18-681	R01	Fundamental Mechanisms of Affective and Decisional Processes in Cancer Control (R01 Clinical Trial Optional)	DCCPS	
0/0/0010	PAR18-704	R01	Innovative Basic Research on Adducts in Cancer Risk Identification and Prevention (R01 Clinical Trial Not Allowed)	DOD	
3/6/2018	PAR18-703	R21	Innovative Basic Research on Adducts in Cancer Risk Identification and Prevention (R21 Clinical Trial Not Allowed)	DCP	
3/29/2018	PAR18-731	R21	Exploratory Grant Award to Promote Workforce Diversity in Basic Cancer Research (R21 Clinical Trial Not Allowed)	ALL DIVISIONS	
4/0/0040	PA18-738	R01	Age-related Microbiota Changes and their Implications in Chronic Disease Prevention, Treatment and Progression (R01 Clinical Trial Optional).	ALL	
4/3/2018	PA18-739	R21	Age-related Microbiota Changes and their Implications in Chronic Disease Prevention, Treatment and Progression (R21 Clinical Trial Optional).	DIVISIONS	

continued

Date of Publication	PA/PAR	Mechanism	Title	Division, Office, and Center
4/10/2018	PA18-748	333*	Research Supplements to Promote Data Sharing in Cancer Epidemiology Studies (Admin Supp Clinical Trial Not Allowed)	DCCPS
4/11/2018	PAR18-752	333*	Administrative Supplements to NCI Grant and Cooperative Agreement Awards to Support Collaborations with the Drug Resistance and Sensitivity Network (DRSN)(Admin Supp Clinical Trial Not Allowed)	DCTD
4/30/2018	PAR18-767	U54	Comprehensive Partnerships to Advance Cancer Health Equity (CPACHE) (Collaborative U54 Clinical Trial Optional)	CRCHD
5/24/2018	PAR18-802	R41, R42	Cancer Prevention, Diagnosis, and Treatment Technologies for Low- Resource Settings (R41/R42 - Clinical Trial Optional)	SBIRDC
3/24/2010	PAR18-801	R43, R44	Cancer Prevention, Diagnosis, and Treatment Technologies for Low-Resource Settings (R43/R44 - Clinical Trial Optional)	SDINDG
6/7/2018	PA18-821	333*	Collaborative Activities to Promote Cancer Cachexia Research (Admin Supp - Clinical Trial Not Allowed)	DCB
	PA18-842	333*	Administrative Supplements to Support Cancer Disparity Collaborative Research (Clinical Trial Optional)	ALL DIVISIONS
6/28/2018	PAR18-841	U24	Oncology Co-Clinical Imaging Research Resources to Encourage Consensus on Quantitative Imaging Methods and Precision Medicine (U24 - Clinical Trial Optional)	
7/5/2018	PA18-852	333*	Administrative Supplements to Promote Collaborative Activities in Basic Cancer Research (Admin Supp - Clinical Trial Not Allowed)	DCB
7/24/2018	PAR18-869	R01	Modular R01s in Cancer Control and Population Sciences (R01 Clinical Trial Optional)	DCCPS
7/30/2018	PAR18-880	R35	NCI Outstanding Investigator Award (R35 Clinical Trial Not Allowed)	DCB
0/0/0010	PAR18-887	R50	NCI Research Specialist (Core-based Scientist) Award (R50 Clinical Trial Not Allowed)	DCB
8/2/2018	PAR18-888	R50	NCI Research Specialist (Laboratory-based Scientist) Award (R50 Clinical Trial Not Allowed)	DCD
8/7/2018	PAR18-892	R21	Physical Activity and Weight Control Interventions Among Cancer Survivors: Effects on Biomarkers of Prognosis and Survival (R21 Clinical Trial Optional)	ALL
6/7/2016	PAR18-893	R01	Physical Activity and Weight Control Interventions Among Cancer Survivors: Effects on Biomarkers of Prognosis and Survival (R01 Clinical Trial Optional)	DIVISIONS
8/14/2018	PA18-902	R01	Advancing Translational and Clinical Probiotic/Prebiotic and Human Microbiome Research (R01 Clinical Trial Optional)	ALL DIVISIONS
9/5/2018	PAR18-911	P20	Feasibility Studies to Build Collaborative Partnerships in Cancer Research (P20 Clinical Trial Not Allowed)	CRCHD
9/7/2018	PAR18-913	U01	Utilizing the PLCO Biospecimens Resource to Bridge Gaps in Cancer Etiology and Early Detection Research (U01 Clinical Trial Not Allowed)	DCP

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*Administrative Supplement.

Date of Publication	PA/PAR	Mechanism	Title	Division, Office, and Center
9/12/2018	PAR18-919	R01	Quantitative Imaging Tools and Methods for Cancer Response Assessment (R01 Clinical Trial Optional)	DCTD
9/21/2018	PAR18-931	333*	Administrative Supplements to Cancer Center Support Grants to Strengthen NCI-Supported Community Outreach Capacity through Com- munity Health Educators of the National Outreach Network (Admin Suppl - Clinical Trial Not Allowed)	CRCHD
9/24/2018	PA18-934	333*	Administrative Supplements to Cancer Center Support Grants to Strengthen the Research, Training, and Outreach Capacity of the Geographic Management of Cancer Health Disparities Program (Admin Suppl - Clinical Trial Not Allowed)	CRCHD
9/28/2018	PAR18-947	U01	Integrating Biospecimen Science Approaches into Clinical Assay Development (U01 Clinical Trial Not Allowed)	DCTD

^{*}Administrative Supplement.

Table 3b. Program Announcements (PAs) Published by the NCI in FY2018

Sorted by Division, Office, and Center

Division, Office, and Center	PA/PAR	Mechanism	Title	Date of Publication	
	PAR18-290	P01	National Cancer Institute Program Project Applications (P01 Clinical Trial Optional)	10/30/2017	
	PA18-001	R01	Advancing Translational and Clinical Probiotic/Prebiotic and Human Microbiome Research (R01 Clinical Trial Optional)	11/1/2017	
	PAR18-009	R01	Academic-Industrial Partnerships to Translate and Validate in vivo Cancer Imaging Systems (R01 Clinical Trial Optional)	11/1/2017	
	PA18-286	R21	Exploratory/Developmental Bioengineering Research Grants (EBRG) (R21 Clinical Trial Optional)	11/13/2017	
	PAR18-021	R03	NCI Small Grants Program for Cancer Research (NCI Omnibus R03 Clinical Trial Optional)	11/21/2017	
	PAR18-655	R21	Basic Research in Cancer Health Disparities (R21 Clinical Trial Not Allowed)	0/10/0010	
	PAR18-654	R01	Basic Research in Cancer Health Disparities (R01 Clinical Trials Not Allowed)	2/13/2018	
ALL	PAR18-731	R21	Exploratory Grant Award to Promote Workforce Diversity in Basic Cancer Research (R21 Clinical Trial Not Allowed)	3/29/2018	
DIVISIONS	PA18-738	R01	Age-related Microbiota Changes and their Implications in Chronic Disease Prevention, Treatment and Progression (R01 Clinical Trial Optional).	4/2/2010	
	PA18-739	R21	Age-related Microbiota Changes and their Implications in Chronic Disease Prevention, Treatment and Progression (R21 Clinical Trial Optional).	4/3/2018	
	PA18-842	333*	Administrative Supplements to Support Cancer Disparity Collaborative Research (Clinical Trial Optional)		
	PAR18-841	U24	Oncology Co-Clinical Imaging Research Resources to Encourage Consensus on Quantitative Imaging Methods and Precision Medicine (U24 - Clinical Trial Optional)	6/28/2018	
	PAR18-892	R21	Physical Activity and Weight Control Interventions Among Cancer Survivors: Effects on Biomarkers of Prognosis and Survival (R21 Clinical Trial Optional)	0/7/0010	
	PAR18-893	R01	Physical Activity and Weight Control Interventions Among Cancer Survivors: Effects on Biomarkers of Prognosis and Survival (R01 Clinical Trial Optional)	8/7/2018	
	PA18-902	R01	Advancing Translational and Clinical Probiotic/Prebiotic and Human Microbiome Research (R01 Clinical Trial Optional)	8/14/2018	

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*Administrative Supplement. Source: Office of Referral, Review and Program Coordination.

Table 3b (cont'd). Program Announcements (PAs) Published by the NCI in FY2018

Sorted by Division, Office, and Center

Division, Office, and Center	PA/PAR	Mechanism	Title	Date of Publication	
	PAR18-292	K12	Paul Calabresi Career Development Award for Clinical Oncology (K12 Clinical Trial Optional)	11/30/2017	
	PAR18-478	R25	Cancer Research Education Grants Program - Research Experiences (R25)		
CCT	PAR18-477	R25	Cancer Research Education Grants Program - Courses for Skills Development (R25)	12/5/2017	
001	PAR18-476	R25	Cancer Research Education Grants Program - Curriculum or Methods Development (R25)		
	PAR18-467	K22	The NCI Transition Career Development Award (K22 - Independent Clinical Trial Not Allowed)	10/6/2017	
	PAR18-466	K22	The NCI Transition Career Development Award (K22 Independent Clinical Trial Required)	12/6/2017	
	PAR18-337	K08	NCI Mentored Clinical Scientist Research Career Development Award to Promote Diversity (K08 - No Independent Clinical Trials)	10/01/0017	
	PAR18-336	K08	NCI Mentored Clinical Scientist Research Career Development Award to Promote Diversity (K08 - Clinical Trials Required)	10/31/2017	
	PAR18-361	U54	Comprehensive Partnerships to Advance Cancer Health Equity (CPACHE) (U54)	11/15/2017	
	PAR18-364	K01	NCI Mentored Research Scientist Development Award to Promote Diversity (K01 -Independent Clinical Trial Not Allowed)	11/17/0017	
	PAR18-365	K01	NCI Mentored Research Scientist Development Award to Promote Diversity (Parent K01 - Clinical Trial Required)	11/17/2017	
	PAR18-366	K22	NCI Transition Career Development Award to Promote Diversity (K22 - No Clinical Trials)	11/00/0017	
CRCHD	PAR18-367	K22	NCI Transition Career Development Award to Promote Diversity (K22 Clinical Trial Required)	11/20/2017	
	PAR18-767	U54	Comprehensive Partnerships to Advance Cancer Health Equity (CPACHE) (Collaborative U54 Clinical Trial Optional)	4/30/2018	
	PAR18-911	P20	Feasibility Studies to Build Collaborative Partnerships in Cancer Research (P20 Clinical Trial Not Allowed)	9/5/2018	
	PAR18-931	333*	Administrative Supplements to Cancer Center Support Grants to Strengthen NCI-Supported Community Outreach Capacity through Community Health Educators of the National Outreach Network (Admin Suppl - Clinical Trial Not Allowed)	9/21/2018	
	PA18-934	333*	Administrative Supplements to Cancer Center Support Grants to Strengthen the Research, Training, and Outreach Capacity of the Geographic Management of Cancer Health Disparities Program (Admin Suppl - Clinical Trial Not Allowed)	9/24/2018	

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 $*Administrative \ Supplement.\\$

Table 3b (cont'd). Program Announcements (PAs) Published by the NCI in FY2018Sorted by Division, Office, and Center

Division, Date of Office, and PA/PAR Title Mechanism **Publication** Center Innovative Molecular Analysis Technology Development for Cancer PAR18-303 R43. R44 10/3/2017 Research and Clinical Care (R43/R44 Clinical Trial Not Allowed) PAR18-342 R50 NCI Research Specialist (Core-based Scientist) Award (R50) 11/2/2017 Partnership for Aging and Cancer Research (U01 - Clinical Trial Not U01 PAR18-552 12/22/2017 Allowed) Collaborative Activities to Promote Cancer Cachexia Research (Admin PA18-821 333* 6/7/2018 Supp - Clinical Trial Not Allowed) DCB Administrative Supplements to Promote Collaborative Activities in Basic PA18-852 333* 7/5/2018 Cancer Research (Admin Supp - Clinical Trial Not Allowed) PAR18-880 R35 NCI Outstanding Investigator Award (R35 Clinical Trial Not Allowed) 7/30/2018 NCI Research Specialist (Core-based Scientist) Award (R50 Clinical Trial R50 PAR18-887 Not Allowed) 8/2/2018 NCI Research Specialist (Laboratory-based Scientist) Award (R50 Clinical PAR18-888 R50 Trial Not Allowed) Examination of Survivorship Care Planning Efficacy and Impact (R01 PA18-002 R01 Clinical Trial Optional) Improving Outcomes in Cancer Treatment-Related Cardiotoxicity (R01

Examination of Survivorship Care Planning Efficacy and Impact (R21

Improving Outcomes in Cancer Treatment-Related Cardiotoxicity (R21

Oral Anticancer Agents: Utilization, Adherence, and Health Care Delivery

Dissemination and Implementation Research in Health (R21 Clinical Trial

Survivors: Effects on Biomarkers of Prognosis and Survival (R21 Clinical

Dissemination and Implementation Research in Health (R01 Clinical Trial

Survivors: Effects on Biomarkers of Prognosis and Survival (R01 Clinical

Reducing Overscreening for Breast, Cervical, and Colorectal Cancers

Reducing Overscreening for Breast, Cervical, and Colorectal Cancers

Oral Anticancer Agents: Utilization, Adherence, and Health Care Delivery

Linking the Provider Recommendation to Adolescent HPV Vaccine Uptake

Linking the Provider Recommendation to Adolescent HPV Vaccine Uptake

NCI Research Specialist (Laboratory-based Scientist) Award (R50)

Physical Activity and Weight Control Interventions Among Cancer

Physical Activity and Weight Control Interventions Among Cancer

11/2/2017

11/3/2017

11/8/2017

11/8/2017

Clinical Trial Optional)

Clinical Trial Optional)

Clinical Trial Optional)

Optional)

Optional)

Trial Optional)

Trial Optional)

(R01 Clinical Trial Optional)

(R01 Clinical Trial Optional)

(R21 Clinical Trial Optional)

(R21 Clinical Trial Optional)

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*Administrative Supplement.

PA18-003

PA18-012

PA18-013

PAR18-341

PA18-014

PAR18-017

PAR18-016

PAR18-007

PAR18-006

PA18-015

PA18-005

PA18-004

PAR18-008

PAR18-019

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R01

R21

Source: Office of Referral, Review and Program Coordination.

among Older Adults (R21 Clinical Trial Optional)

among Older Adults (R01 Clinical Trial Optional)

Table 3b (cont'd). Program Announcements (PAs) Published by the NCI in FY2018

Sorted by Division, Office, and Center

Division, Office, and Center	PA/PAR	Mechanism	Title	Date of Publication
	PAR18-018	R21	Stimulating Innovations in Behavioral Intervention Research for Cancer Prevention and Control (R21 Clinical Trial Optional)	11/15/2017
	PAR18-023	R01	Tobacco Use and HIV in Low and Middle Income Countries (R01 Clinical Trial Optional)	
	PAR18-022	R21	Tobacco Use and HIV in Low and Middle Income Countries (R21 Clinical Trial Optional)	
	PAR18-024	R21	Predicting Behavioral Responses to Population-Level Cancer Control Strategies (R21 Clinical Trial Optional)	11/28/2017
	PAR18-247	R21	Intervening with Cancer Caregivers to Improve Patient Health Outcomes and Optimize Health Care Utilization (R21 Clinical Trial Optional)	
	PAR18-246	R01	Intervening with Cancer Caregivers to Improve Patient Health Outcomes and Optimize Health Care Utilization (R01 Clinical Trial Optional)	
	PAR18-250	R21	Improving Smoking Cessation in Socioeconomically Disadvantaged Populations via Scalable Interventions (R21 Clinical Trial Optional)	
	PAR18-252	R01	Image-guided Drug Delivery (R01 Clinical Trial Optional)	11/30/2017
	PAR18-251	R01	Improving Smoking Cessation in Socioeconomically Disadvantaged Populations via Scalable Interventions (R01 Clinical Trial Optional)	
	PA18-493	R01	Using Information Technology to Support Systematic Screening and Treatment of Depression in Cancer (R01 Clinical Trial Optional)	- 12/11/2017
	PA18-492	R21	Using Information Technology to Support Systematic Screening and Treatment of Depression in Cancer (R21 Clinical Trial Optional)	12/11/2017
DCCPS	PA18-532	R21	Early-life Factors and Cancer Development Later in Life (R21 - Clinical Trial Not Allowed)	
	PA18-529	R01	Early-life Factors and Cancer Development Later in Life (R01 - Clinical Trial Not Allowed)	12/20/2017
	PA18-531	R03	Early-life Factors and Cancer Development Later in Life (R03 - Clinical Trial Not Allowed)	
	PAR18-559	R01	Cancer Prevention and Control Clinical Trials Grant Program (R01 Clinical Trial Required)	1/5/0010
	PAR18-560	R01	National Cancer Institute's Investigator-Initiated Early Phase Clinical Trials for Cancer Treatment and Diagnosis (R01 Clinical Trials Required)	1/5/2018
	PAR18-606	R21	Leveraging Cognitive Neuroscience to Improve Assessment of Cancer Treatment-Related Cognitive Impairment (R21 Clinical Trial Optional)	1/20/0010
	PAR18-605	R01	Leveraging Cognitive Neuroscience to Improve Assessment of Cancer Treatment-Related Cognitive Impairment (R01 Clinical Trial Optional)	1/30/2018
	PAR18-641	R21	Perception and Cognition Research to Inform Cancer Image Interpretation (R21 Clinical Trial Optional)	
	PAR18-640	R01	Perception and Cognition Research to Inform Cancer Image Interpretation (R01 Clinical Trial Optional)	0/7/0010
	PAR18-639	R21	Innovative Approaches to Studying Cancer Communication in the New Media Environment (R21 - Clinical Trial Optional)	2/7/2018
	PAR18-638	R01	Innovative Approaches to Studying Cancer Communication in the New Media Environment (R01 - Clinical Trial Optional)	

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Table 3b (cont'd). Program Announcements (PAs) Published by the NCI in FY2018Sorted by Division, Office, and Center

Division, Office, and Center	PA/PAR	Mechanism	Title	Date of Publication
	PAR18-674	R21	U.S. Tobacco Control Policies to Reduce Health Disparities (R21 Clinical Trial Optional)	0/01/0010
	PAR18-675	R01	U.S. Tobacco Control Policies to Reduce Health Disparities (R01 Clinical Trial Optional)	- 2/21/2018
	PA18-677	R01	Epidemiologic Research on Emerging Risk Factors and Liver Cancer Susceptibility (R01 - Clinical Trial Not Allowed)	- 2/23/2018
DCCPS	PA18-678	R21	Epidemiologic Research on Emerging Risk Factors and Liver Cancer Susceptibility (R21 - Clinical Trial Not Allowed)	2/23/2010
	PAR18-681	R01	Fundamental Mechanisms of Affective and Decisional Processes in Cancer Control (R01 Clinical Trial Optional)	2/27/2018
	PA18-748	333*	Research Supplements to Promote Data Sharing in Cancer Epidemiology Studies (Admin Supp Clinical Trial Not Allowed)	4/10/2018
	PAR18-869	R01	Modular R01s in Cancer Control and Population Sciences (R01 Clinical Trial Optional)	7/24/2018
	PAR18-616	U01	Traceback Testing: Increasing Identification and Genetic Counseling of Mutation Carriers through Family-based Outreach (UO1 Clinical Trial Optional)	2/1/2018
DCP	PAR18-704	R01	Innovative Basic Research on Adducts in Cancer Risk Identification and Prevention (R01 Clinical Trial Not Allowed)	- 3/6/2018
	PAR18-703	R21	Innovative Basic Research on Adducts in Cancer Risk Identification and Prevention (R21 Clinical Trial Not Allowed)	3/0/2010
	PAR18-913	U01	Utilizing the PLCO Biospecimens Resource to Bridge Gaps in Cancer Etiology and Early Detection Research (U01 Clinical Trial Not Allowed)	9/7/2018
	PAR18-317	UH2, UH3	Assay Validation of High Quality Markers for Clinical Studies in Cancer (UH2/UH3 - Clinical Trials Not Allowed)	_
	PAR18-313	P50	Specialized Programs of Research Excellence (SPOREs) in Human Cancers for Years 2018, 2019, and 2020 (P50)	10/12/2017
	PAR18-310	UH3	Assay Validation of High Quality Markers for Clinical Studies in Cancer (UH3 - Clinical Trials Not Allowed	
	PAR18-011	R01	Early Phase Clinical Trials in Imaging and Image-Guided Interventions (R01 Clinical Trial Required)	11/6/2017
DCTD	PAR18-020	R21	NCI Clinical and Translational Exploratory/Developmental Studies (R21 Clinical Trial Optional)	11/17/2017
	PAR18-249	U01	Quantitative Imaging Tools and Methods for Cancer Response Assessment (U01 Clinical Trial Optional)	- 11/20/2017
	PAR18-248	UG3, UH3	Quantitative Imaging Tools and Methods for Cancer Therapy Response Assessment (UG3/UH3 Clinical Trial Optional)	- 11/29/2017
continued	PA18-496	333*	Administrative Supplements to NCI Grant and Cooperative Agreement Awards to Support Collaborations with the PDX Development and Trial Centers Research Network (PDXNet)(Admin Suppl - Clinical Trial Not Allowed)	12/15/2017

continued

^{*}Administrative Supplement.

Table 3b (cont'd). Program Announcements (PAs) Published by the NCI in FY2018

Sorted by Division, Office, and Center

Division, Office, and Center	PA/PAR	Mechanism	Title	Date of Publication
	PAR18-530	R01	Academic-Industrial Partnerships for Translation of Technologies for Diagnosis and Treatment (R01 - Clinical Trial Optional)	12/21/2017
	PA18-629	R01	Integration of Imaging and Fluid-Based Tumor Monitoring in Cancer Therapy (R01 Clinical Trial Optional)	2/5/2018
DCTD	PAR18-752	333*	Administrative Supplements to NCI Grant and Cooperative Agreement Awards to Support Collaborations with the Drug Resistance and Sensitiv- ity Network (DRSN)(Admin Supp Clinical Trial Not Allowed)	4/11/2018
	PAR18-919	R01	Quantitative Imaging Tools and Methods for Cancer Response Assessment (R01 Clinical Trial Optional)	9/12/2018
	PAR18-947	U01	Integrating Biospecimen Science Approaches into Clinical Assay Development (U01 Clinical Trial Not Allowed)	9/28/2018
	PA18-314	333*	Innovation Corps (I-Corps) at NIH Program for NIH and CDC Translational Research (Admin Supp)	10/12/2017
CDIDDC	PA18-517	333*	Innovation Corps (I-Corps) at NIH Program for NIH and CDC Translational Research (Admin Supp - Clinical Trial Not Allowed)	12/19/2017
SBIRDC	PAR18-802	R41, R42	Cancer Prevention, Diagnosis, and Treatment Technologies for Low- Resource Settings (R41/R42 - Clinical Trial Optional)	05/24/2019
	PAR18-801	R43, R44	Cancer Prevention, Diagnosis, and Treatment Technologies for Low- Resource Settings (R43/R44 - Clinical Trial Optional)	05/24/2018

 $^{{\}rm *Administrative\ Supplement.}$

Sorted by Date of Publication

Date of Publication	PA/PAR	Mechanism	Title	Division, Office, and Center	Issuing NIH-IC
	PAR17-306	R01	Testing Interventions for Health-Enhancing Physical Activity		
10/10/2017	PAR18-324	R01	(R01 - Clinical Trial Optional)	DCCPS	NIH
	PAR18-331	R01	Simulation Modeling and Systems Science to Address Health Disparities (R01-Clinical Trial Not Allowed)		IVIII
	PA18-034	R01	Nutrigenetics and Nutrigenomics Approaches for Nutrition Research (R01 Clinical Trial Optional)		
11/1/2017	PA18-025	R01	Potential Effects of Metformin on Aging and Age-Related Conditions: Small-Scale Clinical Studies and Secondary Analysis of Controlled Clinical Studies (R01 Clinical Trial Optional)	DCP	NIH
	PAR18-062	R01	Accelerating the Pace of Drug Abuse Research Using Existing Data (R01 Clinical Trial Optional)	DCCDC	
	PA18-285	R21	Addressing Health Disparities through Effective Interventions	DCCPS	
	PA18-284	R01	among Immigrant Populations (Clinical Trial Optional)		
· · · · · · · · · · · · · · · · · · ·	PA18-010	R01	Diet and Physical Activity Assessment Methodology	DCCPS	
	PAR18-112	R21	(Clinical Trial Optional)	DCP	
11/2/2017	PA18-339	R01	Revision Applications for Validation of Mobile/Wireless Health Tools for Measurement and Intervention (R01 Clinical Trial Optional)	DCCPS	NIH
11/3/2017	PA18-343	R15	Academic Research Enhancement Award (R15 Clinical Trial Required)	DCCPS	NIH
	PA18-040	R21	The Health of Sexual and Gender Minority (SGM) Populations	CRCHD	
	PA18-054	R03	(R21 Clinical Trial Optional)	СПСПО	
11/6/2017	PA18-137	R01	End-of-Life and Palliative Needs of Adolescents and Young	DCCPS	NIH
11/0/2017	PA18-155	R21	Adults (AYA) with Serious Illnesses (Clinical Trial Optional)	DOOFS	
	PA18-210	R15	The Health of Sexual and Gender Minority (SGM) Populations	CRCHD	
	PA18-037	R01	(Clinical Trial Optional)	GNGTID	
	PA18-149	R01	Palliative Care Needs of Individuals with Advanced Rare Diseases and Their Family Caregivers (R01 Clinical Trial Optional)	DCCPS	
	PAR18-349	K18	Short-term Mentored Career Enhancement Awards for Mid- Career Investigators to Integrate Basic Behavioral and Social Sciences (K18 - No Independent Clinical Trials)	CCT	
	PA18-141	R01	Mechanisms, Models, Measurement, and Management in Pain Research (R01 Clinical Trial Optional)	DCP	
11/7/2017	PAR18-208	U01	Bioengineering Research Partnerships (U01 Clinical Trial Optional)	ALL DIVISIONS	NIH
	PA18-167	R21	Palliative Care Needs of Individuals with Rare Advanced Diseases and Their Family Caregivers (R21 Clinical Trial Optional)	DCCPS	
	PAR18-206	R01	Bioengineering Research Grants (BRG) (R01 Clinical Trial Optional)	ALL DIVISIONS	
	PA18-159	R21	Mechanisms, Models, Measurement, and Management in Pain Research (R21 Clinical Trial Optional)	DCP	
11/8/2017	PAR18-064	R21	Mechanism for Time-Sensitive Drug Abuse Research (R21 Clinical Trial Optional)	DCCPS	NIH
11/15/2017	PA18-104	R21	Exploratory/Developmental Clinical Research Grants in Obesity (R21 Clinical Trial Optional)	DCCPS DCP	NIH

continued

Sorted by Date of Publication

Date of Publication	PA/PAR	Mechanism	Title	Division, Office, and Center	Issuing NIH-IC
	PAR18-086	R21, R33	Target Assessment, Engagement and Data Replicability to Improve Substance Use Disorders Treatment Outcomes (R21/R33 Clinical Trial Optional)		
11/17/2017	PAR18-085	R33	Target Assessment, Engagement and Data Replicability to Improve Substance Use Disorders Treatment Outcomes (R33 Clinical Trial Optional)	DCCPS	NIH
	PAR18-084	R21, R33	Integrative Research on Polysubstance Abuse and Addiction (R21/R33 Clinical Trial Optional)		
	PA18-406	R21	Population Health Interventions: Integrating Individual and Group Level Evidence (R21) - Clinical Trial Not Allowed	ALL DIVISIONS	
	PAR18-352	R01	Methodology and Measurement in the Behavioral and Social Sciences (R01 Clinical Trial Optional)	DCCPS	
	PAR18-378	R21	Methodology and Measurement in the Behavioral and Social Sciences (R21 Clinical Trial Optional)	DOGFS	
11/21/2017	PA18-403	T32	Ruth L. Kirschstein National Research Service Award (NRSA) Institutional Research Training Grant (Parent T32)		NIH
	PA18-372	K08	Mentored Clinical Scientist Research Career Development Award (Parent K08 - Independent Clinical Trial Required)	CCT	
	PA18-373	K08	Mentored Clinical Scientist Research Career Development Award (Parent K08 - No Independent Clinical Trials)		
	PA18-356	R01	Population Health Interventions: Integrating Individual and Group Level Evidence (R01) Clinical Trial Not Allowed	DCCPS	
	PA18-407	R21	Population Health Interventions: Integrating Individual and Group Level Evidence (R21) - Clinical Trial Optional	DCCPS	
	PAR18-362	R21	_		
11/22/2017	PAR18-387	R01	Education and Health: New Frontiers - Clinical Trial Optional	DCCPS	NIH
	PAR18-388	R03			
	PA18-385	R01	Population Health Interventions: Integrating Individual and Group Level Evidence (R01) - Clinical Trial Optional	DCCPS	
	PA18-397	K99, R00	NIH Pathway to Independence Award (Parent K99/R00 - Clinical Trial Required)	CCT	
11/29/2017	PA18-398	K99, R00	NIH Pathway to Independence Award (Parent K99/R00 - Independent Clinical Trial Not Allowed)	001	NIH
	PAR18-189	R01	Multidisciplinary Studies of HIV/AIDS and Aging (Clinical Trial	OHAM	
	PAR18-190	R21	Optional)	UHAW	
	PAR18-222	R01	Multi-Site Studies for System-Level Implementation of Substance Use Prevention and Treatment Services (R01 Clinical Trial Optional)	DCCPS	
11/30/2017	PAR18-289	R21	Exploratory/Developmental Surgical Disparities Research (R21 Clinical Trial Optional)	טטטרט	NIH
	PAR18-288	R01	Surgical Disparities Research (R01 Clinical Trial Optional)		
	PAR18-242	R21	Mobile Health: Technology and Outcomes in Low and Middle Income Countries (R21 Clinical Trial Optional)	CGH	

continued

Sorted by Date of Publication

Date of Publication	PA/PAR	Mechanism	Title	Division, Office, and Center	Issuing NIH-IC
12/6/2017	PA18-484	R01	NIH Research Project Grant (Parent R01 Clinical Trial Not Allowed)	ALL DIVISIONS	NIH
12/0/2017	PA18-465	R01	Developing the Therapeutic Potential of the Endocannabinoid System for Pain Treatment (R01, Clinical Trial Optional)	DCP	
12/13/2017	PA18-504	R15	Academic Research Enhancement Award (Parent R15 Clinical Trial Not Allowed)	ALL DIVISIONS	NIH
	PA18-503	R21	Advancing the Science of Geriatric Palliative Care (R21 - Clinical Trial Optional)	DCP	
10/15/0017	PA18-499	R21	End-of-Life and Palliative Care Health Literacy: Improv-	DOODO	
12/15/2017	PA18-498	R01	ing Outcomes in Serious, Advanced Illness (Clinical Trial Optional)	DCCPS	NIH
	PA18-502	R01	Advancing the Science of Geriatric Palliative Care (R01 - Clinical Trial Optional)	DCP	
	PA18-545	R01	Research on the Mechanisms and/or Behavioral Outcomes of Multisensory Processing (R01 - Clinical Trial Optional)	DCCPS	NIH
12/21/2017	PAR18-539	K01	International Research Scientist Development Award (IRSDA) (KO1) - Independent Clinical Trial Not Allowed	CCII	
	PAR18-540	K01	International Research Scientist Development Award (IRSDA) (K01) - Independent Clinical Trial Required	CGH	
	PA18-573	R43, R44	PHS 2018-02 Omnibus Solicitation of the NIH, CDC, and FDA for Small Business Innovation Research Grant Applications (Parent SBIR [R43/R44] Clinical Trial Required)	ALL DIVISIONS	
	PA18-574	R43, R44	PHS 2018-02 Omnibus Solicitation of the NIH, CDC, and FDA for Small Business Innovation Research Grant Applications (Parent SBIR [R43/R44] Clinical Trial Not Allowed)		
1/16/2018	PA18-575	R41, R42	PHS 2018-02 Omnibus Solicitation of the NIH, CDC, and FDA for Small Business Technology Transfer Grant Applications (Parent STTR [R41/R42] Clinical Trial Not Allowed)	SBIRDC	NIH
	PA18-576	R41, R42	PHS 2018-02 Omnibus Solicitation of the NIH, CDC, and FDA for Small Business Technology Transfer Grant Applications (Parent STTR [R41/R42] Clinical Trial Required)		
	PAR18-583	X01	Discovery of the Genetic Basis of Childhood Cancers and of Structural Birth Defects: Gabriella Miller Kids First Pediatric Research Program (X01, Clinical Trials Not Allowed)	DCTD CCT	
	PA18-592	333*	Research Supplements to Promote Re-Entry into Biomedical and Behavioral Research Careers (Admin Supp - Clinical Trial Not Allowed)	CRCHD	
1/25/2018	PA18-586	333*	Research Supplements to Promote Diversity in Health- Related Research (Admin Supp - Clinical Trial Not Allowed)		NIH
	PA18-591	333*	Administrative Supplements to Existing NIH Grants and Cooperative Agreements (Parent Admin Supp - Clinical Trial Optional)	ALL DIVISIONS	

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 $*Administrative \ Supplement.\\$

Sorted by Date of Publication

Date of Publication	PA/PAR	Mechanism	Title	Division, Office, and Center	Issuing NIH-IC
1/26/2018	PA18-590	777	Change of Grantee Organization (Type 7 Parent Clinical Trial Optional)	ALL DIVISIONS	NIH
	PA18-589	666	Successor-in-Interest (Type 6 Parent Clinical Trial Optional)	פאוטופואוט	
0/4/0040	PAR18-611	R21	Electronic Nicotine Delivery Systems (ENDS): Population,	0.000	
2/1/2018	PAR18-612	R01	Clinical and Applied Prevention Research (Clinical Trial Optional)	DCCPS	NIH
	PAR18-644	R33	Advanced-Stage Development and Utilization of Research Infrastructure for Interdisciplinary Aging Studies (R33 - Clini- cal Trial Optional)	DCCPS	
2/8/2018	PAR18-645	R21, R33	Research Infrastructure Development for Interdisciplinary Aging Studies (R21/R33 - Clinical Trial Optional)		NIH
	PAR18-646	U01	Opportunities for Collaborative Research at the NIH Clinical Center (UO1 - Clinical Trial Optional)	DCTD	
2/9/2018	PA18-648	R13	NIH Support for Conferences and Scientific Meetings (Parent R13 Clinical Trial Not Allowed)	ALL DIVISIONS	NIH
2/13/2018	PA18-658	333*	Administrative Supplement for Research on Sex/Gender Influences (Admin Supp - Clinical Trial Optional)	ALL DIVISIONS	NIH
2/15/2018	PA18-666	F31	Ruth L. Kirschstein National Research Service Award (NRSA) Individual Predoctoral Fellowship to Promote Diversity in Health-Related Research (Parent F31)	CRCHD	NIH
	PA18-671	F31	Ruth L. Kirschstein National Research Service Award (NRSA) Individual Predoctoral Fellowship (Parent F31)		
2/16/2018	PA18-670	F32	Ruth L. Kirschstein National Research Service Award (NRSA) Individual Postdoctoral Fellowship (Parent F32)	CCT	NIH
	PA18-668	F30	Ruth L. Kirschstein National Research Service Award (NRSA) Individual Fellowship for Students at Institutions with NIH-Funded Institutional Predoctoral Dual-Degree Training Programs (Parent F30)	_ 001	
	PA18-672	F33	Ruth L. Kirschstein National Research Service Award (NRSA) Individual Senior Fellowship (Parent F33)		
2/20/2018	PA18-673	F30	Ruth L. Kirschstein National Research Service Award (NRSA) Individual Fellowship for Students at Institutions Without NIH-Funded Institutional Predoctoral Dual-Degree Training Programs (Parent F30)	CCT	NIH
2/22/2018	PA18-676	333*	Research on the Health of Women of Understudied, Under- represented and Underreported (U3) Populations An ORWH FY18 Administrative Supplement (Admin Supp - Clinical Trial Optional)	ALL DIVISIONS	NIH
2/2/2010	PAR18-692	K18	Short-term Mentored Career Enhancement Awards for Mid- Career Investigators to Integrate Basic Behavioral and Social Sciences (K18 Clinical Trial Required)	CCT	NIL
3/2/2018	PAR18-694	R24	Interdisciplinary Research Teams to Investigate Reciprocal Basic Behavioral and Social Linkages Between Sleep and Stress (R24 Clinical Trial Optional)	DCCPS	NIH

continued

*Administrative Supplement.

Sorted by Date of Publication

Date of Publication	PA/PAR	Mechanism	Title	Division, Office, and Center	Issuing NIH-IC
3/6/2018	PA18-705	R43, R44	SBIR Technology Transfer (R43/R44 Clinical Trial Not Allowed)	SBIRDC	NIH
3/14/2018	PAR18-714	R15	Academic Research Enhancement Award for Undergraduate- Focused Institutions (R15 Clinical Trial Not Allowed)	ALL DIVISIONS	NIH
3/15/2018	PA18-713	333*	Administrative Supplements for Research on Sexual and Gender Minority (SGM) Populations (Admin Supp)	CRCHD	NIH
3/21/2018	PAR18-717	D43	Fogarty HIV Research Training Program for Low-and Middle- Income Country Institutions (D43 Clinical Trial Optional)	CRCHD	NIH
3/27/2018	PA18-720	R21	Exploratory/Developmental Clinical Research Grants in Obesity (R21 Clinical Trial Optional)	DCCPS	NIH
3/28/2018	PA18-729	R01	Research on the Health of Transgender and Gender Noncon-	CRCHD	- NIH
	PA18-728	R21	forming Populations (Clinical Trial Optional)	UNUTID	
	PA18-722	R01	Improving Patient Adherence to Treatment and Prevention	DCCPS	
	PA18-723	R21	Regimens to Promote Health (Clinical Trial Optional)	DUUPS	
3/29/2018	PAR18-732	R21	Reducing Stigma to Improve HIV/AIDS Prevention, Treatment and Care in Low and Middle- Income Countries (R21 Clinical Trial Optional)	CGH	- NIH
	PAR18-727	R01	Food Specific Molecular Profiles and Biomarkers of Food and Nutrient Intake, and Dietary Exposure (R01 Clinical Trial Optional)	DCP	
3/30/2018	PAR18-733	R03	Small Research Grants for Analyses of Data for the Gabriella Miller Kids First Data Resource (R03 - Clinical Trial Not Allowed)	DCTD	NIH
4/3/2018	PAR18-740	R00, SI2	Lasker Clinical Research Scholars Program (Si2/R00 Clinical Trial Optional)	ALL DIVISIONS	NIH
4/20/2018	PAR18-764	R01	Harnessing Big Data to Halt HIV (R01 Clinical Trial Optional)	CGH	NIH
5/16/2018	PAR18-787	R01	Precision Imaging of Oral Lesions (R01 - Clinical Trial Not Allowed)	DCTD	NIH
6/5/2018	PA18-818	333*	Administrative Supplements for Validation Studies of Analytical Methods for Dietary Supplement Constituents (Admin Supp - Clinical Trial Not Allowed)	DCP	NIH
	PA18-817	333*	Administrative Supplements for Research on Dietary Supplements (Admin. Supp Clinical Trial Not Allowed)		
6/14/2018	PAR18-830	R01	The Role of Epitranscriptomics in Development and Disease (R01 - Clinical Trial Not Allowed)	DCB	NIH
6/20/2018	PA18-837	333*	Administrative Supplements to Promote Diversity in Small Businesses-SBIR/STTR (Admin Supp Clinical Trial Not Allowed)	SBIRDC	NIH

continued

 $*Administrative \ Supplement.\\$

Table 4 (cont'd). NCI Participation in Trans-NIH Program Announcements (PAs/PARs) in FY2018

Sorted by Date of Publication

Date of Publication	PA/PAR	Mechanism	Title	Division, Office, and Center	Issuing NIH-IC
	PAR18-847	R01	Electronic Nicotine Delivery Systems (ENDS): Population, Clinical and Applied Prevention Research (R01 - Clinical Trial Optional)	DCCPS	NIH
6/29/2018	PAR18-846	R21	Electronic Nicotine Delivery Systems (ENDS): Basic Mecha-	DCB	
0/29/2010	PAR18-845	R01	nisms of Health Effects (Clinical Trial Not Allowed)	DCD	
	PAR18-848	R21	Electronic Nicotine Delivery Systems (ENDS): Population, Clinical and Applied Prevention Research (R21 - Clinical Trial Optional)	DCCPS	NIH
7/12/2018	PAR18-854	R01	Time-Sensitive Obesity Policy and Program Evaluation (R01 Clinical Trial Not Allowed)	DCCPS	NIH
7/17/2018	PA18-856	Diot and 1 hydroal notivity noded direction of the control o		DCCPS	NIH
1/11/2010	PAR18-857	R21	(Clinical Trial Not Allowed)	DUUFS	INIT
7/25/2018	PA18-876	R01	Advancing Mechanistic Probiotic/Prebiotic and Human Microbiome Research (R01 Clinical Trial Not Allowed)	ALL DIVISIONS	NIH
7/31/2018	PAR18-881 K18		Short-term Mentored Career Enhancement Awards in Mobile and Wireless Health Technology and Data Analytics: Cross-Training at the intersection of Behavioral and Social Sciences and STEM Disciplines (K18 Independent Clinical Trial Not Allowed)	ALL	NIII
7/31/2016	PAR18-882	K18	Short-term Mentored Career Enhancement Awards in Mobile and Wireless Health Technology and Data Analytics: Cross-Training at the Intersection of Behavioral and Social Sciences and STEM Disciplines (K18 Independent Clinical Trial Required)	DIVISIONS	NIH
8/22/2018	PA18-906	333*	Research Supplements to Promote Diversity in Health- Related Research (Admin Supp - Clinical Trial Not Allowed)	CRCHD	NIH
9/10/2018	PA18-917	R01	Developing the Therapeutic Potential of the Endocannabinoid System for Pain Treatment (R01 - Clinical Trial Optional)	DCP	NIH
9/21/2018	PA18-932	R01	Increasing Uptake of Evidence-Based Screening in Diverse Adult Populations (R01 Clinical Trial Optional)	DCCPS	NIH
9/24/2018	PA18-936	333*	NIH Administrative Supplements to Recover Losses Due to Hurricanes Harvey, Irma, and Maria Under the Bipartisan Budget Act of 2018 Non-Construction (Admin Supp Clinical Trial Optional)	ALL DIVISIONS	NIH

^{*}Administrative Supplement.

Source: Office of Referral, Review and Program Coordination.

Table 5. Applications Received for Referral by the NCI/DEA in FY2018Sorted by Activity Code

			Applica	ntions by	/ NCAB	
Applications	Activity Code	Total by Activity	Feb	June	Sept	Total Costs Requested First Year
International Training Grants in Epidemiology (FIC)	D43	9	9	0	0	\$2,685,464
NIH Director's Pioneer Award (NDPA)	DP1	1	0	1	0	\$3,500,000
NIH Director's New Innovator Awards	DP2	7	0	7	0	\$10,500,000
Individual Predoctoral NRSA for M.D./Ph.D. Fellowships (ADAMHA)	F30	187	46	64	77	\$0
Predoctoral Individual National Research Service Award	F31	485	144	175	166	\$0
Postdoctoral Individual National Research Service Award	F32	275	83	96	96	\$0
Predoctoral to Postdoctoral Transition Award	F99	73	0	0	73	\$0
Research Scientist Development Award — Research & Training	K01	43	13	9	21	\$5,749,256
Academic/Teacher Award	K07	60	15	45	0	\$8,835,741
Clinical Investigator Award	K08	153	39	63	51	\$33,003,869
Physician Scientist Award (Program)	K12	9	9	0	0	\$3,258,067
Career Transition Award	K22	133	48	48	37	\$21,696,646
International Research Career Development Award	K43	5	0	0	5	\$574,551
Career Transition Award	K99	216	77	79	60	\$25,580,115
Research Program Projects	P01	107	34	41	32	\$267,291,456
Exploratory Grants	P20	40	0	0	40	\$34,739,553
Center Core Grants	P30	24	13	5	6	\$112,270,835
Specialized Center	P50	54	11	32	11	\$121,799,232
Research Project	R01	7,730	2,650	2,763	2,317	\$4,148,620,179
Small Research Grants	R03	601	185	192	224	\$47,646,054
Conferences	R13	115	48	38	29	\$4,133,505
Academic Research Enhancement Awards (AREA)	R15	291	90	104	97	\$125,087,836
Exploratory/Developmental Grants	R21	2,673	902	1,008	763	\$603,750,471
Education Projects	R25	71	26	21	24	\$21,027,003
Exploratory/Developmental Grants Phase II	R33	115	36	42	37	\$51,541,301
Outstanding Investigator Award	R35	103	0	103	0	\$100,102,690
Method to Extend Research in Time (MERIT) Award	R37	40	18	22	0	\$20,393,884
Mentored Research Pathway in Residency	R38	5	0	5	0	\$1,677,133
Small Business Technology Transfer (STTR) Grants — Phase I	R41	262	108	69	85	\$63,771,041
Small Business Technology Transfer (STTR) Grants — Phase II	R42	50	19	13	18	\$23,146,404
Small Business Innovation Research Grants (SBIR) — Phase I	R43	838	313	272	253	\$199,725,478
Small Business Innovation Research Grants (SBIR) — Phase II	R44	275	130	69	76	\$151,072,082
Research Specialist Award	R50	27	0	0	27	\$4,171,303
High Priority, Short Term Project Award	R56	8	3	3	2	\$1,588,186
Minority Biomedical Research Support (MBRS)	S06	14	14	0	0	\$14,968,062

Table 5 (cont'd). Applications Received for Referral by the NCI/DEA in FY2018Sorted by Activity Code

			Applica	tions by	NCAB	
Applications	Activity Code	Total by Activity	Feb	June	Sept	Total Costs Requested First Year
Research Enhancement Award	SC1	33	11	0	22	\$11,244,722
Pilot Research Project	SC2	22	9	0	13	\$3,197,018
Intramural Clinical Scholar Research Award	SI2	8	8	0	0	\$499,000
Institutional National Research Service Award	T32	71	30	28	13	\$34,559,856
Research Project (Cooperative Agreements)	U01	697	170	320	207	\$553,931,508
Cooperative Clinical Research (Cooperative Agreements)	U10	11	0	0	11	\$173,605,936
Resource-Related Research Project (Cooperative Agreements)	U24	76	26	26	24	\$78,488,623
Resource-Related Research Multi-Component Projects and Centers Cooperative Agreements	U2C	38	0	0	38	\$115,549,594
Small Business Innovation Research (SBIR) Cooperative Agreements — Phase II	U44	1	0	1	0	\$906,360
Specialized Center (Cooperative Agreements)	U54	47	0	26	21	\$109,318,004
Clinical Research Cooperative Agreements — Single Project	UG1	50	0	0	50	\$54,339,522
Phase 1 Exploratory/Developmental Cooperative Agreement	UG3	37	5	7	25	\$22,037,939
Exploratory/Developmental Cooperative Agreement — Phase I	UH2	17	3	5	9	\$5,325,562
Exploratory/Developmental Cooperative Agreement — Phase II	UH3	2	0	0	2	\$732,937
Research Project with Complex Structure Cooperative Agreement	UM1	13	0	2	11	\$28,508,118
Small Business Technology Transfer (STTR) Cooperative Agreements — Phase I	UT1	1	1	0	0	\$142,788
Pre-application Pre-application	X02	13	0	13	0	\$0
Overall Totals		16,236	5,346	5,817	5,073	\$7,426,294,884

Table 6. Grant and Cooperative Agreement Applications Reviewed by the NCI/DEA (by Mechanism) in FY2018

Sorted by Activity Code

			Applic	ations by	y NCAB	Total Costs
Mechanism	Activity Code	Totals by Activity	Feb	June	Sept	Requested First Year
Predoctoral to Postdoctoral Transition Award	F99	73	0	0	73	\$0
Research Scientist Development Award — Research & Training	K01	36	13	9	14	\$4,872,606
Academic/Teacher Award	K07	60	15	45	0	\$8,835,741
Clinical Investigator Award	K08	146	39	58	49	\$31,697,692
Physician Scientist Award (Program)	K12	9	9	0	0	\$3,258,067
Career Transition Award	K22	133	48	48	37	\$21,696,646
Career Transition Award	K99	195	70	67	58	\$23,466,356
Research Program Projects	P01	107	34	41	32	\$267,291,456
Exploratory Grants	P20	40	0	0	40	\$34,739,553
Center Core Grants	P30	18	7	5	6	\$98,379,904
Specialized Center	P50	54	11	32	11	\$121,799,232
Research Project	R01	294	134	124	36	\$179,668,021
Small Research Grants	R03	562	170	177	215	\$43,920,082
Conferences	R13	74	26	26	22	\$1,919,341
Exploratory/Developmental Grants	R21	1,342	440	505	397	\$304,292,731
Education Projects	R25	71	26	21	24	\$21,027,003
Exploratory/Developmental Grants Phase II	R33	115	36	42	37	\$51,541,301
Outstanding Investigator Award	R35	103	0	103	0	\$100,102,690
Method to Extend Research in Time (MERIT) Award	R37	1	1	0	0	\$366,401
Mentored Research Pathway in Residency	R38	5	0	5	0	\$1,677,133
Small Business Innovation Research Grants (SBIR) — Phase II	R44	23	23	0	0	\$22,147,643
Research Specialist Award	R50	27	0	0	27	\$4,171,303
Intramural Clinical Scholar Research Award	SI2	7	7	0	0	\$499,000
Institutional National Research Service Award	T32	59	23	25	11	\$20,843,655
Research Project (Cooperative Agreements)	U01	475	130	169	176	\$364,443,378
Cooperative Clinical Research (Cooperative Agreements)	U10	11	0	0	11	\$173,605,936
Resource-Related Research Project (Cooperative Agreements)	U24	58	25	22	11	\$61,821,135
Specialized Center (Cooperative Agreements)	U54	21	0	0	21	\$27,430,311
Clinical Research Cooperative Agreements — Single Project	UG1	50	0	0	50	\$54,339,522
Phase 1 Exploratory/Developmental Cooperative Agreement	UG3	21	5	7	9	\$10,001,417
Exploratory/Developmental Cooperative Agreement — Phase I	UH2	17	3	5	9	\$5,325,562
Exploratory/Developmental Cooperative Agreement — Phase II	UH3	2	0	0	2	\$732,937
Research Project with Complex Structure Cooperative Agreement	UM1	13	0	2	11	\$28,508,118
Overall Totals		4,222	1,295	1,538	1,389	\$2,094,421,873

Table 7. Applications Reviewed by NCI IRG Subcommittees and Special Emphasis Panels (SEPs) in FY2018

NCI IRG Subcommittee	Types of Applications Reviewed	Total by Committee	Total Costs Requested First Year
A - Cancer Centers	P30	16	\$14,798,736
F - Institutional Training and Education	K12, R25, R38, T32	116	\$36,548,486
I - Transition to Independence	K22, K99	308	\$39,789,019
J - Career Development	K01, K07, K08, K22, K99	261	\$35,015,834
Totals - NCI IRG Subcommittees		701	\$126,152,075
Total SEPs	F99, K01, K99, P01, P20, P30, P50, R01, R03, R13, R15 R21, R25, R33, R35, R37, R44, R50, SI2, T32, U01, U10, U24, U54, UG1, UG3, UH2, UH3, UM1	3,521	\$1,879,515,545
Totals		4,222	\$2,005,667,620

Source: Office of Referral, Review and Program Coordination. IMPAC II. Includes NCI Primary and Secondary assigned applications. There were 30 withdrawn applications that have been subtracted from the total count of the IRG Subcommittees, and 124 withdrawn applications that have been subtracted from the total count of the SEPs.

Table 8. Summary of Investigator-Initiated P01 Applications Reviewed for Each NCAB Meeting in FY2018

Applications by Board										
Type of Application	February	June	September	FY Total						
New	18	21	16	55						
Resubmitted New	9	7	6	22						
Renewal	4	4	6	14						
Resubmitted renewal	2	5	4	11						
Revisions	0	4	0	4						
Total	33	41	32	106						

Source: Office of Referral, Review and Program Coordination. IMPAC II. Includes NCI Primary and Secondary assigned applications.

Table 9. Summary of Unsolicited P01 Applications Reviewed in FY2018

Sorted by NCI Program Division

Program Division	Number of Applications	Total Costs Requested First Year	Total Costs for Requested Period
Division of Cancer Biology (DCB)	40	\$88,292,475	\$445,578,798
Division of Cancer Control and Population Sciences (DCCPS)	21	\$54,167,992	\$269,074,162
Division of Cancer Prevention (DCP)	3	\$11,098,872	\$53,459,033
Division of Cancer Treatment and Diagnosis (DCTD)	42	\$112,214,264	\$569,544,713
Total	106	\$265,773,603	\$1,337,656,706

Source: Office of Referral, Review and Program Coordination. IMPAC II. Includes NCI Primary and Secondary assigned applications.

Table 10. Requests for Applications (RFAs) Reviewed by the NCI/DEA in FY2018

			Арр	olicatio	Applications by NCAB			
Title of Initiative	RFA Number	Activity Code	Totals	Feb	June	Sept	Requested First Year	
Innovative Molecular and Cellular Analysis Technologies for Basic and Clinical Cancer Research	CA17-010	R21	97	41	56	0	\$22,424,992	
Advanced Development and Validation of Emerging Molecular and Cellular Analysis Technologies for Basic and Clinical Cancer Research	CA17-011	R33	67	33	34	0	\$30,095,727	
Innovative Technologies for Cancer-Relevant Biospecimen Science	CA17-012	R21	16	5	11	0	\$4,132,745	
Advanced Development and Validation of Emerging Biospecimen Science Technologies for Basic and Clini- cal Cancer Research	CA17-013	R33	11	3	8	0	\$4,986,579	
Research Answers to NCI's Provocative Questions	CA17-017	R01	214	105	109	0	\$126,344,288	
Research Answers to NCI's Provocative Questions	CA17-018	R21	144	72	72	0	\$32,254,484	
Revision Applications to NCI-Supported R01 Awards to Include Research on the NCI's Provocative Questions	CA17-019	R01	5	3	2	0	\$1,167,075	
Revision Applications to National Cancer Institute (NCI)-Supported P01 Awards to Include Research on the NCI's Provocative Questions	CA17-021	P01	2	0	2	0	\$532,069	
Revision Applications to National Cancer Institute (NCI)-Supported P50 Awards to Include Research on the NCI's Provocative Questions	CA17-022	P50	3	1	2	0	\$670,654	
SBIR Phase II Bridge Awards to Accelerate the Development of Cancer Therapeutics, Imaging Technologies, Interventional Devices, Diagnostics, and Prognostics Toward Commercialization	CA17-024	R44	23	23	0	0	\$22,147,643	
Consortium on Translational Research in Early Detection of Liver Cancer (Clinical and Research Centers	CA17-025	U01	25	0	25	0	\$20,193,067	
Pediatric Early Phase Clinical Trials Network	CA17-027	UM1	2	0	2	0	\$9,993,403	
Coordinating Center for the Consortium of Translational Research in Early Detection of Liver Cancer	CA17-028	U24	7	0	7	0	\$4,433,555	
Precompetitive Collaboration on Liquid Biopsy for Early Cancer Assessment	CA17-029	U01	27	0	7	20	\$24,848,258	
HIV/AIDS and the Tumor Niche	CA17-030	R01	14	14	0	0	\$8,081,985	
Limited Competition: A Data Resource for Analyzing Blood and Marrow Transplants	CA17-031	U24	1	0	1	0	\$3,977,353	
Minority-Patient Derived Xenograft (PDX) Development and Trial Center (PDTC) Network*	CA17-032	U54	11	0	0	11	\$13,583,080	
Feasibility and Planning Studies for Development of Specialized Programs of Research Excellence (SPOREs) to Investigate Cancer Health Disparities	CA17-033	P20	24	0	0	24	\$30,343,592	
Approaches to Identify and Care for Individuals with Inherited Cancer Syndromes*	CA17-041	U01	21	0	0	21	\$22,127,512	
Research Centers for Improving Management of Symptoms Across Cancer Treatments (IMPACT)*	CA17-042	UM1	10	0	0	10	\$16,331,523	

^{*}Cancer Moonshot FOA.

Table 10 (cont'd). Requests for Applications (RFAs) Reviewed by the NCI/DEA in FY2018

			App	olicatio	ns by NC	AB	Total Costs
Title of Initiative	RFA Number	Activity Code	Totals	Feb	June	Sept	Requested First Year
Coordinating Center for Improving Management of Symptoms Across Cancer Treatments (IMPACT)*	CA17-043	U24	6	0	0	6	\$3,515,107
Immuno-Oncology Translation Network (IOTN): Cancer Immunotherapy Research Projects*	CA17-045	U01	71	0	0	71	\$54,646,512
Immuno-Oncology Translation Network (IOTN): Cancer Immunoprevention Research Projects*	CA17-046	U01	11	0	0	11	\$8,193,920
Immuno-Oncology Translation Network (IOTN): Data Management and Resource-Sharing Center (DMRC)*	CA17-047	U24	3	0	0	3	\$3,780,977
Immuno-Oncology Translation Network (IOTN): Cellular Immunotherapy Data Resource (CIDR)*	CA17-048	U24	1	0	0	1	\$1,789,195
Analyzing and Interpreting Clinician and Patient Adverse Event Data to Better Understand Tolerability	CA17-052	U01	7	0	0	7	\$4,711,736
Limited Competition: NCI National Clinical Trials Network — Network Group Operations Centers	CA17-056	U10	5	0	0	5	\$116,077,945
Limited Competition: NCI National Clinical Trials Network — Network Group Statistics and Data Management Centers	CA17-057	U10	5	0	0	5	\$54,396,733
Limited Competition: NCI National Clinical Trials Network — Canadian Collaborating Clinical Trials Network	CA17-058	U10	1	0	0	1	\$3,131,258
NCI National Clinical Trials Network (NCTN)Network Lead Academic Participating Sites	CA17-059	UG1	42	0	0	42	\$43,161,175
Limited Competition: NCI National Clinical Trials Network - Network Radiotherapy and Imaging Core Services Center (U24)	CA17-060	U24	1	0	0	1	\$8,604,930
NCI National Clinical Trials Network — Network Group Integrated Translational Science Centers	CA17-061	UG1	8	0	0	8	\$11,178,347
The NCI Predoctoral to Postdoctoral Fellow Transition Award	CA18-001	F99	73	0	0	73	\$0
Innovative Molecular and Cellular Analysis Technologies for Basic and Clinical Cancer Research	CA18-002	R21	52	0	0	52	\$12,527,471
Advanced Development and Validation of Emerging Molecular and Cellular Analysis Technologies for Basic and Clinical Cancer Research	CA18-003	R33	32	0	0	32	\$14,236,158
Innovative Biospecimen Science Technologies for Basic and Clinical Cancer Research	CA18-004	R21	5	0	0	5	\$1,124,120
Advanced Development and Validation of Emerging Biospecimen Science Technologies for Basic and Clini- cal Cancer Research	CA18-005	R33	5	0	0	5	\$2,222,837
Revisions for Incorporation of Novel NCI-Supported Technology to Accelerate Cancer Research	CA18-008	U54	1	0	0	1	\$221,640
Stimulating Access to Research in Residency (StARR)	HL18-023	R38	5	0	5	0	\$1,677,133
Totals			1,058	300	343	415	\$743,866,778

^{*}Cancer Moonshot FOA.

Table 11. Program Announcements (PAs) Reviewed by the NCI/DEA in FY2018

			Appl	ication	s by N	CAB	Total Costs
Title of Initiative	PA/PAR Number	Activity Code	Totals	Feb	Jun	Sept	Requested First Year
End-of-Life and Palliative Needs of Adolescents and Young Adults (AYA) with Serious Illnesses	PA15-324	R01	1	0	1	0	\$772,170
Ruth L. Kirschstein National Research Service Award (NRSA) Institutional Research Training Grant	PA16-152	T32	48	23	25	0	\$17,635,914
NIH Research Project Grant	PA16-160	R01	21	10	11	0	\$14,170,479
NIH Research Project Grant	PA16-160	R37	1	1	0	0	\$366,401
Mechanisms, Models, Measurement, and Management in Pain Research	PA16-188	R01	1	1	0	0	\$501,651
Mentored Clinical Scientist Research Career Development Award	PA16-191	K08	90	37	53	0	\$19,850,456
NIH Pathway to Independence Award	PA16-193	K99	137	70	67	0	\$16,642,987
NIH Support for Conferences and Scientific Meetings	PA16-294	R13	52	26	26	0	\$1,419,323
Palliative Care Needs of Individuals with Advanced Rare Diseases and Their Family Caregivers	PA17-018	R01	2	1	1	0	\$1,832,298
Oral Anticancer Agents: Utilization, Adherence, and Health Care Delivery	PA17-061	R21	1	0	1	0	\$229,893
Improving Outcomes in Cancer Treatment-Related Cardiotoxicity	PA18-003	R01	1	0	0	1	\$1,138,878
Palliative Care Needs of Individuals with Advanced Rare Diseases and Their Family Caregivers	PA18-149	R01	1	0	0	1	\$908,289
Mechanisms, Models, Measurement, and Management in Pain Research	PA18-159	R21	1	0	0	1	\$220,425
Mentored Clinical Scientist Research Career Development Award	PA18-372	K08	7	0	0	7	\$1,688,681
Mentored Clinical Scientist Research Career Development Award	PA18-373	K08	35	0	0	35	\$7,121,794
NIH Pathway to Independence Award	PA18-397	K99	5	0	0	5	\$649,226
NIH Pathway to Independence Award	PA18-398	K99	53	0	0	53	\$6,174,143
Ruth L. Kirschstein National Research Service Award (NRSA) Institutional Research Training Grant	PA18-403	T32	11	0	0	11	\$3,207,741
NIH Support for Conferences and Scientific Meetings	PA18-648	R13	22	0	0	22	\$500,018
Specialized Programs of Research Excellence (SPOREs) in Human Cancers for Years 2015, 2016, and 2017	PAR14-353	P50	40	10	30	0	\$95,210,112
Physical Sciences-Oncology Network (PS-ON): Physical Sciences-Oncology Projects (PS-OP)	PAR15-021	U01	25	13	12	0	\$19,166,627
Assay Validation for High Quality Markers for NCI- Supported Clinical Trials	PAR15-095	UH2	8	3	5	0	\$3,021,949
Cancer Research Education Grants Program — Curriculum or Methods Development	PAR15-150	R25	3	2	1	0	\$322,600
Cancer Research Education Grants Program — Courses for Skills Development	PAR15-151	R25	7	4	3	0	\$2,012,420
Cancer Research Education Grants Program — Research Experiences	PAR15-152	R25	7	3	4	0	\$1,707,315

Table 11 (cont'd). Program Announcements (PAs) Reviewed by the NCI/DEA in FY2018

			Appl	ication	s by N	CAB	Total Costs
Title of Initiative	PA/PAR Number	Activity Code	Totals	Feb	Jun	Sept	Requested First Year
The Pancreatic Cancer Detection Consortium	PAR15-289	U01	11	9	2	0	\$13,062,827
Utilizing the PLCO Biospecimens Resource to Bridge Gaps in Cancer Etiology and Early Detection Research	PAR15-297	U01	13	0	7	6	\$8,393,969
Translational Studies on Adducts for Cancer Risk Identification and Prevention	PAR15-307	U01	1	1	0	0	\$1,082,340
Advanced Development of Informatics Technologies for Cancer Research and Management	PAR15-331	U24	27	19	8	0	\$24,837,454
Early-Stage Development of Informatics Technologies for Cancer Research and Management	PAR15-332	U01	48	21	27	0	\$22,593,413
Sustained Support for Informatics Resources for Cancer Research and Management	PAR15-333	U24	5	3	2	0	\$5,319,477
Development of Innovative Informatics Methods and Algorithms for Cancer Research and Management	PAR15-334	R21	68	29	39	0	\$15,195,350
Small-Cell Lung Cancer (SCLC) Consortium: Therapeutic Development and Mechanisms of Resistance	PAR16-049	U01	11	0	8	3	\$6,462,508
Small-Cell Lung Cancer (SCLC) Consortium: Innovative Approaches to the Prevention and Early Detection of Small Cell Lung Cancer	PAR16-051	U01	7	0	7	0	\$4,875,763
Feasibility Studies to Build Collaborative Partnerships in Cancer Research	PAR16-084	P20	24	0	0	24	\$4,395,961
Cooperative Agreement to Develop Targeted Agents for Use with Systemic Agents Plus Radiotherapy	PAR16-111	U01	17	13	4	0	\$11,905,833
Emerging Questions in Cancer Systems Biology	PAR16-131	U01	75	40	35	0	\$59,538,375
Cancer Research Education Grants Program to Promote Diversity — Research Experiences	PAR16-138	R25	14	4	5	5	\$3,044,518
Cancer Research Education Grants Program to Promote Diversity — Courses for Skills Development	PAR16-139	R25	7	2	1	4	\$1,798,452
Integrating Biospecimen Science Into Clinical Assay Development (U01)	PAR16-166	U01	7	0	7	0	\$2,859,594
NCI Clinical and Translational Exploratory/Developmental Studies	PAR16-176	R21	619	293	326	0	\$139,170,777
Paul Calabresi Career Development Award for Clinical Oncology	PAR16-189	K12	9	9	0	0	\$3,258,067
Cancer Prevention, Control, Behavioral Sciences, and Population Sciences Career Development Award	PAR16-284	K07	60	15	45	0	\$8,835,741
The NCI Transition Career Development Award	PAR16-293	K22	88	45	43	0	\$14,174,938
Biological Comparisons in Patient-Derived Models of Cancer	PAR16-344	U01	28	0	16	12	\$24,928,398
New Informatics Tools and Methods to Enhance U.S. Cancer Surveillance and Research	PAR16-349	UG3	7	0	3	4	\$3,527,843
Oncology Co-Clinical Imaging Research Resources to Encourage Consensus on Quantitative Imaging Methods and Precision Medicine	PAR16-385	U24	7	3	4	0	\$5,563,087

Table 11 (cont'd). Program Announcements (PAs) Reviewed by the NCI/DEA in FY2018

			Appl	ication	s by N	CAB	Total Costs
Title of Initiative	PA/PAR Number	Activity Code	Totals	Feb	Jun	Sept	Requested First Year
NCI Mentored Clinical Scientist Research Career Development Award to Promote Diversity	PAR16-400	K08	7	2	5	0	\$1,360,990
NCI Mentored Research Scientist Development Award to Promote Diversity	PAR16-401	K01	22	13	9	0	\$2,962,812
NCI Small Grants Program for Cancer Research	PAR16-416	R03	347	170	177	0	\$27,194,269
National Cancer Institute Program Project Applications	PAR16-457	P01	73	34	39	0	\$180,290,111
National Cancer Institute Youth Enjoy Science Research Education Program	PAR17-059	R25	27	11	7	9	\$10,751,361
NCI Transition Career Development Award to Promote Diversity	PAR17-069	K22	8	3	5	0	\$1,399,495
Cancer Center Support Grants (CCSGs) for NCI-designated Cancer Centers	PAR17-095	P30	18	7	5	6	\$98,379,904
Quantitative Imaging Tools and Methods for Cancer Therapy Response Assessment	PAR17-128	UG3	14	5	4	5	\$6,473,574
Quantitative Imaging Tools and Methods for Cancer Response Assessment	PAR17-129	U01	14	6	5	3	\$10,635,185
Multilevel Interventions in Cancer Care Delivery: Building from the Problem of Follow-up to Abnormal Screening Tests	PAR17-146	U01	13	6	7	0	\$10,170,234
Alliance of Glycobiologists for Cancer Research: Translational Tumor Glycomics Laboratories	PAR17-206	U01	13	10	0	3	\$9,341,123
Alliance of Glycobiologists for Cancer Research: Biological Tumor Glycomics Laboratories	PAR17-207	U01	15	10	0	5	\$10,969,484
Core Infrastructure and Methodological Research for Cancer Epidemiology Cohorts	PAR17-233	U01	5	1	0	4	\$6,770,462
Core Infrastructure and Methodological Research for Cancer Epidemiology Cohorts	PAR17-233	UM1	1	0	0	1	\$2,183,192
Lasker Clinical Research Scholars Program	PAR17-254	SI2	7	7	0	0	\$499,000
NCI Outstanding Investigator Award	PAR17-494	R35	103	0	103	0	\$100,102,690
NCI Clinical and Translational Exploratory/Developmental Studies	PAR18-020	R21	339	0	0	339	\$77,012,474
NCI Small Grants Program for Cancer Research	PAR18-021	R03	215	0	0	215	\$16,725,813
National Cancer Institute Program Project Applications	PAR18-290	P01	32	0	0	32	\$86,469,276
Assay Validation of High Quality Markers for Clinical Studies in Cancer	PAR18-310	UH3	2	0	0	2	\$732,937
Specialized Programs of Research Excellence (SPOREs) in Human Cancers for years 2018, 2019, and 2020	PAR18-313	P50	10	0	0	10	\$22,704,743
Assay Validation of High Quality Markers for Clinical Studies in Cancer	PAR18-317	UH2	9	0	0	9	\$2,303,613
NCI Mentored Clinical Scientist Research Career Development Award to Promote Diversity	PAR18-336	K08	3	0	0	3	\$812,457
NCI Mentored Clinical Scientist Research Career Development Award to Promote Diversity	PAR18-337	K08	4	0	0	4	\$863,314

Table 11 (cont'd). Program Announcements (PAs) Reviewed by the NCI/DEA in FY2018

			Appl	ication	s by N	CAB	Total Costs
Title of Initiative	PA/PAR Number	Activity Code	Totals	Feb	Jun	Sept	Requested First Year
NCI Research Specialist (Laboratory-Based Scientist) Award	PAR18-341	R50	23	0	0	23	\$3,573,650
NCI Research Specialist (Core-Based Scientist) Award	PAR18-342	R50	4	0	0	4	\$597,653
Comprehensive Partnerships to Advance Cancer Health Equity (CPACHE)	PAR18-361	U54	9	0	0	9	\$13,625,591
NCI Mentored Research Scientist Development Award to Promote Diversity	PAR18-364	K01	12	0	0	12	\$1,649,229
NCI Mentored Research Scientist Development Award to Promote Diversity	PAR18-365	K01	2	0	0	2	\$260,565
NCI Transition Career Development Award to Promote Diversity	PAR18-366	K22	3	0	0	3	\$581,580
The NCI Transition Career Development Award	PAR18-466	K22	1	0	0	1	\$188,048
The NCI Transition Career Development Award	PAR18-467	K22	33	0	0	33	\$5,352,585
Cancer Research Education Grants Program — Curriculum or Methods Development	PAR18-476	R25	1	0	0	1	\$164,000
Cancer Research Education Grants Program — Courses for Skills Development	PAR18-477	R25	3	0	0	3	\$877,898
Cancer Research Education Grants Program — Research Experiences	PAR18-478	R25	2	0	0	2	\$348,439
Cancer Prevention and Control Clinical Trials Grant Program	PAR18-559	R01	20	0	0	20	\$14,508,196
National Cancer Institute's Investigator-Initiated Early Phase Clinical Trials for Cancer Treatment and Diagnosis	PAR18-560	R01	14	0	0	14	\$10,242,712
Opportunities for Collaborative Research at the NIH Clinical Center	PAR18-646	U01	10	0	0	10	\$6,966,238
Totals			3,171	995	1,195	973	\$1,347,341,372

Table 12. SBIR Topics and Requests for Proposals (RFPs) Reviewed by the NCI/DEA in FY2018*

Announcement/ Topic Number	Announcement Title	Review Round	No. of Proposals
N01PC65003-74	Surveillance, Epidemiology, and End Results (SEER) Program	Jan-18	16
Topic 370 Phase I (Fast Track)	Targeted Therapy for Cancer and Cancer Therapy-Related Cachexia	May-18	3
Topic 371 Phase I (Fast Track)	Drugs to Exploit the Immune Response Generated by Radiation Therapy	May-18	10
Topic 372 Phase I (Fast Track)	Development and Validation of Non-Mouse Reagents to Enable Preclinical Development of Novel Therapeutics*	May-18	10
Topic 373 Phase I (Fast Track)	Tools and Technologies for Monitoring RNA Modifications*	May-18	8
Topic 374 Phase I (Fast Track)	Novel Approaches for Local Delivery of Chemopreventive Agents*	May-18	10
Topic 375 Phase I (Fast Track)	Diagnostic Imaging for Cancer Immunotherapies*	May-18	8
Topic 376 Phase I (Fast Track)	Imaging-Based Tools for Longitudinal and Multi-Dimensional Mapping of the Tumor and its Microenvironment	May-18	10
Topic 377 Phase I (Fast Track)	Bridging the Guideline Implementation Gap: Clinical Decision-Support to Improve Cancer Symptom Management*	May-18	12
Topic 378 Phase I (Fast Track)	Mobile Application for Surveillance of Post-Radiation Therapy Health-Related Quality of Life	May-18	26
Topic 379 Phase I (Fast Track)	Software Enabling Data Integration from Wearable Sensors to Generate Novel Analytics for Cancer Patients*	May-18	8
Topic 380 Phase I (Fast Track)	Computer Aided Decision Support for Radiation Oncology*	May-18	4
Topic 381 Phase I (Fast Track)	Development of Artificial Intelligence (AI) Tools to Understand and Duplicate Experts' Radiation Therapy Planning for Prostate Cancer	May-18	2
N01CN77019-18	PREVENT Cancer Preclinical Drug Development Program	Oct-18	13
N02CP71024-72	Support for Thyroid Cancer & Other Diseases in Belarus	Oct-18	1
N02C072406-81	Leidos Biomed Research: Federally Funded Research and Development Center (FFRDC)	Oct-18	1
	Phase II Proposals From Earlier Phase I Awards		
Topic 337/353 Phase II	Cell-Free Nucleic Acid-Based Assay Development for Cancer Diagnosis	May-18	6
Topic 339 Phase II	Systemic Targeted Radionuclide Therapy For Cancer Treatment	May-18	1
continued			

^{*}The NCI reviewed a total of 666 proposals. The proposals were in response to SBIR Contract Solicitations — Phase I (142), Phase II (20), and Loan Repayment (504).

^{*}Cancer Moonshot FOA.

Table 12 (cont'd). SBIR Topics and Requests for Proposals (RFPs) Reviewed by the NCI/DEA in FY2018*

Announcement/ Topic Number	Announcement Title	Review Round	No. of Proposals
Topic 341 Phase II	Development of Metabolomics Data Integration Methods and Software	May-18	2
Topic 343 Phase II	An Electronic Platform for Cognitive Assessment in Cancer Patients	May-18	3
Topic 344 Phase II	Technologies for Differential Isolation of Exosomes and Oncosomes	May-18	1
Topic 345 Phase II	Predictive Biomarkers of Adverse Reactions to Radiation Treatment	May-18	1
Topic 346 Phase II	Molecularly Targeted Radiation Therapy for Cancer Treatment	May-18	2
Topic 347 Phase II	Signal Amplification to Enable Attomolar Quantitation in Slide-Based or ELISA Biomarker Immunoassays	May-18	1
Topic 349 Phase II	Proximity Slide-Based Sandwich Immunoassay to Visualize Intramolecular Epitopes of Analytes in Tissue Sections	May-18	1
Topic 352 Phase II	Cell and Animal-Based Models to Advance Cancer Health Disparity Research	May-18	2
	Other Solicitations Reviewed in DEA		
L30 (OD-15-122)	Loan Repayment Program for Clinical Researchers	Oct-18	201
L40 (OD-15-121)	Loan Repayment Program for Pediatric Researchers	Oct-18	303
TOTAL			666

^{*}The NCI reviewed a total of 666 proposals. The proposals were in response to SBIR Contract Solicitations — Phase I (142), Phase II (20), and Loan Repayment (504).

Table 13. Summary of NCI Grant Awards by Mechanism in FY2018*

Fund Type: Appropriated				% of N Gra			Fiscal Yea	r: 2018
Cost Centers Mechanisms	Awards Count	Awards Dollars	Average Cost	Number	Dollars	Competing Requested	Competing Awarded	Success Rate
Research Project Grants								
Traditional Research Grants — R01/RL1	2,950	1,303,128,640	441,739	45.63%	35.38%	5,800	612	10.55%
Traditional Research Grants — R01/RL1 - Moonshot	14	12,140,246	867,160	0.22%	0.33%	0	0	0.0%
Program Projects — P01	81	156,448,210	1,931,459	1.25%	4.25%	97	18	18.56%
Program Projects — P01 - Moonshot	4	9,080,574	2,270,144	0.06%	0.25%	0	0	0.0%
Small Grants — R03	148	12,153,507	82,118	2.29%	0.33%	564	59	10.46%
Exploratory/Developmental Research — R21	298	56,920,135	191,007	4.61%	1.55%	2,100	183	8.71%
Exploratory/Developmental Research — R21 - Moonshot	0	77,750	77,750	0.0%	0.0%	0	0	0.0%
Merit Awards — R37	66	30,162,817	457,012	1.02%	0.82%	64	64	100.0%
Phased Innovation Grant (Phase 2) — R33	0	235,208	235,208	0.0%	0.01%	0	0	0.0%
Phased Innovation Grant (Phase 2) — R33 - Moonshot	0	252,283	252,283	0.0%	0.01%	0	0	0.0%
Bridge Award — R56	2	601,954	300,977	0.03%	0.02%	1	1	100.0%
Pathway to Independence — R00/ Si2	103	24,703,611	239,841	1.59%	0.67%	7	0	0.0%
Exploratory/Development Coop. Agreements — UH2/UH3	10	2,577,913	257,791	0.15%	0.07%	17	3	17.65%
Exploratory/Developmental Grants — UG3	2	845,924	422,962	0.03%	0.02%	21	1	4.76%
NIH Director Pioneer Award (NDPA) — DP1	2	2,388,250	1,194,125	0.03%	0.06%	0	0	0.0%
NIH Director New Innovator Awards — DP2	1	2,710,753	2,710,753	0.02%	0.07%	1	1	100.0%
Outstanding Investigators — R35	125	118,267,263	946,138	1.93%	3.21%	104	20	19.23%
NIH Director's Early Independence Awards — DP5	6	2,494,387	415,731	0.09%	0.07%	0	0	0.0%
Academic Research Enhancement Awards (AREA) — R15	20	8,950,505	447,525	0.31%	0.24%	222	20	9.01%
Multi-Component Research Project Coop. Agreements — UM1/RM1	5	7,922,927	1,584,585	0.08%	0.22%	0	0	0.0%
Research Specialist Award — R50	63	10,559,083	167,604	0.97%	0.29%	27	14	51.85%
Cooperative Agreements — U01/ U19	194	143,755,893	741,010	3.0%	3.9%	394	45	11.42%
Cooperative Agreements — U01/ U19 - Moonshot	1	2,896,944	2,896,944	0.02%	0.08%	1	1	100.0%

continuea

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Source: Office of Extramural Finance and Information Analysis.

Table 13 (cont'd). Summary of NCI Grant Awards by Mechanism in FY2018*

Fund Type: Appropriated				% of N Gra	CI Total ints		Fiscal Yea	r: 2018
Cost Centers Mechanisms	Awards Count	Awards Dollars	Average Cost	Number	Dollars	Competing Requested	Competing Awarded	Success Rate
Request for Applications	253	94,337,235	372,874	3.91%	2.56%	674	73	10.83%
Request for Applications - Moonshot	1	247,310	247,310	0.02%	0.01%	0	0	0.0%
Cooperative Agreements — RFA-U01/U19	120	157,411,061	1,311,759	1.86%	4.27%	80	17	21.25%
Cooperative Agreements — RFA- U01/U19 UM1 - Moonshot	26	61,547,461	2,367,210	0.4%	1.67%	143	25	17.48%
Small Business Innovative Research — R43/R44	216	113,816,989	526,931	3.34%	3.09%	847	140	16.53%
Small Business Innovative Research — R43/R44 - Moonshot	3	3,019,904	1,006,635	0.05%	0.08%	0	0	0.0%
Small Business Technology Transfer — R41/R42	37	17,018,184	459,951	0.57%	0.46%	259	31	11.97%
Small Business Technology Transfer — R41/R42 - Moonshot	3	1,326,638	442,213	0.05%	0.04%	2	2	100.0%
Program Evaluation — R01	0	84,028,127	84,028,127	0.0%	2.28%	0	0	0.0%
Subtotal Research Project Grants	4,754	2,442,027,686	513,679	73.53%	66.3%	11,425	1,330	11.64%
Other Research								
Clinical Cooperative Groups — U10/ UG1	101	248,937,637	2,464,729	1.56%	6.76%	0	0	0.0%
Clinical Cooperative Groups — CCCT	0	5,596,745	5,596,745	0.0%	0.15%	0	0	0.0%
Cooperative Conference Grants — U13	2	9,000	4,500	0.03%	0.0%	1	1	100.0%
Conference Grants — R13/U13	46	724,409	15,748	0.71%	0.02%	74	41	55.41%
International Research Training Grants Conference — D43/U2R	0	943,987	943,987	0.0%	0.03%	0	0	0.0%
Cancer Education Awards — R25	76	21,181,892	278,709	1.18%	0.58%	63	13	20.63%
Research/Resource Grant — R24/ U24/U2C	75	85,154,935	1,135,399	1.16%	2.31%	67	10	14.93%
Research/Resource Grant — R24/ U24/U2C U24 - Moonshot	15	93,173,756	6,211,584	0.23%	2.53%	43	15	34.88%
Minority Biomedical Research Support — S06	0	97,802	97,802	0.0%	0.0%	0	0	0.0%
Predoctoral to Postdoctoral Fellow Transition Award — F99	47	1,769,662	37,652	0.73%	0.05%	73	23	31.51%
Research Pathway in Residency — R38	1	358,020	358,020	0.02%	0.01%	1	1	100.0%
Subtotal Other Research	363	457,947,845	1,261,564	5.61%	12.43%	322	104	32.3%

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Source: Office of Extramural Finance and Information Analysis.

Table 13 (cont'd). Summary of NCI Grant Awards by Mechanism in FY2018*

Fund Type: Appropriated				% of N Gra	CI Total nts		Fiscal Yea	r: 2018
Cost Centers Mechanisms	Awards Count	Awards Dollars	Average Cost	Number	Dollars	Competing Requested	Competing Awarded	Success Rate
Centers								
Core/Planning — P20/P30	91	319,656,889	3,512,713	1.41%	8.68%	49	16	32.65%
Core/Planning — P20/P30 - Moonshot	0	10,711,918	10,711,918	0.0%	0.29%	0	0	0.0%
Core — CCCT	0	1,061,133	1,061,133	0.0%	0.03%	0	0	0.0%
SPORE Grants — P50	54	113,727,779	2,106,070	0.84%	3.09%	55	17	30.91%
Specialized Center (Cooperative Agreement) — U54/U41	81	117,955,905	1,456,246	1.25%	3.2%	53	11	20.75%
Specialized Center (Cooperative Agreement) — U54/U41 - Moonshot	11	61,079,470	5,552,679	0.17%	1.66%	7	7	100.0%
Specialized Center (Cooperative Agreement) — BD2K	1	1,382,393	1,382,393	0.02%	0.04%	0	0	0.0%
Subtotal Centers	238	625,575,487	2,628,468	3.68%	16.98%	164	51	31.1%
NRSA								
NRSA Institution — T32/T35	167	59,063,597	353,674	2.58%	1.6%	64	36	56.25%
NRSA Fellowships — F31/F32	525	23,148,157	44,092	8.12%	0.63%	742	217	29.25%
Subtotal NRSA	692	82,211,754	118,803	10.7%	2.23%	806	253	31.39%
Careers								
Mentored Clinical Scientist — K08	103	18,571,361	180,304	1.59%	0.5%	125	36	28.8%
Preventive Oncology Award — K07	69	10,642,982	154,246	1.07%	0.29%	79	19	24.05%
Mentored Career Award — K12	21	14,228,491	677,547	0.32%	0.39%	9	6	66.67%
Mentored Research Scient Devel Awds/Mentored Career Dev /Temin — K01/Intl. Career — K43	41	5,979,795	145,849	0.63%	0.16%	33	13	39.39%
Clinical Research Track — K22	58	10,304,211	177,659	0.9%	0.28%	137	18	13.14%
Mentored Patient-Oriented Research Career Dev A — K23	13	2,165,733	166,595	0.2%	0.06%	9	1	11.11%
Mid-Career Investigator in Patient- Oriented Res A — K24	13	2,379,742	183,057	0.2%	0.06%	0	0	0.0%
Mentored Quantitative Resch. Career Dev. Awd. — K25	6	847,484	141,247	0.09%	0.02%	0	0	0.0%
Established Invest. Award in Ca Prevention & Control — K05	5	444,131	88,826	0.08%	0.01%	0	0	0.0%
Postdoctoral Fellow Awards — K00	30	2,293,876	76,463	0.46%	0.06%	0	0	0.0%
Pathway to Independence — K99	59	7,564,148	128,206	0.91%	0.21%	176	36	20.45%
Subtotal Careers	418	75,421,954	180,435	6.47%	2.05%	568	129	22.71%
Total:	6,465	3,683,184,726	569,711	100.0%	100.0%	13,285	1,867	14.05%

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Source: Office of Extramural Finance and Information Analysis.

Table 14. Average Total Cost*† and Number of Research Project Grant Awards Sorted by Division, Office, Center, and Mechanism From FY2014 – FY2018

Budget	FY 20	014	FY 2	015	FY 2	016	FY 2	017	FY 2	.018	Percent 2014 vs	
Mechanism/ Division	No.	Avg. Cost	No.	Avg. Cost	No.	Avg. Cost	No.	Avg. Cost	No.	Avg. Cost	No.	Avg. Cost
R01 Average Co	ost of Awa	ard										
NCI Overall	3,085	378	2,949	398	2,883	414	2,927	430	2,964	444	-3.92%	17.46%
DCB	0	0	0	0	0	0	6	761	6	967	100.0%	100.0%
DCB	1,441	330	1,375	351	1,324	370	1,307	381	1,291	395	-10.4%	19.8%
DCP	0	0	0	0	0	0	1	940	1	982	100.0%	100.0%
DCP	201	434	199	442	194	452	194	479	210	495	4.5%	13.9%
DCTD	0	0	0	0	0	0	2	1,239	2	1,153	100.0%	100.0%
DCTD	1,041	362	1,014	390	1,024	407	1,079	422	1,102	435	5.9%	20.1%
DCCPS	0	0	0	0	0	0	5	613	5	564	100.0%	100.0%
DCCPS	391	542	354	556	336	565	328	578	339	573	-13.3%	5.7%
OD (CRCHD, OCAM, CSSI, CCT, OHAM, etc.)	0	0	0	0	0	0	0	0	0	229	0.0%	100.0%
OD (CRCHD, OCAM, CSSI, CCT, OHAM, etc.)	11	1,343	7	1,703	5	2,043	5	2,301	8	1,909	-27.3%	42.1%
P01 Average Co	ost of Awa	ard										
NCI Overall	109	1,937	100	1,938	94	1,844	90	1,886	85	1,947	-22.02%	0.52%
DCB	0	0	0	0	0	0	0	48	0	53	0.0%	100.0%
DCB	45	1,708	44	1,713	43	1,768	42	1,765	38	1,812	-15.6%	6.0%
DCP	7	1,652	5	1,253	3	1,233	2	1,751	2	1,948	-71.4%	17.9%
DCTD	0	0	0	0	0	0	4	2,290	4	2,257	100.0%	100.0%
DCTD	48	2,018	42	2,165	40	1,903	33	1,861	31	1,982	-35.4%	-1.8%
DCCPS	9	2,836	9	2,299	8	2,138	9	2,322	10	2,174	11.1%	-23.4%
OD (CRCHD,OCAM, CSSI, CCT, OHAM, etc.)	0	343	0	572	0	392	0	610	0	535	0.0%	56.0%
R03 Average Co	ost of Aw	ard										
NCI Overall	194	78	162	79	114	79	138	78	148	82	-23.71%	5.13%
DCB	22	76	33	79	28	79	56	79	71	80	222.7%	5.1%
DCP	48	78	28	79	8	80	9	78	8	78	-83.3%	0.0%
DCTD	24	78	29	79	24	79	33	78	39	80	62.5%	3.4%
DCCPS	100	78	72	79	54	80	40	78	30	92	-70.0%	17.2%
OD (CRCHD, OCAM, CSSI, CCT, OHAM, etc.)	0	0	0	68	0	0	0	0	0	0	0.0%	0.0%

†In thousands.

Source: Office of Extramural Finance and Information Analysis.

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Table 14. (cont'd). Average Total Cost*† and Number of Research Project Grant Awards Sorted by Division, Office, Center, and Mechanism From FY2014 – FY2018

Budget	FY 20	14	FY 20	015	FY 20	016	FY 20	017	FY 2	018	Percent (2014 vs	
Mechanism/ Division	No.	Avg. Cost	No.	Avg. Cost	No.	Avg. Cost	No.	Avg. Cost	No.	Avg. Cost	No.	Avg. Cost
R21 Average Co	ost of Awa	ırd										
NCI Overall	551	187	639	193	585	194	369	190	298	191	-45.92%	2.14%
DCB	0	0	0	0	0	0	0	80	0	0	0.0%	0.0%
DCB	138	188	196	193	201	190	102	186	27	186	-80.4%	-1.0%
DCP	44	172	55	188	61	191	32	186	22	196	-50.0%	14.2%
DCTD	0	0	0	0	0	0	0	0	0	78	0.0%	100.0%
DCTD	242	194	266	196	220	192	144	193	165	191	-31.8%	-1.5%
DCCPS	0	0	0	0	0	0	0	82	0	0	0.0%	0.0%
DCCPS	93	174	93	185	82	202	67	184	57	192	-38.7%	10.3%
OD (CRCHD, OCAM, CSSI, CCT, OHAM, etc.)	34	182	29	208	21	219	24	202	27	187	-20.6%	2.7%
U01/U19 Averag	ge Cost of	Award										
NCI Overall	79	988	53	1,141	65	912	68	1,243	91	1,117	15.19%	13.06%
DCB	0	0	0	0	0	0	2	1,672	8	2,554	100.0%	100.0%
DCB	1	1,065	6	753	6	690	5	1,120	7	771	600.0%	-27.6%
DCP	0	0	0	0	0	0	0	0	6	723	100.0%	100.0%
DCP	35	546	11	975	34	778	26	976	38	912	8.6%	66.9%
DCTD	0	0	0	0	0	0	8	1,718	4	780	100.0%	100.0%
DCTD	1	3,820	7	780	6	462	6	809	5	335	400.0%	-91.2%
DCCPS	0	0	0	0	0	0	0	0	1	1,043	100.0%	100.0%
DCCPS	16	1,570	16	1,570	6	1,912	6	2,037	7	1,661	-56.3%	5.8%
OD (CRCHD, OCAM, CSSI, CCT, OHAM, etc.)	26	1,113	13	1,129	13	1,113	15	1,292	15	1,291	-42.3%	16.0%
R13 Average Co	ost of Awa	ırd										
NCI Overall	54	14	54	14	51	14	53	13	46	16	-14.81%	14.29%
DCB	22	6	29	4	22	6	30	4	19	6	-13.6%	10.2%
DCP	3	34	6	17	4	22	4	24	5	20	66.7%	-41.2%
DCTD	18	6	11	10	12	7	8	7	10	7	-44.4%	4.9%
DCCPS	8	21	5	26	8	19	6	22	7	18	-12.5%	-12.6%
OD (CRCHD, OCAM, CSSI, CCT, OHAM, etc.)	3	84	3	93	5	50	5	51	5	62	66.7%	-25.7%

†In thousands.

Source: Office of Extramural Finance and Information Analysis.

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Table 14. (cont'd). Average Total Cost*† and Number of Research Project Grant Awards Sorted by Division, Office, Center, and Mechanism From FY2014 – FY2018

Budget Mochanism/	FY 20)14	FY 20	015	FY 2	016	FY 2	017	FY 2	018	Percent 2014 vs	
Mechanism/ Division	No.	Avg. Cost	No.	Avg. Cost	No.	Avg. Cost	No.	Avg. Cost	No.	Avg. Cost	No.	Avg. Cost
U10 Average Co	ost of Awa	ard										
NCI Overall	49	3,637	49	3,130	48	2,852	48	2,919	48	2,966	-2.04%	-18.45%
DCP	0	11,012	0	1,009	0	0	0	0	0	0	0.0%	-100.0%
DCTD	49	3,412	49	3,110	48	2,852	48	2,919	48	2,966	-2.0%	-13.1%
P30 Average Co	ost of Awa	ard										
NCI Overall	68	4,098	69	4,110	69	4,761	69	4,426	70	4,654	2.94%	13.57%
OD (CRCHD, OCAM, CSSI, CCT, OHAM, etc.)	68	4,098	69	4,110	69	4,761	69	4,426	70	4,654	2.9%	13.6%
P50 Average Co	ost of Awa	ard										
NCI Overall	61	2,012	53	2,046	54	2,056	51	2,185	50	2,191	-18.03%	8.9%
DCP	0	388	0	0	0	0	0	0	0	0	0.0%	-100.0%
DCTD	56	2,032	53	2,042	51	2,142	51	2,177	50	2,188	-10.7%	7.7%
DCCPS	5	1,676	0	0	3	464	0	0	0	0	-100.0%	-100.0%
OD (CRCHD, OCAM, CSSI, CCT, OHAM, etc.)	0	138	0	220	0	402	0	385	0	128	0.0%	-7.2%
SBIR Average (Cost of Aw	ard									'	
NCI Overall	171	391	162	479	151	554	188	564	219	534	28.07%	36.57%
DCTD	0	66	0	0	0	0	0	0	0	0	0.0%	-100.0%
DCCPS	0	0	0	77	0	0	0	0	0	0	0.0%	0.0%
SBIRDC	0	0	0	0	0	0	4	817	3	1,007	100.0%	100.0%
SBIRDC	171	391	162	479	151	554	183	556	216	527	26.3%	34.9%
STTR Average	Cost of Av	vard										
NCI Overall	46	325	32	469	51	349	50	392	40	459	-13.04%	41.23%
SBIRDC	0	0	0	0	0	0	4	327	3	442	100.0%	100.0%
SBIRDC	46	325	32	469	51	349	46	397	37	460	-19.6%	41.4%
U54 Average Co	ost of Awa	ard										
NCI Overall	99	1,268	90	1,073	55	1,602	66	1,534	68	2,261	-31.31%	78.31%
CRCHD	49	978	51	818	30	1,268	31	1,238	38	1,480	-22.4%	51.2%
CSSI	9	2,343	6	2,116	6	2,234	6	2,206	0	0	-100.0%	-100.0%
DCB	30	1,288	22	1,110	17	2,080	22	2,040	30	3,237	0.0%	151.4%
DCCPS	11	1,626	11	1,611	2	651	7	675	0	400	-100.0%	-75.4%

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†In thousands.

Source: Office of Extramural Finance and Information Analysis.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Anatomical Site	Counts and Relevant Dollars [†]	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	3	2	1	1	1	
	Relevant Grant Dollars	440,344	255,563	202,275	‡	209,995	
Adronal	Number of Contracts	#	#	#	#	#	
Adrenal	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	3	2	1	1	1	
	Total Relevant Dollars	440,344	255,563	202,275	‡	209,995	-19.71
	Number of Grants	19	17	21	27	31	
	Relevant Grant Dollars	3,860,964	3,142,985	3,368,804	4,894,934	5,489,383	
Anuo	Number of Contracts	#	#	#	#	#	
Anus	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	19	17	21	27	31	
	Total Relevant Dollars	3,860,964	3,142,985	3,368,804	4,894,934	5,489,383	11.50
	Number of Grants	147	129	127	124	127	
	Relevant Grant Dollars	23,221,839	23,038,302	21,648,984	21,066,346	30,288,601	
Bladder	Number of Contracts	#	3	13	15	9	
Biaduei	Relevant Contract Dollars	‡	2,845,018	5,856,681	8,205,875	4,183,614	
	Total Count	147	132	140	139	136	
	Total Relevant Dollars	23,221,839	25,883,320	27,505,665	29,272,221	34,472,215	10.47
	Number of Grants	40	21	13	13	9	
	Relevant Grant Dollars	6,186,065	5,101,356	4,425,573	3,539,567	2,803,956	
Bone Marrow	Number of Contracts	#	#	#	#	#	
DOITE IVIAITOW	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	40	21	13	13	9	
	Total Relevant Dollars	6,186,065	5,101,356	4,425,573	3,539,567	2,803,956	-17.89
	Number of Grants	54	19	13	11	7	
	Relevant Grant Dollars	4,313,783	2,011,240	3,340,737	3,299,530	2,706,328	
Bone, Cartilage	Number of Contracts	#	#	#	#	#	
bolle, Galulage	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	54	19	13	11	7	
	Total Relevant Dollars	4,313,783	2,011,240	3,340,737	3,299,530	2,706,328	-1.62
	Number of Grants	557	538	536	534	565	
	Relevant Grant Dollars	162,133,244	184,919,655	177,269,529	196,218,129	195,752,964	
Brain	Number of Contracts	2	2	#	3	1	
טומווו	Relevant Contract Dollars	422,895	968,489	‡	606,179	50,007	
	Total Count	559	540	536	537	566	
	Total Relevant Dollars	162,556,139	185,888,144	177,269,529	196,824,308	195,802,971	5.05

continued

^{*} Not Site Specific = research that lacks a focus on a particular type of cancer/cancer site (e.g., basic research on the role of a protein in cellular DNA damage in fruit flies has no cancer site focus; however, it is relevant to cancer research).

[†] Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡] Coding not required or requested.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Breast Number of Grants 1,811 1,729 1,673 1,619 1,608 Breast Relevant Grant Dollars 478,79,2611 491,214,544 470,476,822 249,020,790 527,293,687 Relevant Contract Dollars 5,422,635 9,929,992 14,699,628 13,533,386 8,187,849 Total Count 1,821 1,740 1,695 1,636 1,626 Number of Grants 483,379,269 501,114,473 485,176,451 507,591,919 355,481,566 2.62 Relevant Contract Dollars 1,739,620 1,300,559 784,790 1,347,811 1,001,486 -471 System Relevant Contract Dollars 1,739,620 1,300,559 784,790 1,347,811 1,001,486 -471 Total Relevant Dollars 1,739,620 1,300,559 784,790 1,347,811 1,001,486 -471 Cervix Number of Grants 305 227 207 183 190 -471 Cervix Number of Grants 305 227 207 183 19	Anatomical Site	Counts and Relevant Dollars [†]	2014	2015	2016	2017	2018	Average Percent Change/Year
Breast Mumber of Contract Dollars Relevant Contract Dollars Relevant Contract Dollars S,422,635 9,929,929 14,699,628 13,538,368 8,187,849 Total Count Total Count Total Dollars Total Count Total Relevant Dollars Relevant Dollars Relevant Grant Do		Number of Grants	1,811	1,729	1,673	1,619	1,609	
Breast Relevant Contract Dollars 5,422,635 9,929,929 14,699 628 13,538,668 8,187,849 Total Count 1,821 1,740 1,695 1,636 1,626 Total Relevant Dollars 483,879,269 501,144,473 485,176,451 507,559,159 535,481,536 2.62 Mumber of Grants 48 13 9 13 10		Relevant Grant Dollars	478,792,611	491,214,544	470,476,822	494,020,790	527,293,687	
Relevant Contract Dollars 5,422,635 9,929,929 14,699,628 13,538,368 8,187,849 70tal Count 1,821 1,740 1,695 1,636 1,62	Propot	Number of Contracts	10	11	22	17	17	
Total Relevant Dollars	Diedst	Relevant Contract Dollars	5,422,635	9,929,929	14,699,628	13,538,368	8,187,849	
Number of Grants 48 13 9 13 10		Total Count	1,821	1,740	1,695	1,636	1,626	
Relevant Grant Dollars 1,739,620 1,300,559 784,790 1,347,811 1,001,486		Total Relevant Dollars	483,879,269	501,144,473	485,176,451	507,559,159	535,481,536	2.62
Central Nervous System Relevant Contracts # # # # # # # # # # # # # # # # # #		Number of Grants	48	13	9	13	10	
System Relevant Contract Dollars		Relevant Grant Dollars	1,739,620	1,300,559	784,790	1,347,811	1,001,486	
Total Count Total Relevant Dollars 1,739,620 1,300,559 784,790 1,347,811 1,001,486 -4,71	Central Nervous	Number of Contracts	#	#	#	#	#	
Total Relevant Dollars 1,739,620 1,300,559 784,790 1,347,811 1,001,486 -4.71	System	Relevant Contract Dollars	‡	‡	‡	‡	‡	
Number of Grants 3.05 2.27 2.07 18.3 19.0		Total Count	48	13	9	13	10	
Cervix Relevant Grant Dollars 52,183,192 45,275,628 51,244,770 51,639,739 56,529,769 Number of Contracts 1 # 3 5 2 Relevant Contract Dollars 740,476 # 51,25,766 3,846,974 855,852 Total Count 306 227 210 188 192 Total Relevant Dollars 52,923,668 45,275,628 56,370,536 55,486,713 57,385,621 2.97 Childhood Leukemia Mumber of Grants 159 143 177 174 162 Relevant Grant Dollars 36,743,720 36,439,553 55,857,941 56,840,658 65,760,928 Mumber of Contract Dollars #<		Total Relevant Dollars	1,739,620	1,300,559	784,790	1,347,811	1,001,486	-4.71
Cervix Number of Contracts 1 ‡ 3 5 2 Relevant Contract Dollars 740,476 ‡ 5,125,766 3,846,974 855,852 Total Count 306 227 210 188 192 Total Relevant Dollars 52,923,668 45,275,628 56,370,536 55,486,713 57,385,621 2.97 Childhood Leukemia Mumber of Grants 159 143 177 174 162 Relevant Grant Dollars 36,743,720 36,439,553 55,857,941 56,840,658 65,760,928 Relevant Contracts ‡		Number of Grants	305	227	207	183	190	
Cervix Relevant Contract Dollars 740,476 ‡ 5,125,766 3,846,974 855,852 Total Count 306 227 210 188 192 Total Relevant Dollars 52,923,668 45,275,628 56,370,536 55,486,713 57,385,621 2.97 Childhood Leukemia Number of Grants 159 143 177 174 162 Relevant Grant Dollars 36,743,720 36,439,553 55,857,941 56,840,658 65,760,928 Relevant Contracts ‡ ½ 26,340,658 65		Relevant Grant Dollars	52,183,192	45,275,628	51,244,770	51,639,739	56,529,769	
Relevant Contract Dollars 740,476 ‡ 5,125,766 3,846,974 855,852 Total Count 306 227 210 188 192 Total Relevant Dollars 52,923,668 45,275,628 56,370,536 55,486,713 57,385,621 2.97 Mumber of Grants 159 143 177 174 162 Relevant Grant Dollars 36,743,720 36,439,553 55,857,941 56,840,658 65,760,928 Number of Contracts ‡ ‡ ‡ ‡ ‡ ‡ ‡ † † † † † † † † † † † †	Consiv	Number of Contracts	1	#	3	5	2	
Total Relevant Dollars 52,923,668 45,275,628 56,370,536 55,486,713 57,385,621 2.97	CELVIX	Relevant Contract Dollars	740,476	‡	5,125,766	3,846,974	855,852	
Number of Grants 159 143 177 174 162 Relevant Grant Dollars 36,743,720 36,439,553 55,857,941 56,840,658 65,760,928 Number of Contracts ‡ ‡ ‡ ‡ ‡ ‡ ‡ † Relevant Contract Dollars ‡ ‡ ‡ ‡ ‡ ‡ † † † † † † † † † † † † †		Total Count	306	227	210	188	192	
Childhood Leukemia Relevant Grant Dollars 36,743,720 36,439,553 55,857,941 56,840,658 65,760,928 Number of Contracts #		Total Relevant Dollars	52,923,668	45,275,628	56,370,536	55,486,713	57,385,621	2.97
Childhood Leukemia Number of Contracts Relevant Contract Dollars ‡ ½ ‡ ½ * * * * * * * * * * <td></td> <td>Number of Grants</td> <td>159</td> <td>143</td> <td>177</td> <td>174</td> <td>162</td> <td></td>		Number of Grants	159	143	177	174	162	
Relevant Contract Dollars		Relevant Grant Dollars	36,743,720	36,439,553	55,857,941	56,840,658	65,760,928	
Relevant Contract Dollars	Childhood Loukomia	Number of Contracts	#	#	#	#	#	
Colon, Rectum Total Relevant Dollars 36,788,720 36,439,553 55,857,941 56,840,658 65,760,928 17.44 Colon, Rectum Number of Grants 866 754 698 668 705 Relevant Grant Dollars 198,038,574 186,582,220 185,327,068 182,797,070 234,480,747 Number of Contracts 6 9 16 16 12 Relevant Contract Dollars 3,024,309 4,627,427 9,412,567 8,004,223 3,410,116 Total Count 872 763 714 684 717 Total Relevant Dollars 201,062,883 191,209,647 194,739,634 190,801,293 237,890,863 4.90 Esophagus Number of Grants 117 116 109 101 100 Relevant Grant Dollars 24,631,620 26,634,006 22,479,745 27,239,377 25,721,355 Relevant Contracts ‡ ‡ ‡ ‡ ‡ ‡ ‡ Relevant Contract Dollars </td <td>Gillulioou Leukeiilla</td> <td>Relevant Contract Dollars</td> <td>‡</td> <td>‡</td> <td>‡</td> <td>‡</td> <td>‡</td> <td></td>	Gillulioou Leukeiilla	Relevant Contract Dollars	‡	‡	‡	‡	‡	
Number of Grants 866 754 698 668 705 Relevant Grant Dollars 198,038,574 186,582,220 185,327,068 182,797,070 234,480,747 Number of Contracts 6 9 16 16 12 Relevant Contract Dollars 3,024,309 4,627,427 9,412,567 8,004,223 3,410,116 Total Count 872 763 714 684 717 Total Relevant Dollars 201,062,883 191,209,647 194,739,634 190,801,293 237,890,863 4.90 Mumber of Grants 117 116 109 101 100 Relevant Grant Dollars 24,631,620 26,634,006 22,479,745 27,239,377 25,721,355 Number of Contracts ‡ ‡ ‡ ‡ ‡ ‡ Relevant Contract Dollars ‡ ‡ ‡ ‡ ‡ ‡ Total Count 117 116 109 101 100 100		Total Count	160	143	177	174	162	
Colon, Rectum Relevant Grant Dollars 198,038,574 186,582,220 185,327,068 182,797,070 234,480,747 Number of Contracts 6 9 16 16 12 Relevant Contract Dollars 3,024,309 4,627,427 9,412,567 8,004,223 3,410,116 Total Count 872 763 714 684 717 Total Relevant Dollars 201,062,883 191,209,647 194,739,634 190,801,293 237,890,863 4.90 Parameter of Grants 117 116 109 101 100 Relevant Grant Dollars 24,631,620 26,634,006 22,479,745 27,239,377 25,721,355 Parameter of Contracts #		Total Relevant Dollars	36,788,720	36,439,553	55,857,941	56,840,658	65,760,928	17.44
Colon, Rectum Number of Contracts 6 9 16 16 12 Relevant Contract Dollars 3,024,309 4,627,427 9,412,567 8,004,223 3,410,116 Total Count 872 763 714 684 717 Total Relevant Dollars 201,062,883 191,209,647 194,739,634 190,801,293 237,890,863 4.90 Relevant Grants 117 116 109 101 100 Relevant Grant Dollars 24,631,620 26,634,006 22,479,745 27,239,377 25,721,355 Number of Contracts ‡ ‡ ‡ ‡ ‡ Relevant Contract Dollars ‡ ‡ ‡ ‡ ‡ Total Count 117 116 109 101 100		Number of Grants	866	754	698	668	705	
Colon, Rectum Relevant Contract Dollars 3,024,309 4,627,427 9,412,567 8,004,223 3,410,116 Total Count 872 763 714 684 717 Total Relevant Dollars 201,062,883 191,209,647 194,739,634 190,801,293 237,890,863 4.90 Esophagus Number of Grants 117 116 109 101 100 Relevant Grant Dollars 24,631,620 26,634,006 22,479,745 27,239,377 25,721,355 Number of Contracts #		Relevant Grant Dollars	198,038,574	186,582,220	185,327,068	182,797,070	234,480,747	
Relevant Contract Dollars 3,024,309 4,627,427 9,412,567 8,004,223 3,410,116 Total Count 872 763 714 684 717 Total Relevant Dollars 201,062,883 191,209,647 194,739,634 190,801,293 237,890,863 4.90 Number of Grants 117 116 109 101 100 Relevant Grant Dollars 24,631,620 26,634,006 22,479,745 27,239,377 25,721,355 Number of Contracts ‡ ‡ ‡ ‡ ‡ ‡ † † † † † † † † † † † † †	Colon Doctum	Number of Contracts	6	9	16	16	12	
Total Relevant Dollars 201,062,883 191,209,647 194,739,634 190,801,293 237,890,863 4.90 Number of Grants 117 116 109 101 100	Colori, necturii	Relevant Contract Dollars	3,024,309	4,627,427	9,412,567	8,004,223	3,410,116	
Number of Grants 117 116 109 101 100 Relevant Grant Dollars 24,631,620 26,634,006 22,479,745 27,239,377 25,721,355 Number of Contracts # <t< td=""><td></td><td>Total Count</td><td>872</td><td>763</td><td>714</td><td>684</td><td>717</td><td></td></t<>		Total Count	872	763	714	684	717	
Relevant Grant Dollars 24,631,620 26,634,006 22,479,745 27,239,377 25,721,355 Besophagus Relevant Contracts #		Total Relevant Dollars	201,062,883	191,209,647	194,739,634	190,801,293	237,890,863	4.90
Esophagus # # # # # # # # # # # # # # # # # # #		Number of Grants	117	116	109	101	100	
Esophagus Relevant Contract Dollars		Relevant Grant Dollars	24,631,620	26,634,006	22,479,745	27,239,377	25,721,355	
Relevant Contract Dollars ‡ ‡ ‡ ‡ ‡ **Total Count* 117 116 109 101 100	Ecophogue	Number of Contracts	#	#	#	#	#	
	Esophagus	Relevant Contract Dollars	‡	‡	‡	‡	‡	
Total Relevant Dollars 24,631,620 26,634,006 22,479,745 27,239,377 25,721,355 2.03		Total Count	117	116	109	101	100	
		Total Relevant Dollars	24,631,620	26,634,006	22,479,745	27,239,377	25,721,355	2.03

continued

^{*} Not Site Specific = research that lacks a focus on a particular type of cancer/cancer site (e.g., basic research on the role of a protein in cellular DNA damage in fruit flies has no cancer site focus; however, it is relevant to cancer research).

[†] Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡] Coding not required or requested.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Anatomical Site	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	17	23	26	30	27	
	Relevant Grant Dollars	2,855,615	4,363,108	3,817,344	5,252,252	4,540,263	
Evo.	Number of Contracts	#	#	#	1	#	
Eye	Relevant Contract Dollars	‡	‡	‡	1,999,987	‡	
	Total Count	17	23	26	31	27	
	Total Relevant Dollars	2,855,615	4,363,108	3,817,344	7,252,239	4,540,263	23.21
	Number of Grants	2	1	4	4	6	
	Relevant Grant Dollars	‡	‡	579,237	476,722	1,217,986	
Gall Bladder	Number of Contracts	#	#	#	#	#	
dali biaudei	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	2	1	4	4	6	
	Total Relevant Dollars	‡	‡	579,237	476,722	1,217,986	68.89
	Number of Grants	4	2	7	10	14	
	Relevant Grant Dollars	\$986,331	\$104,162	\$888,078	\$1,638,139	3,155,373	
Gastrointestinal	Number of Contracts	#	1	#	#	#	
Stromal Tumor	Relevant Contract Dollars	‡	\$650,641	‡	‡	‡	
	Total Count	4	3	7	10	14	
	Total Relevant Dollars	\$986,331	\$754,803	\$888,078	\$1,638,139	3,155,373	42.81
	Number of Grants	35	33	33	30	25	
	Relevant Grant Dollars	5,831,855	5,873,156	6,074,796	5,074,964	4,019,325	
Gastrointestinal Tract	Number of Contracts	#	2	4	1	1	
dasironnesunai maci	Relevant Contract Dollars	‡	1,663,052	2,858,139	627,879	894,832	
	Total Count	35	35	37	31	26	
	Total Relevant Dollars	5,831,855	7,536,208	8,932,935	5,702,843	4,914,157	-0.55
	Number of Grants	226	205	191	198	196	
	Relevant Grant Dollars	33,439,973	35,246,846	35,221,524	38,974,882	40,445,671	
Head and Neck	Number of Contracts	3	3	3	2	3	
neau anu neck	Relevant Contract Dollars	1,733,390	1,713,852	1,814,999	312,604	128,865	
	Total Count	229	208	194	200	199	
	Total Relevant Dollars	35,173,363	36,960,698	37,036,523	39,287,486	40,574,536	3.66
	Number of Grants	51	39	35	32	31	
	Relevant Grant Dollars	10,262,763	8,519,854	8,217,911	8,282,621	8,711,348	
Hodgkin Lymphoma	Number of Contracts	#	#	#	#	#	
Houghii Lymphoma	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	51	39	<i>35</i>	32	31	
	Total Relevant Dollars	10,262,763	8,519,854	8,217,911	8,282,621	8,711,348	-3.64

continued

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[†] Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡] Coding not required or requested.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Anatomical Site	Counts and Relevant Dollars [†]	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	<i>76</i>	77	63	66	67	
	Relevant Grant Dollars	20,860,705	21,864,767	24,537,356	27,418,524	26,360,868	
Kaposi Sarcoma	Number of Contracts	#	#	#	#	#	
Naposi Sarcoma	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	76	77	63	66	67	
	Total Relevant Dollars	20,860,705	21,864,767	24,537,356	27,418,524	26,360,868	6.23
	Number of Grants	237	160	154	146	162	
	Relevant Grant Dollars	21,146,275	23,745,801	27,200,468	29,737,839	35,202,508	
Kidney	Number of Contracts	#	#	#	#	#	
Nulley	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	237	160	154	146	162	
	Total Relevant Dollars	21,146,275	23,745,801	27,200,468	29,737,839	35,202,508	13.63
	Number of Grants	7	5	5	3	2	
	Relevant Grant Dollars	1,535,331	671,024	575,873	473,788	431,926	
Lammy	Number of Contracts	#	#	#	#	#	
Larynx	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	7	5	5	3	2	
	Total Relevant Dollars	1,535,331	671,024	575,873	473,788	431,926	-24.25
	Number of Grants	781	702	675	670	644	
	Relevant Grant Dollars	212,414,621	218,460,707	217,864,508	225,848,786	237,381,418	
Laukamia	Number of Contracts	4	5	1	2	2	
Leukemia	Relevant Contract Dollars	1,775,197	3,259,086	1,496,276	1,547,327	19,191	
	Total Count	785	707	676	672	646	
	Total Relevant Dollars	214,189,818	221,719,793	219,360,784	227,396,114	237,400,609	2.62
	Number of Grants	306	294	259	256	286	
	Relevant Grant Dollars	49,666,458	59,175,493	62,124,234	62,046,177	84,863,828	
Livor	Number of Contracts	#	2	2	3	3	
Liver	Relevant Contract Dollars	‡	1,488,511	353,600	1,674,216	99,772	
	Total Count	306	296	261	259	289	
	Total Relevant Dollars	49,666,458	60,664,004	62,477,834	63,720,393	84,963,600	15.11
	Number of Grants	977	898	891	875	907	
	Relevant Grant Dollars	219,322,515	220,913,549	242,571,606	267,051,228	297,030,756	
Lung	Number of Contracts	11	9	23	25	17	
Lung	Relevant Contract Dollars	6,163,921	5,231,560	15,848,869	21,302,044	17,215,341	
	Total Count	988	907	914	900	924	
	Total Relevant Dollars	225,486,436	226,145,109	258,420,475	288,353,271	314,246,097	8.78

continued

^{*} Not Site Specific = research that lacks a focus on a particular type of cancer/cancer site (e.g., basic research on the role of a protein in cellular DNA damage in fruit flies has no cancer site focus; however, it is relevant to cancer research).

[†] Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡] Coding not required or requested.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Anatomical Site	Counts and Relevant Dollars [†]	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	4	4	1	3	3	
	Relevant Grant Dollars	316,561	273,875	94,613	425,733	650,917	
Lumph Nodo	Number of Contracts	#	#	#	#	#	
Lymph Node	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	4	4	1	3	3	
	Total Relevant Dollars	316,561	273,875	94,613	425,733	650,917	80.98
	Number of Grants	3	5	3	2	1	
	Relevant Grant Dollars	397,376	704,373	261,544	218,028	205,770	
Lumphotic Custom	Number of Contracts	#	#	#	#	#	
Lymphatic System	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	3	5	3	2	1	
	Total Relevant Dollars	397,376	704,373	261,544	218,028	205,770	-1.96
	Number of Grants	502	461	462	481	506	
	Relevant Grant Dollars	106,822,745	114,263,178	119,244,182	132,231,623	141,106,072	
Melanoma	Number of Contracts	#	2	1	2	#	
Welanoma	Relevant Contract Dollars	‡	597,520	295,782	3,499,958	‡	
	Total Count	502	463	463	483	506	
	Total Relevant Dollars	106,822,745	114,860,698	119,539,964	135,731,581	141,106,072	7.27
	Number of Grants	25	25	26	20	20	
	Relevant Grant Dollars	7,157,480	5,376,051	6,939,730	6,037,260	8,166,842	
Mesothelioma	Number of Contracts	#	#	#	#	#	
Wesoutelloma	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	25	<i>2</i> 5	26	20	20	
	Total Relevant Dollars	7,157,480	5,376,051	6,939,730	6,037,260	8,166,842	6.61
	Number of Grants	10	5	4	4	3	
	Relevant Grant Dollars	862,759	384,442	342,916	496,492	440,899	
Muscle	Number of Contracts	#	#	#	#	#	
Muscle	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	10	3	4	4	3	
	Total Relevant Dollars	862,759	384,442	342,916	496,492	440,899	-8.16
	Number of Grants	174	184	190	199	191	
	Relevant Grant Dollars	37,800,248	40,799,287	45,263,432	53,362,826	55,081,460	
Myoloma	Number of Contracts	#	#	#	#	#	
Myeloma	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	174	184	190	199	191	
	Total Relevant Dollars	37,800,248	40,799,287	45,263,432	53,362,826	55,081,460	9.99

continued

^{*} Not Site Specific = research that lacks a focus on a particular type of cancer/cancer site (e.g., basic research on the role of a protein in cellular DNA damage in fruit flies has no cancer site focus; however, it is relevant to cancer research).

[†] Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡] Coding not required or requested.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

	ars [†] 2014	2015	2016	2017	2018	Average Percent Change/Year
Number of Grants	3 24	25	24	26	20	
Relevant Grant Dol	lars 4,421,874	6,108,596	6,153,043	6,585,936	4,747,277	
Nervous System	acts ‡	#	#	1	#	
Relevant Contract	Dollars ‡	‡	‡	1,499,991	‡	
Total Count	24	25	24	27	20	
Total Relevant Dolla	ars 4,421,874	6,108,596	6,153,043	8,085,927	4,747,277	7.24
Number of Grants	3 104	<i>75</i>	64	64	80	
Relevant Grant Dol	lars 21,130,521	16,233,598	17,024,278	20,384,541	26,308,199	
Neuroblastoma Number of Contra	acts ‡	#	#	#	#	
Relevant Contract I	Dollars ‡	‡	‡	‡	‡	
Total Count	104	<i>75</i>	64	64	80	
Total Relevant Dolla	ars 21,130,521	16,233,598	17,024,278	20,384,541	26,308,199	7.62
Number of Grants	452	413	387	353	340	
Relevant Grant Dol	lars 93,955,405	96,633,382	98,315,810	96,233,763	99,973,050	
Non-Hodgkin Number of Contra	acts ‡	#	#	#	#	
Lymphoma Relevant Contract I	Dollars ‡	‡	‡	‡	‡	
Total Count	452	413	387	353	340	
Total Relevant Dolla	ars 93,955,405	96,633,382	98,315,810	96,233,763	99,973,050	1.58
Number of Grants	1,747	1,668	1,629	1,645	1,716	
Relevant Grant Dol	lars 621,155,734	580,506,330	613,729,313	697,160,768	770,712,588	
Not Site Chesifie*	acts 181	152	154	135	174	
Not Site Specific* Relevant Contract I	Dollars 212,411,501	442,411,300	555,664,493	583,258,480	736,337,943	
Total Count	1,928	1,820	1,783	1,780	1,890	
Total Relevant Dolla	ars 833,567,235	1,022,917,630	1,169,393,806	1,280,419,248	1,507,050,531	16.05
Number of Grants	66	66	68	70	55	
Relevant Grant Dol	lars 8,835,614	12,635,411	13,714,954	13,533,375	12,182,738	
Oral Covity	acts ‡	#	#	#	#	
Oral Cavity Relevant Contract I	Dollars ‡	‡	‡	‡	‡	
Total Count	66	66	68	70	<i>55</i>	
Total Relevant Dolla	ars 8,835,614	12,635,411	13,714,954	13,533,375	12,182,738	10.06
Number of Grants	380	382	373	375	390	
Relevant Grant Dol	lars 79,194,763	77,297,410	83,576,854	95,963,310	106,717,144	
Number of Contra	acts 2	5	3	4	1	
Ovary Relevant Contract I	Dollars 1,182,604	3,363,895	1,470,356	1,535,829	215,329	
Total Count	382	387	376	379	391	
Total Relevant Dolla	ars 80,377,367	80,661,305	85,047,209	97,499,140	106,932,473	7.52

continued

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[†] Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡] Coding not required or requested.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Anatomical Site	Counts and Relevant Dollars [†]	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	494	499	502	527	553	
	Relevant Grant Dollars	109,038,628	113,151,301	138,490,101	163,371,849	169,736,794	
Danaraga	Number of Contracts	5	4	13	13	9	
Pancreas	Relevant Contract Dollars	6,483,207	3,791,916	5,378,661	4,908,116	789,909	
	Total Count	499	503	515	540	562	
	Total Relevant Dollars	115,521,835	116,943,217	143,868,761	168,279,965	170,526,703	10.63
	Number of Grants	3	3	3	4	2	
	Relevant Grant Dollars	401,380	391,973	219,722	676,030	652,252	
Parathyroid	Number of Contracts	#	#	#	#	#	
raiauiyiolu	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	3	3	3	4	2	
	Total Relevant Dollars	401,380	391,973	219,722	676,030	652,252	39.46
	Number of Grants	8	6	4	3	3	
	Relevant Grant Dollars	2,652,760	191,911	341,656	341,693	263,025	
Penis	Number of Contracts	#	#	#	#	#	
FEIIIS	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	8	6	4	3	3	
	Total Relevant Dollars	2,652,760	191,911	341,656	341,693	263,025	-9.43
	Number of Grants	<i>2</i> 5	21	17	16	8	
	Relevant Grant Dollars	1,881,045	2,704,917	2,017,103	2,045,454	1,456,420	
Pharynx	Number of Contracts	#	#	#	#	#	
r nai ynx	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	<i>25</i>	21	17	16	8	
	Total Relevant Dollars	1,881,045	2,704,917	2,017,103	2,045,454	1,456,420	-2.25
	Number of Grants	4	5	8	5	6	
	Relevant Grant Dollars	458,773	821,132	1,419,108	1,222,742	1,572,297	
Pituitary	Number of Contracts	#	#	#	#	#	
rituitary	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	4	5	8	5	6	
	Total Relevant Dollars	458,773	821,132	1,419,108	1,222,742	1,572,297	41.63
	Number of Grants	866	774	734	681	662	
	Relevant Grant Dollars	187,129,390	198,462,848	202,049,473	194,381,794	203,996,788	
Prostate	Number of Contracts	5	9	23	21	17	
Tiostate	Relevant Contract Dollars	6,350,291	6,069,471	15,201,920	13,540,995	7,118,212	
	Total Count	871	783	<i>757</i>	702	679	
	Total Relevant Dollars	193,479,681	204,532,319	217,251,393	207,922,789	211,115,001	2.29

continued

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[†] Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡] Coding not required or requested.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Anatomical Site	Counts and Relevant Dollars [†]	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	16	14	12	9	11	
	Relevant Grant Dollars	3,538,181	3,475,408	2,740,929	1,629,496	3,485,869	
Retinoblastoma	Number of Contracts	#	#	#	#	#	
neunobiasionia	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	16	12	12	9	11	
	Total Relevant Dollars	3,538,181	3,475,408	2,740,929	1,629,496	3,485,869	12.61
	Number of Grants	69	66	77	83	82	
Sarcoma, Bone	Relevant Grant Dollars	\$13,986,055	\$13,765,833	\$16,008,892	\$19,160,750	32,624,063	
	Number of Contracts	1	#	#	#	#	
Salcollia, Dolle	Relevant Contract Dollars	\$1,499,549	‡	‡	‡	‡	
	Total Count	70	66	77	83	82	
	Total Relevant Dollars	\$15,485,604	\$13,765,833	\$16,008,892	\$19,160,750	32,624,063	23.78
	Number of Grants	97	98	103	105	114	
	Relevant Grant Dollars	\$20,048,895	\$20,268,346	\$20,650,683	\$22,274,960	40,785,034	
Caraama Caff Tiaaua	Number of Contracts	#	#	#	#	#	
Sarcoma, Soft Tissue	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	97	98	103	105	114	
	Total Relevant Dollars	\$20,048,895	\$20,268,346	\$20,650,683	\$22,274,960	40,785,034	23.48
	Number of Grants	192	170	163	153	150	
	Relevant Grant Dollars	35,045,052	34,254,082	31,543,713	34,846,957	33,633,922	
Skin	Number of Contracts	#	1	#	2	1	
SKIII	Relevant Contract Dollars	‡	35,000	‡	1,576,506	288,945	
	Total Count	192	171	163	155	151	
	Total Relevant Dollars	35,045,052	34,289,082	31,543,713	36,423,463	33,922,867	-0.38
	Number of Grants	13	10	9	11	8	
	Relevant Grant Dollars	1,954,527	2,085,838	2,085,715	3,030,339	2,264,455	
Constitute ations	Number of Contracts	#	#	#	#	#	
Small Intestine	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	13	10	9	11	8	
	Total Relevant Dollars	1,954,527	2,085,838	2,085,715	3,030,339	2,264,455	6.68
	Number of Grants	63	66	63	62	60	
	Relevant Grant Dollars	8,597,660	9,547,109	11,180,211	11,244,817	11,759,946	
Ctomooh	Number of Contracts	#	#	#	#	#	
Stomach	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	63	66	63	62	60	
	Total Relevant Dollars	8,597,660	9,547,109	11,180,211	11,244,817	11,759,946	8.32

continued

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[†] Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡] Coding not required or requested.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Anatomical Site	Counts and Relevant Dollars [†]	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	8	10	9	8	8	
	Relevant Grant Dollars	3,880,838	3,143,451	730,983	1,741,733	1,660,195	
Tootio	Number of Contracts	#	#	#	#	#	
Testis	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	8	10	9	8	8	
	Total Relevant Dollars	3,880,838	3,143,451	730,983	1,741,733	1,660,195	9.46
	Number of Grants	5	4	3	2	6	
	Relevant Grant Dollars	449,070	239,742	260,988	116,127	1,081,389	
Thymus	Number of Contracts	‡	#	‡	#	#	
THYTHUS	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	5	4	3	2	6	
	Total Relevant Dollars	449,070	239,742	260,988	116,127	1,081,389	184.48
	Number of Grants	61	62	54	55	53	
	Relevant Grant Dollars	17,516,816	19,137,599	17,604,744	17,778,628	12,105,222	
Thuroid	Number of Contracts	‡	‡	‡	‡	‡	
Thyroid	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	61	62	54	55	53	
	Total Relevant Dollars	17,516,816	19,137,599	17,604,744	17,778,628	12,105,222	-7.42
	Number of Grants	101	88	90	90	92	
	Relevant Grant Dollars	13,467,035	10,947,265	15,043,375	15,803,076	15,069,028	
Uterus	Number of Contracts	#	#	#	#	#	
Oleius	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	101	88	90	90	92	
	Total Relevant Dollars	13,467,035	10,947,265	15,043,375	15,803,076	15,069,028	4.77
	Number of Grants	4	4	2	1	2	
	Relevant Grant Dollars	286,298	86,493	‡	383,925	524,157	
Vagina	Number of Contracts	#	#	#	#	#	
Vagina	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	4	4	2	1	2	
	Total Relevant Dollars	286,298	86,493	‡	383,925	524,157	103.53
	Number of Grants	19	14	6	7	5	
	Relevant Grant Dollars	2,310,811	1,745,884	668,887	1,118,191	837,968	
Vascular	Number of Contracts	#	#	#	#	#	
vasculai	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	19	14	6	7	5	
	Total Relevant Dollars	2,310,811	1,745,884	668,887	1,118,191	837,968	-11.00

continued

^{*} Not Site Specific = research that lacks a focus on a particular type of cancer/cancer site (e.g., basic research on the role of a protein in cellular DNA damage in fruit flies has no cancer site focus; however, it is relevant to cancer research).

[†] Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡] Coding not required or requested.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Anatomical Site	Counts and Relevant Dollars [†]	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	9	10	12	12	11	
	Relevant Grant Dollars	3,843,112	3,548,011	3,831,667	4,241,898	4,160,103	
Wilmo Tumor	Number of Contracts	#	#	#	#	#	
Wilms Tumor	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	9	10	12	12	11	
	Total Relevant Dollars	3,843,112	3,548,011	3,831,667	4,241,898	4,160,103	2.27

^{*} Not Site Specific = research that lacks a focus on a particular type of cancer/cancer site (e.g., basic research on the role of a protein in cellular DNA damage in fruit flies has no cancer site focus; however, it is relevant to cancer research).

[†] Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡] Coding not required or requested.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants		9	106	160	213	
	Relevant Grant Dollars		2,606,149	28,390,821	39,158,375	80,608,475	
Adolescent and Young	Number of Contracts		1	#	1	#	
Adults Cancer	Relevant Contract Dollars		140,000	‡	37,500	‡	
	Total Count		10	106	161	213	
	Total Relevant Dollars		2,746,149	28,390,821	39,195,875	80,608,475	359.18
	Number of Grants	211	210	200	203	204	
	Relevant Grant Dollars	52,024,707	45,245,708	43,690,082	50,677,796	65,668,061	
Adoptive Cell	Number of Contracts	#	#	#	2	1	
Immunotherapy	Relevant Contract Dollars	‡	‡	‡	539,847	‡	
	Total Count	211	210	200	<i>205</i>	205	
	Total Relevant Dollars	52,024,707	45,245,708	43,690,082	51,217,643	65,668,061	7.24
	Number of Grants	8	9	4	2	3	
	Relevant Grant Dollars	2,295,195	1,939,427	900,771	560,239	1,493,003	
Advanced	Number of Contracts	#	#	#	#	#	
Manufacturing Technology	Relevant Contract Dollars	‡	‡	‡	‡	‡	
recrinology	Total Count	8	9	4	2	3	
	Total Relevant Dollars	2,295,195	1,939,427	900,771	560,239	1,493,003	14.90
	Number of Grants	420	319	292	268	235	
	Relevant Grant Dollars	57,171,560	53,143,671	54,936,453	49,797,772	49,513,188	
Aging	Number of Contracts	1	3	4	5	5	
Aging	Relevant Contract Dollars	31,046	230,807	343,283	462,276	524,756	
	Total Count	421	322	296	273	240	
	Total Relevant Dollars	57,202,606	53,374,478	55,279,736	50,260,048	50,037,944	-3.16
	Number of Grants	317	229	190	154	181	
	Relevant Grant Dollars	52,792,542	47,270,448	42,068,505	35,660,834	45,018,152	
Altomotivo Modicino	Number of Contracts	2	2	2	2	2	
Alternative Medicine	Relevant Contract Dollars	3,552,516	4,201,607	6,035,840	4,872,052	3,855,644	
	Total Count	319	231	192	156	183	
	Total Relevant Dollars	56,345,058	51,472,055	48,104,345	40,532,886	48,873,796	-2.58
	Number of Grants	2	3	6	4	3	
	Relevant Grant Dollars	294,069	386,427	643,489	514,839	215,229	
	Number of Contracts	#	#	#	#	#	
Alzheimers Dementia	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	2	3	6	4	3	
	Total Relevant Dollars	294,069	386,427	643,489	514,839	215,229	4.93
	Number of Grants	8	5	5	5	5	
	Relevant Grant Dollars	1,141,359	562,755	730,070	1,387,435	1,238,465	
	Number of Contracts	#	#	#	#	#	
Arctic Research	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	8	5	5	5	5	
	Total Relevant Dollars	1,141,359	562,755	730,070	1,387,435	1,238,465	14.58
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^{*} Some categories are not mutually exclusive, resulting in overlap in reported funding. As a result, dollar totals may exceed 100 percent of the extramural budget.

[†]Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡]Coding not required or requested.

Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	12	13	13	9	8	_
	Relevant Grant Dollars	2,937,531	3,365,262	3,619,815	3,146,506	3,065,315	
Asbestos	Number of Contracts	#	#	#	#	#	
Nobocco	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	12	13	13	9	8	
	Total Relevant Dollars	2,937,531	3,365,262	3,619,815	3,146,506	3,065,315	1.61
	Number of Grants	6	5	5	5	2	
	Relevant Grant Dollars	309,072	749,775	786,560	971,104	439,541	
Ataxia Telangiectasia	Number of Contracts	#	#	#	#	#	
ritaria rolangiootaola	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	6	5	5	5	2	
	Total Relevant Dollars	309,072	749,775	786,560	971,104	439,541	29.05
	Number of Grants	22	14	9	7	10	
	Relevant Grant Dollars	1,403,677	630,151	832,994	922,027	2,402,185	
Autoimmune Diseases	Number of Contracts	#	#	#	#	#	
Autoimmune Diseases	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	22	14	9	7	10	
	Total Relevant Dollars	1,403,677	630,151	832,994	922,027	2,402,185	37.07
	Number of Grants	1,032	920	888	806	800	
	Relevant Grant Dollars	239765778	222,068,908	212,741,824	214,939,253	238,643,771	
Behavior Research	Number of Contracts	5	9	11	8	7	
Deliavioi nesealcii	Relevant Contract Dollars	3018920	8,316,984	8,642,050	3,674,886	4,155,657	
	Total Count	1037	929	899	814	807	
	Total Relevant Dollars	242784698	230,385,892	221,383,874	218,614,139	242,799,428	0.19
	Number of Grants	551	525	478	467	524	
	Relevant Grant Dollars	139,804,609	135,770,178	132,443,598	134,136,385	164,170,593	
Dicongingoring	Number of Contracts	9	10	7	4	7	
Bioengineering	Relevant Contract Dollars	3,567,443	1,910,970	2,478,606	2,254,856	5,021,564	
	Total Count	560	<i>535</i>	485	471	531	
	Total Relevant Dollars	143,372,052	137,681,148	134,922,204	136,391,241	169,192,157	4.79
	Number of Grants	649	645	661	675	763	
	Relevant Grant Dollars	183,215,139	162,383,424	179,136,458	225,131,784	282,603,451	
Disinformation	Number of Contracts	29	18	28	43	27	
Bioinformatics	Relevant Contract Dollars	24,606,810	33,425,767	58,667,710	37,237,753	43,412,556	
	Total Count	678	663	689	718	<i>790</i>	
	Total Relevant Dollars	207,821,949	195,809,191	237,804,168	262,369,537	326,016,007	12.56
	Number of Grants	78	83	77	78	82	
	Relevant Grant Dollars	15,804,902	18,764,027	20,074,390	20,826,379	21,398,045	
Biological	Number of Contracts	#	#	#	#	#	
Carcinogenesis,	Relevant Contract Dollars	‡	‡	‡	‡	‡	
Non-Viral	Total Count	<i>78</i>	83	77	<i>78</i>	82	
	Total Relevant Dollars	15,804,902	18,764,027	20,074,390	20,826,379	21,398,045	8.04
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^{*} Some categories are not mutually exclusive, resulting in overlap in reported funding. As a result, dollar totals may exceed 100 percent of the extramural budget.

[†]Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡]Coding not required or requested.

Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Mumber of Grants 1,188 1,031 946 976 1,048	Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
Relevant Contract Dollars 5,84,582 28,016,244 44,277,523 43,053,952 39,559,788 7,059 7		Number of Grants	1,188	1,031	946	976	1,048	
Relevant Contract Dollars		Relevant Grant Dollars	289,423,470	271,992,850	279,698,693	318,168,448	360,770,365	
Total Count 1,193	Biologics/Biological	Number of Contracts	5	7	14	13	11	
Total Relevant Dollars 295,318,052 300,009,094 323,976,215 361,222,400 400,329,942 7.97	Response Modifiers	Relevant Contract Dollars	5,894,582	28,016,244	44,277,523	43,053,952	39,559,578	
Biomaterials Research Biomaterials Research Biomaterials Research Biomaterials Research Biomaterials Research Relevant Contract Dollars 14,254,502 13,939,654 11,643,768 14,118,242 16,497,668 14,104,905 17,000 10,000		Total Count	1,193	1038	960	989	1,059	
Biomaterials Research Relevant Grant Dollars 14,254,502 13,939,654 11,643,768 14,118,242 16,647,668 14,005 14,0		Total Relevant Dollars	295,318,052	300,009,094	323,976,215	361,222,400	400,329,942	7.97
Biomaterials Research Relevant Contract bollars		Number of Grants	84	78	63	64	71	
Relevant Contract Dollars 1		Relevant Grant Dollars	14,254,502	13,939,654	11,643,768	14,118,242	16,497,668	
Relevant Contract Dollars	Riomatorials Research	Number of Contracts	#	#	#	#	1	
Total Relevant Dollars 14,254,502 13,939,654 11,643,768 14,118,242 16,647,573 5.12	Diomaterials nescardi	Relevant Contract Dollars	‡	‡	‡	‡	149,905	
Number of Grants 595 617 663 661 724		Total Count	84	<i>78</i>	63	64	72	
Relevant Grant Dollars 190,278,426 185,096,312 206,729,157 251,923,719 252,725,128 Number of Contracts 24 23 34 46 57 1460,000 149,6602 146,6642 146,644 14 14 160 146,644 146		Total Relevant Dollars	14,254,502	13,939,654	11,643,768	14,118,242	16,647,573	5.12
Number of Contract Dollars Relevant Contract Relevant Contract Dollars Rele		Number of Grants	595	617	653	661	724	
Relevant Contract Dollars 70tal Count 70tal Count 70tal Count 70tal Count 70tal Count 70tal Count 70tal Relevant Dollars 70tal Relevant Dollars 70tal Relevant Dollars 70tal Relevant Grants 70tal Count		Relevant Grant Dollars	190,278,426	185,096,312	206,729,157	251,923,719	252,725,128	
Helevant Contract Dollars 24,932,3240 24,022,855 31,453,340 40,076,260 61,946,642 707 781 701	Diamodical Computing	Number of Contracts	24	23	34	46	57	
Total Relevant Dollars 215,211,666 209,120,167 238,182,697 291,999,979 314,671,770 10.35	biomedical computing	Relevant Contract Dollars	24,933,240	24,023,855	31,453,540	40,076,260	61,946,642	
Number of Grants Relevant Grant Dollars A,403,949 B,435,172 B,432,758 G,952,868 7,310,219 A,403,049 B,435,172 B,432,758 G,952,868 7,310,219 B,432,758 B,432,75		Total Count	619	640	687	<i>707</i>	<i>781</i>	
Relevant Grant Dollars		Total Relevant Dollars	215,211,666	209,120,167	238,182,697	291,999,979	314,671,770	10.35
Birth Defects Relevant Contracts Figure		Number of Grants	30	35	30	27	28	
Relevant Contract Dollars		Relevant Grant Dollars	4,403,949	8,435,172	8,432,758	6,952,868	7,310,219	
Relevant Contract Dollars	Dieth Defects	Number of Contracts	#	#	#	#	#	
Total Relevant Dollars	BITUI Delects	Relevant Contract Dollars	‡	‡	‡	‡	‡	
Number of Grants 115 104 99 85 84		Total Count	30	35	30	27	28	
Relevant Grant Dollars 35,750,541 34,316,819 34,979,933 29,173,660 34,712,978		Total Relevant Dollars	4,403,949	8,435,172	8,432,758	6,952,868	7,310,219	19.77
Bone Marrow Transplantation Relevant Contracts # # # # # # # # # # # # # # # # # #		Number of Grants	115	104	99	85	84	
Transplantation Relevant Contract Dollars ‡ ‡ 728,795 ‡ ‡ ‡ † † ‡ * </td <td></td> <td>Relevant Grant Dollars</td> <td>35,750,541</td> <td>34,316,819</td> <td>34,979,933</td> <td>29,173,660</td> <td>34,712,978</td> <td></td>		Relevant Grant Dollars	35,750,541	34,316,819	34,979,933	29,173,660	34,712,978	
Total Count 115 104 100 85 84 Total Relevant Dollars 35,750,541 34,316,819 35,708,727 29,173,660 34,712,978 0.18 Number of Grants 385 344 322 309 289 Relevant Grant Dollars 75,065,760 82,711,296 72,103,576 81,227,274 93,964,637 Breast Cancer Detection Relevant Contracts 1 1 4 ‡ 4 Detection Relevant Contract Dollars 1,100,000 750,000 874,929 ‡ 53,073 Total Count 386 345 326 309 293 Total Relevant Dollars 76,165,760 83,461,296 72,978,505 81,227,274 94,017,710 6.01 Number of Grants 180 189 170 174 160 Relevant Grant Dollars 43,117,642 41,884,877 33,480,855 41,613,302 41,663,384 Breast Cancer Early Detection Relevant Contracts 1 1 1 ‡ ‡ Detection Relevant Contract Dollars 1,100,000 750,000 149,669 ‡ ‡ Total Count 181 190 171 174 160 -0.21	Bone Marrow	Number of Contracts	#	#	1	#	#	
Total Relevant Dollars 35,750,541 34,316,819 35,708,727 29,173,660 34,712,978 0.18	Transplantation	Relevant Contract Dollars	‡	‡	728,795	‡	‡	
Number of Grants 385 344 322 309 289 Relevant Grant Dollars 75,065,760 82,711,296 72,103,576 81,227,274 93,964,637 Breast Cancer Detection Relevant Contracts 1 1 4 ‡ 4 Detection Relevant Contract Dollars 1,100,000 750,000 874,929 ‡ 53,073 Total Count 386 345 326 309 293 Total Relevant Dollars 76,165,760 83,461,296 72,978,505 81,227,274 94,017,710 6.01 Number of Grants 180 189 170 174 160 Relevant Grant Dollars 43,117,642 41,884,877 33,480,855 41,613,302 41,663,384 Breast Cancer Early Detection Relevant Contracts 1 1 1 ‡ ‡ Total Count 181 190 171 174 160 -0.21		Total Count	115	104	100	<i>85</i>	84	
Breast Cancer Detection Relevant Grant Dollars 75,065,760 82,711,296 72,103,576 81,227,274 93,964,637 Detection Number of Contracts 1 1 4 ‡ 4 Relevant Contract Dollars 1,100,000 750,000 874,929 ‡ 53,073 Total Count 386 345 326 309 293 Total Relevant Dollars 76,165,760 83,461,296 72,978,505 81,227,274 94,017,710 6.01 Number of Grants 180 189 170 174 160 Relevant Grant Dollars 43,117,642 41,884,877 33,480,855 41,613,302 41,663,384 Breast Cancer Early Detection Number of Contracts 1 1 1 ‡ ‡ Relevant Contract Dollars 1,100,000 750,000 149,669 ‡ ‡ Total Count 181 190 171 174 160 -0.21		Total Relevant Dollars	35,750,541	34,316,819	35,708,727	29,173,660	34,712,978	0.18
Breast Cancer Detection Number of Contracts 1 1 4 ‡ 4 Detection Relevant Contract Dollars 1,100,000 750,000 874,929 ‡ 53,073 Total Count 386 345 326 309 293 Total Relevant Dollars 76,165,760 83,461,296 72,978,505 81,227,274 94,017,710 6.01 Mumber of Grants 180 189 170 174 160 Relevant Grant Dollars 43,117,642 41,884,877 33,480,855 41,613,302 41,663,384 Breast Cancer Early Detection Number of Contracts 1 1 1 ‡ ‡ Relevant Contract Dollars 1,100,000 750,000 149,669 ‡ ‡ Total Count 181 190 171 174 160 -0.21		Number of Grants	385	344	322	309	289	
Detection Relevant Contract Dollars 1,100,000 750,000 874,929 ‡ 53,073 570 70tal Count 386 345 326 309 293 70tal Relevant Dollars 76,165,760 83,461,296 72,978,505 81,227,274 94,017,710 6.01 70 70 70 70 70 70 70		Relevant Grant Dollars	75,065,760	82,711,296	72,103,576	81,227,274	93,964,637	
Total Count 386 345 326 309 293 Total Relevant Dollars 76,165,760 83,461,296 72,978,505 81,227,274 94,017,710 6.01 Breast Cancer Early Detection Relevant Grant Dollars 43,117,642 41,884,877 33,480,855 41,613,302 41,663,384 Breast Cancer Early Detection Number of Contracts 1 1 1 ‡ ‡ Relevant Contract Dollars 1,100,000 750,000 149,669 ‡ ‡ Total Count 181 190 171 174 160 -0.21	Breast Cancer	Number of Contracts	1	1	4	#	4	
Total Relevant Dollars 76,165,760 83,461,296 72,978,505 81,227,274 94,017,710 6.01 Number of Grants 180 189 170 174 160 Relevant Grant Dollars 43,117,642 41,884,877 33,480,855 41,613,302 41,663,384 Breast Cancer Early Detection Number of Contracts 1 1 1 ‡ ‡ Relevant Contract Dollars 1,100,000 750,000 149,669 ‡ ‡ Total Count 181 190 171 174 160 -0.21	Detection	Relevant Contract Dollars	1,100,000	750,000	874,929	‡	53,073	
Number of Grants 180 189 170 174 160 Relevant Grant Dollars 43,117,642 41,884,877 33,480,855 41,613,302 41,663,384 Breast Cancer Early Detection Number of Contracts 1 1 1 ‡ ‡ Relevant Contract Dollars 1,100,000 750,000 149,669 ‡ ‡ Total Count 181 190 171 174 160 -0.21		Total Count	386	345	326	309	293	
Relevant Grant Dollars 43,117,642 41,884,877 33,480,855 41,613,302 41,663,384		Total Relevant Dollars	76,165,760	83,461,296	72,978,505	81,227,274	94,017,710	6.01
Breast Cancer Early Number of Contracts 1 1 1 1 ‡ ‡ Detection Relevant Contract Dollars 1,100,000 750,000 149,669 ‡ ‡ Total Count 181 190 171 174 160 -0.21		Number of Grants	180	189	170	174	160	
Detection Relevant Contract Dollars 1,100,000 750,000 149,669 ‡ ‡ **Total Count** 181 190 171 174 160 -0.21**		Relevant Grant Dollars	43,117,642	41,884,877	33,480,855	41,613,302	41,663,384	
Total Count 181 190 171 174 160 -0.21	Breast Cancer Early	Number of Contracts	1	1	1	#	#	
	Detection	Relevant Contract Dollars	1,100,000	750,000	149,669	‡	‡	
Total Relevant Dollars 44,217,642 42,634,877 33,630,524 41,613,302 41,663,384		Total Count	181	190	171	174	160	-0.21
		Total Relevant Dollars	44,217,642	42,634,877	33,630,524	41,613,302	41,663,384	

continued

^{*} Some categories are not mutually exclusive, resulting in overlap in reported funding. As a result, dollar totals may exceed 100 percent of the extramural budget.

[†]Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡]Coding not required or requested.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	102	41	38	37	35	
	Relevant Grant Dollars	4,699,015	4,270,107	4,685,670	5,272,981	5,439,597	
Breast Cancer	Number of Contracts	#	#	#	#	#	
Education	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	102	41	<i>38</i>	37	<i>35</i>	
	Total Relevant Dollars	4,699,015	4,270,107	4,685,670	5,272,981	5,439,597	4.07
	Number of Grants	210	192	147	130	117	
	Relevant Grant Dollars	65,139,979	55,393,919	39,840,647	34,190,668	30,273,776	
Breast Cancer	Number of Contracts	1	3	12	11	7	
Epidemiology	Relevant Contract Dollars	125,000	1,469,411	6,203,333	5,829,361	37,205	
	Total Count	211	195	159	141	124	
	Total Relevant Dollars	65,264,979	56,863,330	46,043,980	40,020,029	30,310,981	-17.31
	Number of Grants	498	462	398	336	277	
	Relevant Grant Dollars	107,994,765	96,024,839	81,070,422	70,149,087	66,472,567	
Breast Cancer Genetics	Number of Contracts	#	#	1	#	#	
Diedsi Galicei Gelielics	Relevant Contract Dollars	‡	‡	49,931	‡	‡	
	Total Count	498	462	399	336	277	
	Total Relevant Dollars	107,994,765	96,024,839	81,120,353	70,149,087	66,472,567	-11.34
	Number of Grants	180	110	99	92	91	
	Relevant Grant Dollars	16,628,036	18,681,211	19,111,915	19,450,769	18,347,556	
Breast Cancer	Number of Contracts	1	1	2	2	3	
Prevention	Relevant Contract Dollars	1,478,927	3,163,159	3,146,728	4,001,575	4,562,338	
	Total Count	181	111	101	94	94	
	Total Relevant Dollars	18,106,963	21,844,370	22,258,643	23,452,344	22,909,894	6.39
	Number of Grants	130	92	<i>86</i>	77	76	
	Relevant Grant Dollars	16,034,148	16,436,183	15,759,809	16,481,786	16,157,094	
Breast Cancer	Number of Contracts	#	#	#	#	1	
Rehabilitation	Relevant Contract Dollars	‡	‡	‡	‡	1,499,993	
	Total Count	130	92	<i>86</i>	77	77	
	Total Relevant Dollars	16,034,148	16,436,183	15,759,809	16,481,786	17,657,087	2.52
	Number of Grants	142	91	70	66	63	
	Relevant Grant Dollars	20,751,155	17,485,192	10,475,206	14,653,679	15,132,034	
Breast Cancer	Number of Contracts	1	1	#	#	#	
Screening	Relevant Contract Dollars	1,100,000	750,000	‡	‡	‡	
	Total Count	143	92	70	66	63	
	Total Relevant Dollars	21,851,155	18,235,192	10,475,206	14,653,679	15,132,034	-3.98
	Number of Grants	687	644	650	669	713	
	Relevant Grant Dollars	138,560,818	152,387,067	154,489,026	176,349,237	209,590,194	
Breast Cancer	Number of Contracts	4	3	3	2	3	
Treatment	Relevant Contract Dollars	2,065,223	892,527	4,424,708	3,485,914	2,035,240	
	Total Count	691	647	<i>653</i>	671	716	
	Total Relevant Dollars	140,626,041	153,279,594	158,913,734	179,835,151	211,625,433	10.87

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[‡]Coding not required or requested.

Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	<i>855</i>	<i>763</i>	745	697	671	
	Relevant Grant Dollars	167,569,592	165,644,820	169,080,913	166,218,155	158,766,455	
Breast Cancer—Basic	Number of Contracts	3	3	1	5	3	
Dieasi Galicei—Dasic	Relevant Contract Dollars	653,485	3,654,832	49,931	3,530,301	40,722	
	Total Count	858	766	746	702	674	
	Total Relevant Dollars	168,223,077	169,299,652	169,130,844	169,748,456	158,807,177	-1.38
	Number of Grants	121	273	380	437	471	
	Relevant Grant Dollars	22,418,829	62,046,223	92,830,249	108,363,835	114,972,296	
Cancer Stem Cells	Number of Contracts	5	6	3	1	#	
Cancer Sterri Cens	Relevant Contract Dollars	1,121,242	1,533,679	4,980,440	1,475,002	‡	
	Total Count	126	279	383	438	471	
	Total Relevant Dollars	23,540,071	63,579,902	97,810,689	109,838,837	114,972,296	60.22
	Number of Grants	568	476	465	430	455	
	Relevant Grant Dollars	169,414,751	171,526,613	162,069,466	167,262,525	203,631,879	
Cancer Survivorship	Number of Contracts	1	7	7	3	9	
Cancer Survivorship	Relevant Contract Dollars	997,190	9,847,866	2,679,641	6,505,519	16,014,755	
	Total Count	569	483	472	433	464	
	Total Relevant Dollars	170,411,941	181,374,479	164,749,107	173,768,044	219,646,634	7.28
	Number of Grants	1,041	943	892	821	805	
	Relevant Grant Dollars	273,042,396	260,061,824	255,935,050	258,785,860	262,220,786	
Carcinogenesis,	Number of Contracts	11	9	19	20	21	
Environmental	Relevant Contract Dollars	3,879,202	3,465,524	13,046,648	11,050,342	16,494,997	
	Total Count	1,052	952	911	841	826	
	Total Relevant Dollars	276,921,598	263,527,348	268,981,698	269,836,202	278,715,783	0.21
	Number of Grants	34	38	37	27	24	
	Relevant Grant Dollars	6,077,658	6,221,573	5,869,483	5,584,906	4,612,220	
Cervical Cancer	Number of Contracts	#	#	#	#	#	
Education	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	34	<i>38</i>	37	27	24	
	Total Relevant Dollars	6,077,658	6,221,573	5,869,483	5,584,906	4,612,220	-6.38
	Number of Grants	429	342	295	262	247	
	Relevant Grant Dollars	84,243,372	80,022,566	71,829,951	70,023,623	71,362,862	
Chamanrayantian	Number of Contracts	6	11	9	8	13	
Chemoprevention	Relevant Contract Dollars	15,066,511	20,758,658	16,414,527	15,912,399	19,797,086	
	Total Count	435	353	304	270	260	
	Total Relevant Dollars	99,309,883	100,781,224	88,244,478	85,936,022	91,159,948	-1.87
	Number of Grants	91	36	24	18	12	
	Relevant Grant Dollars	14,722,116	12,015,435	9,361,402	8,971,425	7,445,837	
Chemoprevention,	Number of Contracts	#	#	#	#	#	
Clinical	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	91	36	24	18	12	
	Total Relevant Dollars	14,722,116	12,015,435	9,361,402	8,971,425	7,445,837	-15.41

^{*} Some categories are not mutually exclusive, resulting in overlap in reported funding. As a result, dollar totals may exceed 100 percent of the extramural budget.

[†]Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡]Coding not required or requested.

Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
Chemotherapy	Number of Grants	1,087	930	872	904	962	_
	Relevant Grant Dollars	250,373,415	246,109,305	260,723,356	287,462,997	316,933,597	
	Number of Contracts	12	7	20	17	14	
	Relevant Contract Dollars	9,970,324	5,413,456	13,695,854	14,902,930	7,708,690	
	Total Count	1,099	937	892	921	976	
	Total Relevant Dollars	260,343,739	251,522,761	274,419,210	302,365,927	324,642,287	5.81
Child Health	Number of Grants	122	102	100	89	83	
	Relevant Grant Dollars	24,830,888	20,762,243	16,163,223	15,020,069	13,942,846	
	Number of Contracts	2	3	#	#	2	
	Relevant Contract Dollars	177,670	195,000	‡	‡	2,037,698	
	Total Count	124	105	100	89	85	
	Total Relevant Dollars	25,008,558	20,957,243	16,163,223	15,020,069	15,980,544	-9.93
	Number of Grants	493	448	453	460	499	
	Relevant Grant Dollars	173,785,934	178,242,101	181,711,926	189,628,119	249,037,676	
Childhood Cancers	Number of Contracts	2	#	#	2	2	
Official Carloof	Relevant Contract Dollars	3,007,558	‡	‡	589,442	2,476,618	
	Total Count	495	448	453	462	501	
	Total Relevant Dollars	176,793,492	178,242,101	181,711,926	190,217,561	251,514,294	-9.91
	Number of Grants	132	113	91	77	72	
Chronic Myeloproliferative	Relevant Grant Dollars	36,189,051	30,632,366	20,846,554	15,967,470	18,840,695	
	Number of Contracts	#	1	#	#	#	
Disorders	Relevant Contract Dollars	‡	1,489,494	‡	‡	‡	
	Total Count	132	114	91	77	72	
	Total Relevant Dollars	36,189,051	32,121,860	20,846,554	15,967,470	18,840,695	-12.93
Clinical Trials, Diagnosis	Number of Grants	146	187	194	184	179	
	Relevant Grant Dollars	45,889,734	53,037,657	60,433,953	61,783,602	59,253,323	
	Number of Contracts	1	#	1	1	1	
	Relevant Contract Dollars	1,728,293	‡	166,395	2,125,347	2,939,599	
	Total Count	147	187	195	185	180	=
	Total Relevant Dollars	47,618,027	53,037,657	60,600,348	63,908,948	62,192,922	7.10
	Number of Grants	279	250	283	266	285	
	Relevant Grant Dollars	149,612,281	133,237,216	120,494,908	147,623,023	160,552,594	
Clinical Trials, Other	Number of Contracts	3	5	6	8	6	
	Relevant Contract Dollars	7,962,288	27,271,204	42,312,294	32,688,151	24,412,496	
	Total Count	282	255	289	274	291	4.45
	Total Relevant Dollars	157,574,569	160,508,420	162,807,202	180,311,174	184,965,089	4.15
Clinical Trials, Prevention	Number of Grants	114	119	109	105	115	
	Relevant Grant Dollars	35,417,115	31,032,388	30,908,463	33,917,834	37,773,781	
	Number of Contracts	7 400 201	10.710.005	0.000.440	5	7,000,105	
	Relevant Contract Dollars	7,423,381	10,710,985	9,803,442	9,563,835	7,682,165	
	Total Count Total Relevant Dollars	118	124	113	110	121	1 57
	TOTAL RELEVANT DOMAIS	42,840,496	41,743,373	40,711,905	43,481,669	45,455,946	1.57

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[†]Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡]Coding not required or requested.

Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
Clinical Trials, Therapy	Number of Grants	<i>546</i>	501	498	<i>517</i>	536	_
	Relevant Grant Dollars	315,511,818	334,042,999	334,329,251	345,754,242	369,134,221	
	Number of Contracts	11	15	8	10	7	
	Relevant Contract Dollars	18,485,764	60,380,409	100,254,859	100,543,132	136,563,624	
	Total Count	<i>557</i>	516	506	<i>527</i>	543	
	Total Relevant Dollars	333,997,582	394,423,408	434,584,110	446,297,374	505,697,845	11.06
Combined Treatment Modalities	Number of Grants	1,056	1,084	1,148	1,294	1,385	
	Relevant Grant Dollars	241,467,906	266,541,656	301,911,203	361,206,359	408,506,690	
	Number of Contracts	6	7	2	3	3	
	Relevant Contract Dollars	7,488,672	3,420,624	671,778	2,834,416	993,782	
	Total Count	1,062	1,091	1,150	1,297	1,388	
	Total Relevant Dollars	248,956,578	269,962,280	302,582,981	364,040,775	409,500,472	13.32
	Number of Grants	139	131	137	136	141	
	Relevant Grant Dollars	22,816,491	24,073,416	27,207,714	27,980,143	29,227,852	
Coat Effortivonoso	Number of Contracts	#	#	#	#	#	
Cost Effectiveness	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	139	131	137	136	141	
	Total Relevant Dollars	22,816,491	24,073,416	27,207,714	27,980,143	29,227,852	6.45
Diabetes	Number of Grants	77	77	<i>75</i>	74	79	
	Relevant Grant Dollars	8,622,303	10,029,759	10,282,028	11,766,492	12,640,219	
	Number of Contracts	#	#	#	#	#	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	77	77	<i>75</i>	74	79	
	Total Relevant Dollars	8,622,303	10,029,759	10,282,028	11,766,492	12,640,219	10.17
Diagnosis	Number of Grants	1,686	1,631	1,576	1,519	1,535	
	Relevant Grant Dollars	529,392,958	539,541,884	530,211,572	595,266,675	666,808,403	
	Number of Contracts	39	31	43	<i>37</i>	35	
	Relevant Contract Dollars	30,979,563	49,265,219	54,014,496	61,672,252	53,282,401	
	Total Count	1,725	1,662	1,619	1,556	1,570	
	Total Relevant Dollars	560,372,521	588,807,103	584,226,068	656,938,926	720,090,804	6.58
Dioxin	Number of Grants	7	9	7	4	2	
	Relevant Grant Dollars	631,714	383,261	369,498	226,792	59,359	
	Number of Contracts	#	#	#	#	#	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	7	9	7	4	2	
	Total Relevant Dollars	631,714	383,261	369,498	226,792	59,359	-38.84
DNA Repair	Number of Grants	494	507	473	478	482	
	Relevant Grant Dollars	99,797,181	100,671,223	100,897,948	107,893,903	119,158,685	
	Number of Contracts	#	#	#	#	1	
	Relevant Contract Dollars	‡	‡	‡	‡	150,000	
	Total Count	494	507	473	478	483	
	Total Relevant Dollars	99,797,181	100,671,223	100,897,948	107,893,903	119,308,685	4.65

continued

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[‡]Coding not required or requested.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	2,393	2,284	2,130	2,144	2,159	_
	Relevant Grant Dollars	604,291,255	617,108,394	647,645,213	680,118,152	729,568,548	
Drug Development	Number of Contracts	39	47	44	31	29	
Drug Development	Relevant Contract Dollars	36,749,532	84,307,830	95,203,326	106,973,228	110,388,736	
	Total Count	2,432	2,331	2,174	<i>2,175</i>	2,188	
	Total Relevant Dollars	641,040,787	701,416,224	742,848,539	787,091,380	839,957,283	6.99
	Number of Grants	432	422	366	377	378	
	Relevant Grant Dollars	83,662,149	80,704,643	79,153,198	86,983,505	102,664,482	
Drug Discovery	Number of Contracts	3	4	10	10	9	
Drug Bloodvory	Relevant Contract Dollars	298,072	2,349,989	4,433,398	3,522,708	7,086,104	
	Total Count	435	426	376	387	387	
	Total Relevant Dollars	83,960,221	83,054,632	83,586,595	90,506,212	109,750,585	7.27
	Number of Grants	<i>785</i>	<i>852</i>	898	981	1,065	
	Relevant Grant Dollars	148,056,783	177,796,465	214,729,058	261,870,733	286,366,510	
Drug Resistance	Number of Contracts	1	3	2	#	#	
Drag Hoolotanoo	Relevant Contract Dollars	1,000,000	824,798	646,029	‡	‡	
	Total Count	<i>786</i>	<i>855</i>	900	981	1,065	
	Total Relevant Dollars	149,056,783	178,621,263	215,375,087	261,870,733	286,366,510	17.83
	Number of Grants	490	371	300	272	272	
	Relevant Grant Dollars	71,095,657	57,656,190	54,297,012	54,246,698	53,923,677	
Drugs—Natural	Number of Contracts	#	#	2	1	3	
Products	Relevant Contract Dollars	‡	‡	2,574,718	2,136,305	3,660,194	
	Total Count	490	371	302	273	275	
	Total Relevant Dollars	71,095,657	57,656,190	56,871,730	56,383,003	57,583,871	-4.74
	Number of Grants	748	714	694	677	663	
	Relevant Grant Dollars	225,248,442	220,102,816	229,998,056	256,283,853	303,451,666	
Early Detection	Number of Contracts	9	14	7	6	6	
	Relevant Contract Dollars	8,393,779	8,686,400	4,028,068	5,328,789	6,666,906	
	Total Count	<i>7</i> 57	728	701	683	669	
	Total Relevant Dollars	233,642,221	228,789,216	234,026,124	261,612,642	310,118,572	7.63
	Number of Grants	296	264	223	184	161	
	Relevant Grant Dollars	80,220,580	69,440,936	47,442,385	41,402,394	47,924,884	
Effectiveness Research	Number of Contracts	1	2	11	11	7	
	Relevant Contract Dollars	10,500	4,377,973	30,894,764	29,146,805	186,026	
	Total Count	297	266	234	195	168	
	Total Relevant Dollars	80,231,080	73,818,909	78,337,149	70,549,199	48,110,910	-10.90
	Number of Grants	539	512	469	440	422	
	Relevant Grant Dollars	107,069,679	104,762,093	96,691,678	97,228,106	100,568,890	
Endocrinology	Number of Contracts	1	#	#	#	#	
3,	Relevant Contract Dollars	1,478,552	‡	‡	‡	‡	
	Total Count	540	512	469	440	422	
	Total Relevant Dollars	108,548,231	104,762,093	96,691,678	97,228,106	100,568,890	-1.80

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[‡]Coding not required or requested.

Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	86	68	51	33	24	
	Relevant Grant Dollars	23,971,943	20,847,429	7,628,220	6,286,953	3,473,865	
Energy Balance	Number of Contracts	#	#	#	#	#	
chergy balance	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	86	68	51	33	24	
	Total Relevant Dollars	23,971,943	20,847,429	7,628,220	6,286,953	3,473,865	-34.69
	Number of Grants	495	457	385	326	303	
	Relevant Grant Dollars	169,955,392	164,276,738	146,920,161	124,682,337	118,461,821	
Epidemiology—	Number of Contracts	1	1	1	#	#	
Biochemical	Relevant Contract Dollars	2,160,252	1,716,430	24,966	‡	‡	
	Total Count	496	458	386	326	303	
	Total Relevant Dollars	172,115,644	165,993,168	146,945,127	124,682,337	118,461,821	-8.79
	Number of Grants	233	210	188	186	197	
	Relevant Grant Dollars	81,439,737	76,666,541	75,587,379	85,439,631	95,193,416	
Fuidousiala m.	Number of Contracts	33	27	31	30	32	
Epidemiology	Relevant Contract Dollars	38,502,206	91,178,576	111,330,516	121,666,411	117,745,294	
	Total Count	266	237	219	216	229	
	Total Relevant Dollars	119,941,943	167,845,117	186,917,895	207,106,043	212,938,710	16.22
	Number of Grants	336	303	250	215	177	
	Relevant Grant Dollars	107,915,202	93,061,131	74,257,282	68,678,162	66,673,242	
Epidemiology,	Number of Contracts	5	4	2	4	1	
Environmental	Relevant Contract Dollars	3,754,701	3,257,460	1,417,866	1,684,591	157,967	
	Total Count	341	307	252	219	178	
	Total Relevant Dollars	111,669,903	96,318,591	75,675,148	70,362,753	66,831,209	-11.80
	Number of Grants	943	917	928	911	981	
	Relevant Grant Dollars	187,566,016	185,757,320	203,722,809	230,130,230	269,515,321	
Fairenstine	Number of Contracts	#	1	2	2	1	
Epigenetics	Relevant Contract Dollars	‡	80,000	147,571	329,946	80,000	
	Total Count	943	918	930	913	982	
	Total Relevant Dollars	187,566,016	185,837,320	203,870,380	230,460,176	269,595,321	9.70
	Number of Grants	237	197	153	127	116	
	Relevant Grant Dollars	61,585,479	48,294,930	46,905,132	37,032,434	30,940,689	
Cone Manning Human	Number of Contracts	#	#	#	#	#	
Gene Mapping, Human	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	237	197	153	127	116	
	Total Relevant Dollars	61,585,479	48,294,930	46,905,132	37,032,434	30,940,689	-15.48
	Number of Grants	130	82	59	46	43	
	Relevant Grant Dollars	14,858,944	9,387,204	9,836,690	8,912,665	7,412,413	
Gene Mapping, Non-	Number of Contracts	#	#	#	#	#	
Human	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	130	82	59	46	43	
	Total Relevant Dollars	14,858,944	9,387,204	9,836,690	8,912,665	7,412,413	-14.56
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Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	22	20	20	16	9	
	Relevant Grant Dollars	4,272,656	4,512,499	4,853,792	2,673,354	1,318,434	
Gene Transfer, Clinical	Number of Contracts	#	#	#	#	#	
dono manoron, omnoci	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	22	20	20	16	9	
	Total Relevant Dollars	4,272,656	4,512,499	4,853,792	2,673,354	1,318,434	-20.60
	Number of Grants	154	131	104	89	73	
	Relevant Grant Dollars	42,299,385	38,489,954	29,475,413	23,204,606	22,217,351	
Genetic Testing	Number of Contracts	1	#	1	#	#	
Research, Human	Relevant Contract Dollars	660,000	‡	75,000	‡	‡	
	Total Count	155	131	105	89	73	
	Total Relevant Dollars	42,959,385	38,489,954	29,550,408	23,204,606	22,217,351	-14.83
	Number of Grants	1,182	1,203	<i>1,266</i>	1,294	1,355	
	Relevant Grant Dollars	323,758,372	341,321,721	389,134,110	405,076,761	491,680,665	
Genomics	Number of Contracts	2	9	12	8	4	
acriornics	Relevant Contract Dollars	972,912	55,539,001	83,510,228	81,580,679	83,218,582	
	Total Count	1,184	1,212	1,278	1,302	1,359	
	Total Relevant Dollars	324,731,284	396,860,722	472,644,337	486,657,439	574,899,247	15.60
	Number of Grants	98	100	97	82	73	
	Relevant Grant Dollars	18,558,771	18,398,631	15,279,155	14,215,534	15,380,028	
Health Literacy	Number of Contracts	#	#	#	1	1	
ricaltr Literacy	Relevant Contract Dollars	‡	‡	‡	1,200,000	1,200,000	
	Total Count	98	100	97	83	74	
	Total Relevant Dollars	18,558,771	18,398,631	15,279,155	15,415,534	16,580,028	-2.34
	Number of Grants	<i>378</i>	338	309	263	246	
	Relevant Grant Dollars	107,111,437	92,700,255	69,278,601	64,108,503	62,959,503	
Health Promotion	Number of Contracts	7	3	3	3	2	
ricalul i Torriouon	Relevant Contract Dollars	4,712,166	1,673,149	2,081,656	582,324	790,283	
	Total Count	<i>385</i>	341	312	266	248	
	Total Relevant Dollars	111,823,603	94,373,404	71,360,257	64,690,827	63,749,786	-12.69
	Number of Grants	398	378	377	349	362	
	Relevant Grant Dollars	218,923,687	200,905,989	178,992,169	187,497,187	230,065,054	
Health Care Delivery	Number of Contracts	3	5	17	20	28	
ricaiti oaic Delivery	Relevant Contract Dollars	2,221,373	5,400,399	32,071,822	31,462,158	35,343,565	
	Total Count	401	383	394	369	390	
	Total Relevant Dollars	221,145,060	206,306,388	211,063,992	218,959,344	265,408,619	5.13
	Number of Grants	29	29	22	16	13	
	Relevant Grant Dollars	6,799,315	8,287,809	7,837,594	6,687,868	5,287,620	
Helicobacter	Number of Contracts	#	#	#	#	#	
HEIICODACIEI	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	29	29	22	16	13	-4.78

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Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	1,336	1,283	1,208	1,178	1,115	
	Relevant Grant Dollars	432,281,168	443,608,933	449,886,880	458,813,154	481,919,759	
Hematology	Number of Contracts	4	5	3	2	2	
Hematology	Relevant Contract Dollars	1,775,197	3,259,086	2,262,571	1,547,327	19,191	
	Total Count	1,340	1,288	1,211	1,180	1,117	
	Total Relevant Dollars	434,056,365	446,868,019	452,149,451	460,360,481	481,938,950	2.65
	Number of Grants	397	306	291	270	247	
	Relevant Grant Dollars	87,079,722	88,073,334	84,627,744	98,480,686	77,798,511	
Hematopoietic Stem	Number of Contracts	#	#	1	#	#	
Cell Research	Relevant Contract Dollars	‡	‡	728,795	‡	‡	
	Total Count	397	306	292	270	247	
	Total Relevant Dollars	87,079,722	88,073,334	85,356,538	98,480,686	77,798,511	-1.89
	Number of Grants	17	10	13	13	15	
	Relevant Grant Dollars	1,621,562	420,973	2,574,377	2,570,173	2,958,043	
Hormone Replacement	Number of Contracts	‡	‡	‡	‡	‡	
Therapy	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	17	10	13	13	15	
	Total Relevant Dollars	1,621,562	420,973	2,574,377	2,570,173	2,958,043	113.10
	Number of Grants	26	21	26	27	28	
	Relevant Grant Dollars	6,718,944	5,068,406	6,571,656	6,543,607	7,051,315	
Hospice	Number of Contracts	#	#	#	#	#	
поърсе	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	26	21	26	27	28	
	Total Relevant Dollars	6,718,944	5,068,406	6,571,656	6,543,607	7,051,315	3.10
	Number of Grants	889	893	889	827	855	
	Relevant Grant Dollars	288,232,403	270,053,324	291,591,849	277,508,890	294,842,598	
Human Genome	Number of Contracts	2	#	6	6	3	
numan denome	Relevant Contract Dollars	972,912	‡	20,797,623	1,278,048	4,896,980	
	Total Count	891	893	895	833	<i>858</i>	
	Total Relevant Dollars	289,205,315	270,053,324	312,389,472	278,786,937	299,739,578	1.45
	Number of Grants	<i>255</i>	234	240	259	272	
	Relevant Grant Dollars	62,665,069	65,666,762	73,902,588	83,792,361	92,238,911	
latrogenesis	Number of Contracts	16	9	15	12	15	
iauogenesis	Relevant Contract Dollars	11,590,700	7,954,033	10,094,584	8,942,518	4,245,161	
	Total Count	271	243	<i>255</i>	271	287	
	Total Relevant Dollars	74,255,769	73,620,795	83,997,172	92,734,879	96,484,072	6.92
	Number of Grants	1,020	1,004	1,005	1,013	1,040	
	Relevant Grant Dollars	303,333,609	328,599,329	333,313,090	389,735,661	419,041,652	
Imagina	Number of Contracts	15	3	10	13	9	
Imaging	Relevant Contract Dollars	9,601,975	22,477,850	31,629,404	37,758,418	31,825,401	
	Total Count	1,035	1,007	1,015	1,026	1,049	
	Total Relevant Dollars	312,935,584	351,077,179	364,942,494	427,494,079	450,867,052	9.68

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Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	432	411	398	403	422	
	Relevant Grant Dollars	104,548,325	102,651,388	108,683,779	124,310,103	145,386,052	
Immunization	Number of Contracts	4	7	11	13	9	
IIIIIIuiiizauoii	Relevant Contract Dollars	4,894,582	28,016,244	40,549,330	43,053,952	39,543,607	
	Total Count	436	418	409	416	431	
	Total Relevant Dollars	109,442,907	130,667,632	149,233,109	167,364,055	184,929,659	14.06
	Number of Grants	1,718	1,682	1,661	1,760	1,912	
	Relevant Grant Dollars	456,652,765	473,974,158	515,430,748	640,826,692	698,892,998	
Immunology	Number of Contracts	11	14	18	20	21	
immunology	Relevant Contract Dollars	11,828,482	66,471,724	86,509,909	98,113,523	91,031,557	
	Total Count	1,729	1,696	1,679	1,780	1,933	
	Total Relevant Dollars	468,481,247	540,445,882	601,940,657	738,940,215	789,924,555	14.09
	Number of Grants	658	638	695	813	951	
	Relevant Grant Dollars	184,930,676	155,133,285	197,273,311	332,571,318	368,977,475	
Immunotherapy	Number of Contracts	5	3	7	6	12	
пппипопегару	Relevant Contract Dollars	5,118,106	3,683,673	10,734,319	4,474,792	2,288,367	
	Total Count	663	641	702	819	963	
	Total Relevant Dollars	190,048,782	158,816,958	208,007,630	337,046,109	371,265,842	21.68
	Number of Grants	611	580	561	<i>575</i>	588	
	Relevant Grant Dollars	109,966,955	112,167,081	112,244,989	116,025,025	120,560,329	
Inflammation	Number of Contracts	3	3	3	3	3	
IIIIaIIIIIauuii	Relevant Contract Dollars	3,652,516	14,497,899	18,472,380	20,833,026	19,519,964	
	Total Count	614	583	564	<i>578</i>	591	
	Total Relevant Dollars	113,619,471	126,664,980	130,717,368	136,858,051	140,080,293	5.43
	Number of Grants	739	681	652	624	599	
	Relevant Grant Dollars	217,876,571	210,348,487	213,783,646	215,896,290	228,167,349	
Information	Number of Contracts	8	10	18	<i>25</i>	16	
Dissemination	Relevant Contract Dollars	14,567,395	3,998,692	7,900,187	17,915,927	15,220,485	
	Total Count	747	691	<i>670</i>	649	615	
	Total Relevant Dollars	232,443,966	214,347,179	221,683,833	233,812,217	243,387,833	1.30
	Number of Grants	1,545	1,604	1,605	1,578	1,591	
	Relevant Grant Dollars	340,009,556	358,876,606	380,888,828	398,062,542	422,657,303	
Metastasis	Number of Contracts	3	4	3	2	4	
เทษเลรเลรเร	Relevant Contract Dollars	961,421	1,108,062	2,899,297	2,999,993	112,339	
	Total Count	1,548	1,608	1,608	1,580	1,595	
	Total Relevant Dollars	340,970,977	359,984,668	383,788,124	401,062,535	422,769,641	5.52
	Number of Grants	50	57	88	111	152	
	Relevant Grant Dollars	11,284,599	13,679,639	24,150,503	36,476,639	56,410,998	
Microbiomo	Number of Contracts	#	#	2	#	2	
Microbiome				450 141	+	130,750	
	Relevant Contract Dollars	‡	‡	450,141	‡	130,730	
	Relevant Contract Dollars Total Count	‡ 50	‡ <i>57</i>	450,141 90	+ 111	150,750 154	

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Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	59	52	41	33	27	
	Relevant Grant Dollars	11,783,092	10,026,196	9,007,115	7,780,748	6,812,260	
Mind/Body Research	Number of Contracts	#	#	#	#	#	
Willia/Dody Nescarcii	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	59	52	41	33	27	
	Total Relevant Dollars	11,783,092	10,026,196	9,007,115	7,780,748	6,812,260	-12.78
	Number of Grants	5,466	5,602	5,473	5,307	5,193	
	Relevant Grant Dollars	1,679,313,384	1,782,526,277	1,882,712,427	1,931,925,940	2,053,008,956	
Molecular Disease	Number of Contracts	45	41	59	53	58	
Moleculai Discase	Relevant Contract Dollars	30,765,834	79,018,098	153,297,602	136,964,093	175,671,451	
	Total Count	5,511	5,643	5,532	5,360	5,251	
	Total Relevant Dollars	1,710,079,218	1,861,544,375	2,036,010,029	2,068,890,033	2,228,680,407	6.89
	Number of Grants	620	609	539	495	437	
	Relevant Grant Dollars	152,907,543	156,307,861	141,492,077	143,199,846	133,169,439	
Molecular Imaging	Number of Contracts	3	1	#	#	#	
Molecular imaging	Relevant Contract Dollars	1,942,675	118,783	‡	‡	‡	
	Total Count	623	610	539	495	437	
	Total Relevant Dollars	154,850,218	156,426,644	141,492,077	143,199,846	133,169,439	-3.58
	Number of Grants	232	208	185	155	164	
	Relevant Grant Dollars	44,556,081	46,590,174	43,516,697	40,249,335	46,200,693	
Molecular Targeted	Number of Contracts	2	1	1	1	1	
Prevention	Relevant Contract Dollars	2,979,162	790,790	547,510	509,347	526,781	
	Total Count	234	209	186	156	165	
	Total Relevant Dollars	47,535,243	47,380,964	44,064,207	40,758,682	46,727,473	-0.04
	Number of Grants	2,044	2,148	2,232	2,373	2,618	
	Relevant Grant Dollars	523,857,998	581,779,389	656,567,963	742,802,310	865,086,938	
Molecular Targeted	Number of Contracts	12	16	6	5	6	
Therapy	Relevant Contract Dollars	8,863,954	53,873,784	90,988,532	92,251,110	128,114,856	
	Total Count	2,056	2,164	2,238	2,378	2,624	
	Total Relevant Dollars	532,721,952	635,653,173	747,556,494	835,053,420	993,201,794	16.89
	Number of Grants	455	481	455	493	525	
	Relevant Grant Dollars	111,516,643	106,197,770	114,941,122	130,016,571	131,776,237	
Nanataahnalaav	Number of Contracts	5	9	5	5	6	
Nanotechnology	Relevant Contract Dollars	5,326,115	56,177,120	64,879,438	80,950,539	78,759,554	
	Total Count	460	490	460	498	531	
	Total Relevant Dollars	116,842,758	162,374,890	179,820,560	210,967,110	210,535,791	16.70
	Number of Grants	8	10	12	12	13	
	Relevant Grant Dollars	1,376,362	3,686,798	3,936,995	3,556,637	3,791,093	
Nouvofibret:-	Number of Contracts	#	#	#	#	#	
Neurofibromatosis	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	8	10	12	12	13	

continued

Source: Research Analysis and Evaluation Branch.

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Number of Grants 339 287 226 221 175	Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
Non-Hematopoietic Number of Contracts		Number of Grants	339	287	236	221	175	
Relevant Contract Dollars		Relevant Grant Dollars	63,046,148	53,559,986	43,034,964	60,699,959	40,471,293	
Total Count Total Relevant Dollars Go.Ndc.148 So.559.986 46.519.128 Go.099.999 40.471.293 -7.75	·	Number of Contracts	#	#	2	#	#	
Nursing Research Nursing Res	Stem Cell Research	Relevant Contract Dollars	‡	‡	3,484,164	‡	‡	
Nursing Research Nursing Res		Total Count						
Nursing Research Nursing Research Nursing Research Nurber of Contracts \$\frac{1}{2} \frac{1}{2} \frac{1}								-7.75
Nursing Research Number of Contracts # # # # # # # # # # # # # # # # # #								
Nursing Research Relevant Contract Dollars 1				8,132,143	8,044,965	7,943,679		
Nutrition Monitoring Total Relevant Dollars Total Relevant Contracts Total Relevant Contract Dollars Total Relevant Grant Dollars Total Relevant Contract Dollars Total Relevant Contract Dollars Total Relevant Contract Dollars Total Relevant Contracts Total Relevant Contract Dollars Total Re	Nursing Research							
Total Relevant Dollars 8,475,918 8,132,143 8,044,965 7,943,679 9,848,194 4.39	rearing recodular							
Nutrition Number of Grants Figure State Stat		Total Count	35	36	33	30	29	
Nutrition Nutrition Relevant Grant Dollars 131,807,340 117,756,071 102,564,615 90,773,169 101,297,729			<u> </u>	<u> </u>			<u> </u>	4.39
Nutrition Number of Contracts Relevant Contract Dollars Relevant Contract Dollars 4,372,361 4,220,813 3,452,083 3,005,520 3,462,874 Total Count 647 523 448 399 383 383 383 383 383 383 383 383 383 383 383 488 309 3878 888 585 383 383 26 24 23 23 26 24 23 23 26 24 23 23 26 24 23 23 26 24 23 23 26 24 23 23 26 24 23 23 24 23 24 23 24 23 24 23 24 24 23 24 24 23 24 24 24 23 24 24 24 24 24 24 24 24 24 24 24 24 24 24 24 24 24 2				513	441		374	
Nutrition Relevant Contract Dollars 4,372,361 4,220,813 3,452,083 3,005,520 3,462,874 304 309 383 383 3448 399 383 383 3448 399 383 383 3448 399 383 3448 399 383 3448 349 345 3		Relevant Grant Dollars	131,807,340	117,756,071	102,564,615	90,773,169	101,297,729	
Relevant Contract Dollars 4,372,361 4,220,813 3,452,083 3,005,520 3,462,874	Nutrition	Number of Contracts	9	10	7	6	9	
Nutrition Monitoring Number of Grants 136,179,701 121,976,884 106,016,699 93,778,689 104,760,603 -5.83	Nation	Relevant Contract Dollars	4,372,361	4,220,813	3,452,083	3,005,520	3,462,874	
Nutrition Monitoring Relevant Grants Relevant Grant Dollars Rejevant Grant Dollars Rejevant Contracts Rejevant Contracts Rejevant Contracts Rejevant Contract Dollars Rejevant Grants Rejevant Grant Dollars Re		Total Count	647					
Nutrition Monitoring Number of Contracts 8,955,163 9,882,676 5,485,202 6,478,782 8,999,541 Nutrition Monitoring Putrition Mumber of Contracts 3 1 1 2 1 Relevant Contract Dollars Putrition Monitoring Putrition Monitoring Putrition Monitoring Putrition Monitoring Putrition Putrition Putrition Putrition Monitoring Putrition Putrition Monitoring Putrition Putrit		Total Relevant Dollars	136,179,701	121,976,884	106,016,699	93,778,689	104,760,603	-5.83
Nutrition Monitoring Number of Contracts Number of Contracts Relevant Contract Dollars 3 1 1 2 1 Relevant Contract Dollars 2,210,544 323,154 435,711 456,632 604,252 Total Count 33 34 27 26 24 Number of Grants 290 281 262 249 240 Relevant Grant Dollars 63,637,392 64,004,183 55,081,497 52,003,841 51,223,096 Number of Contracts 1 3 1 1 1 2 Relevant Contract Dollars 1,478,927 3,323,159 2,190,039 2,037,388 2,232,122 Total Relevant Dollars 65,116,319 67,327,342 57,271,546 54,041,229 53,455,218 -4.56 Mumber of Grants 27 30 27 19 14 Relevant Grant Dollars 4 4 263 3931,219 3,482,526 Number of Contracts ‡ ‡ ‡ ‡ ‡ ‡ ‡ <td< td=""><td></td><td>Number of Grants</td><td>30</td><td>33</td><td></td><td>24</td><td>23</td><td></td></td<>		Number of Grants	30	33		24	23	
Nutrition Monitoring Total Count Relevant Contract Dollars 2,210,544 323,154 435,711 456,632 604,252 Total Count 33 34 27 26 24 Total Relevant Dollars 11,165,707 10,205,830 5,920,913 6,935,414 9,603,793 1.25 Number of Grants 290 281 262 249 240 Relevant Grant Dollars 63,637,392 64,004,183 55,081,497 52,003,841 51,223,096 Number of Contracts 1 3 1 1 2 Relevant Contract Dollars 1,478,927 3,323,159 2,190,039 2,037,388 2,232,122 Total Count 291 284 263 250 242 Total Relevant Dollars 65,116,319 67,327,342 57,271,546 54,041,229 53,455,218 -4.56 Occupational Cencer Number of Grants 27 30 27 19 14 Relevant Grant Dollars 6,625,987 6,560,117 5,893,989 3,931,219		Relevant Grant Dollars	8,955,163	9,882,676	5,485,202	6,478,782	8,999,541	
Number of Contracts 1	Nutrition Monitoring	Number of Contracts	3	1	1		1	
Obesity Total Relevant Dollars 11,165,707 10,205,830 5,920,913 6,935,414 9,603,793 1.25 Alumber of Grants 290 281 262 249 240 Relevant Grant Dollars 63,637,392 64,004,183 55,081,497 52,003,841 51,223,096 Number of Contracts 1 3 1 1 2 Relevant Contract Dollars 1,478,927 3,323,159 2,190,039 2,037,338 2,232,122 Total Count 291 284 263 250 242 Total Relevant Dollars 65,116,319 67,327,342 57,271,546 54,041,229 53,455,218 -4.56 Mumber of Grants 27 30 27 19 14 Relevant Grant Dollars 6,625,987 6,560,117 5,893,989 3,931,219 3,482,526 Number of Contracts ‡ ‡ ‡ ‡ \$4 \$4 \$4 \$4 \$4 \$4 \$4 \$4 \$4 \$4 \$4 \$4 <td< td=""><td>Nutrition Monitoring</td><td>Relevant Contract Dollars</td><td>2,210,544</td><td>323,154</td><td>435,711</td><td>456,632</td><td>604,252</td><td></td></td<>	Nutrition Monitoring	Relevant Contract Dollars	2,210,544	323,154	435,711	456,632	604,252	
Obesity Number of Grants Relevant Grant Dollars 290 281 262 249 240 All Person of Grants Relevant Grant Dollars 63,637,392 64,004,183 55,081,497 52,003,841 51,223,096 Number of Contracts Relevant Contract Dollars Total Relevant Dollars 1,478,927 3,323,159 2,190,039 2,037,388 2,232,122 Total Relevant Dollars 65,116,319 67,327,342 57,271,546 54,041,229 53,455,218 -4.56 Number of Grants Relevant Grant Dollars 27 30 27 19 14 Relevant Contracts Relevant Contract Dollars Total Count ‡ ‡ ‡ ‡ ‡ 1 87,500 Total Relevant Dollars 6,625,987 6,560,117 5,893,989 3,931,219 3,570,026 13.40 Number of Grants Relevant Grant Dollars 1,784 1,693 1,573 1,440 1,348 Relevant Grant Dollars Relevant Contracts Relevant Contracts Relevant Contracts Relevant Contracts 1 3 3 378,546,779 359,141,456 Number of Contracts Relevant Contracts 1		Total Count	33	34	27		24	
Obesity Relevant Grant Dollars 63,637,392 64,004,183 55,081,497 52,003,841 51,223,096 Number of Contracts 1 3 1 1 2 Relevant Contract Dollars 1,478,927 3,323,159 2,190,039 2,037,388 2,232,122 Total Count 291 284 263 250 242 Total Relevant Dollars 65,116,319 67,327,342 57,271,546 54,041,229 53,455,218 -4.56 Number of Grants 27 30 27 19 14 Relevant Grant Dollars ‡ ‡ ‡ ‡ \$ 1 \$ 1 \$ 1 \$ 4 4.56 \$ 1 \$ 4 4.56 \$ 4 \$ 57,271,546 54,041,229 53,455,218 -4.56 4 5 \$ 4 \$ 5,893,989 3,931,219 3,482,526 3 \$ 1 \$ 1 \$ 1 \$ \$		Total Relevant Dollars	11,165,707	10,205,830	5,920,913	6,935,414	9,603,793	1.25
Obesity Number of Contracts Relevant Contract Dollars 1 3 1 1 2 Relevant Contract Dollars Relevant Contract Dollars 1,478,927 3,323,159 2,190,039 2,037,388 2,232,122 Total Count Total Count Total Relevant Dollars 291 284 263 250 242 Number of Grants 27 30 27 19 14 Relevant Grant Dollars Relevant Grant Dollars 6,625,987 6,560,117 5,893,989 3,931,219 3,482,526 Number of Contracts Relevant Contract Dollars Total Count 27 30 27 19 15 Total Relevant Dollars Total Relevant Dollars ‡ ‡ ‡ ‡ \$4 \$7		Number of Grants	290	281	262	249	240	
Obesity Relevant Contract Dollars 1,478,927 3,323,159 2,190,039 2,037,388 2,232,122 Total Count 291 284 263 250 242 Total Relevant Dollars 65,116,319 67,327,342 57,271,546 54,041,229 53,455,218 -4.56 Number of Grants 27 30 27 19 14 Relevant Grant Dollars 6,625,987 6,560,117 5,893,989 3,931,219 3,482,526 Number of Contracts ‡ ‡ ‡ ‡ 1 87,500 Total Count 27 30 27 19 15 15 Total Count 27 30 27 19 15 15 Total Relevant Dollars 6,625,987 6,560,117 5,893,989 3,931,219 3,570,026 13.40 Number of Grants 1,784 1,693 1,573 1,440 1,348 Relevant Grant Dollars 404,601,468 402,124,198 403,153,878 378,546,779 359,141,456 <td></td> <td>Relevant Grant Dollars</td> <td>63,637,392</td> <td>64,004,183</td> <td>55,081,497</td> <td>52,003,841</td> <td>51,223,096</td> <td></td>		Relevant Grant Dollars	63,637,392	64,004,183	55,081,497	52,003,841	51,223,096	
Relevant Contract Dollars	Ohesity	Number of Contracts	1	3	1	1	2	
Total Relevant Dollars 65,116,319 67,327,342 57,271,546 54,041,229 53,455,218 -4.56	Obcoity	Relevant Contract Dollars	1,478,927	3,323,159	2,190,039	2,037,388	2,232,122	
Number of Grants 27 30 27 19 14 Relevant Grant Dollars 6,625,987 6,560,117 5,893,989 3,931,219 3,482,526 Number of Contracts ‡ ‡ ‡ ‡ ‡ 1 Relevant Contract Dollars ‡ ‡ ‡ ‡ \$ 87,500 Total Count 27 30 27 19 15 15 Total Relevant Dollars 6,625,987 6,560,117 5,893,989 3,931,219 3,570,026 13.40 Number of Grants 1,784 1,693 1,573 1,440 1,348 Relevant Grant Dollars 404,601,468 402,124,198 403,153,878 378,546,779 359,141,456 Number of Contracts 1 3 3 3 3 Relevant Contract Dollars 111,706 1,510,068 1,968,626 1,711,492 1,213,234 Total Count 1,785 1,696 1,576 1,443 1,351		Total Count		284	<i>263</i>	<i>250</i>	242	
Relevant Grant Dollars 6,625,987 6,560,117 5,893,989 3,931,219 3,482,526 Number of Contracts ‡ ‡ ‡ ‡ ‡ ‡ 1 Relevant Contract Dollars ‡ ‡ ‡ ‡ ‡ \$		Total Relevant Dollars	65,116,319	67,327,342	57,271,546	54,041,229	53,455,218	-4.56
Occupational Cancer Number of Contracts Relevant Contract Dollars ‡ <td></td> <td>Number of Grants</td> <td></td> <td>30</td> <td>27</td> <td>19</td> <td>14</td> <td></td>		Number of Grants		30	27	19	14	
Occupational Cancer Relevant Contract Dollars ‡ <		Relevant Grant Dollars	6,625,987	6,560,117	5,893,989	3,931,219	3,482,526	
Relevant Contract Dollars ‡ ‡ ‡ ‡ ‡ \$87,500 Total Count 27 30 27 19 15 Total Relevant Dollars 6,625,987 6,560,117 5,893,989 3,931,219 3,570,026 13.40 Number of Grants 1,784 1,693 1,573 1,440 1,348 Relevant Grant Dollars 404,601,468 402,124,198 403,153,878 378,546,779 359,141,456 Number of Contracts 1 3 3 3 3 Relevant Contract Dollars 111,706 1,510,068 1,968,626 1,711,492 1,213,234 Total Count 1,785 1,696 1,576 1,443 1,351	Occupational Cancer	Number of Contracts	#	#	#	#	1	
Total Relevant Dollars 6,625,987 6,560,117 5,893,989 3,931,219 3,570,026 13.40 Oncogenes Number of Grants 1,784 1,693 1,573 1,440 1,348 Relevant Grant Dollars 404,601,468 402,124,198 403,153,878 378,546,779 359,141,456 Number of Contracts 1 3 3 3 3 Relevant Contract Dollars 111,706 1,510,068 1,968,626 1,711,492 1,213,234 Total Count 1,785 1,696 1,576 1,443 1,351	Occupational Cancel	Relevant Contract Dollars	‡	‡	‡	‡	87,500	
Number of Grants 1,784 1,693 1,573 1,440 1,348 Relevant Grant Dollars 404,601,468 402,124,198 403,153,878 378,546,779 359,141,456 Number of Contracts 1 3 3 3 3 Relevant Contract Dollars 111,706 1,510,068 1,968,626 1,711,492 1,213,234 Total Count 1,785 1,696 1,576 1,443 1,351		Total Count	27	30	27	19	15	
Oncogenes Relevant Grant Dollars 404,601,468 402,124,198 403,153,878 378,546,779 359,141,456 Number of Contracts 1 3 3 3 3 3 Relevant Contract Dollars 111,706 1,510,068 1,968,626 1,711,492 1,213,234 Total Count 1,785 1,696 1,576 1,443 1,351		Total Relevant Dollars	6,625,987	6,560,117	5,893,989	3,931,219	3,570,026	13.40
Oncogenes Number of Contracts 1 3 3 3 3 Relevant Contract Dollars 111,706 1,510,068 1,968,626 1,711,492 1,213,234 Total Count 1,785 1,696 1,576 1,443 1,351		Number of Grants	1,784	1,693	1,573	1,440	1,348	
Oncogenes Relevant Contract Dollars 111,706 1,510,068 1,968,626 1,711,492 1,213,234 **Total Count** 1,785 1,696 1,576 1,443 1,351		Relevant Grant Dollars	404,601,468	402,124,198	403,153,878	378,546,779	359,141,456	
Total Count 1,785 1,696 1,576 1,443 1,351	Oncogenee	Number of Contracts	1	3	3	3	3	
	Uniougenes	Relevant Contract Dollars	111,706	1,510,068	1,968,626	1,711,492	1,213,234	
Total Relevant Dollars 404,713,174 403,634,266 405,122,504 380,258,271 360,354,689 -2.81		Total Count	1,785	1,696	1,576	1,443	1,351	
		Total Relevant Dollars	404,713,174	403,634,266	405,122,504	380,258,271	360,354,689	-2.81

^{*} Some categories are not mutually exclusive, resulting in overlap in reported funding. As a result, dollar totals may exceed 100 percent of the extramural budget.

[†]Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡]Coding not required or requested.

Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	151	132	129	117	120	
	Relevant Grant Dollars	48,657,932	45,618,921	47,946,930	43,054,531	47,912,539	
Organ Transplant	Number of Contracts	#	#	1	#	#	
Research	Relevant Contract Dollars	‡	‡	728,795	‡	‡	
	Total Count	151	132	130	117	12	
	Total Relevant Dollars	48,657,932	45,618,921	48,675,724	43,054,531	47,912,539	0.04
	Number of Grants	7	6	6	4	3	
	Relevant Grant Dollars	1,471,815	1,557,646	768,584	144,894	558,679	
Osteoporosis	Number of Contracts	#	#	#	#	#	
Озісорогозіз	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	7	6	6	4	3	
	Total Relevant Dollars	1,471,815	1,557,646	768,584	144,894	558,679	39.90
	Number of Grants	132	<i>7</i> 5	<i>65</i>	67	69	
	Relevant Grant Dollars	12,405,393	9,313,288	11,455,185	12,594,778	19,794,438	
Pain	Number of Contracts	#	#	#	1	#	
Falli	Relevant Contract Dollars	‡	‡	‡	99,932	‡	
	Total Count	132	<i>75</i>	65	68	69	
	Total Relevant Dollars	12,405,393	9,313,288	11,455,185	12,694,710	19,794,438	16.20
	Number of Grants	129	68	64	56	62	
	Relevant Grant Dollars	15,149,837	10,957,597	13,862,941	14,389,798	17,555,810	
Palliative Care	Number of Contracts	1	#	#	#	#	
Palliative Gale	Relevant Contract Dollars	10,500	‡	‡	‡	‡	
	Total Count	130	68	64	56	62	
	Total Relevant Dollars	15,160,337	10,957,597	13,862,941	14,389,798	17,555,810	6.14
	Number of Grants	81	34	27	24	24	
	Relevant Grant Dollars	5,542,465	4,772,033	5,776,068	5,476,069	4,379,452	
Don Tooting	Number of Contracts	#	#	#	#	#	
Pap Testing	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	81	34	27	24	24	
	Total Relevant Dollars	5,542,465	4,772,033	5,776,068	5,476,069	4,379,452	-4.52
	Number of Grants	623	583	580	564	595	
	Relevant Grant Dollars	209,529,822	216,588,476	220,383,334	227,499,715	280,431,656	
Dadiatria Dagaarah	Number of Contracts	4	3	#	2	4	
Pediatric Research	Relevant Contract Dollars	3,185,228	195,000	‡	589,442	4,514,316	
	Total Count	627	586	580	566	599	
	Total Relevant Dollars	212,715,050	216,783,476	220,383,334	228,089,157	284,945,972	7.99
	Number of Grants	664	635	597	583	578	
	Relevant Grant Dollars	155,335,886	153,442,074	144,856,624	170,929,897	170,539,038	
Personalized Health	Number of Contracts	1	3	4	5	4	
Care	Relevant Contract Dollars	224,999	25,437,656	49,185,985	44,910,814	63,079,767	
	Total Count	665	638	601	588	582	
	Total Relevant Dollars	155,560,885	178,879,730	194,042,608	215,840,711	233,618,805	10.73
				· · · · · · · · · · · · · · · · · · ·			

^{*} Some categories are not mutually exclusive, resulting in overlap in reported funding. As a result, dollar totals may exceed 100 percent of the extramural budget.

[†]Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡]Coding not required or requested.

Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	226	183	176	162	143	
	Relevant Grant Dollars	41,541,959	37,555,190	41,108,745	35,728,605	33,417,628	
Pharmacogenetics	Number of Contracts	#	#	#	#	#	
rnamacogeneucs	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	226	183	176	162	143	
	Total Relevant Dollars	41,541,959	37,555,190	41,108,745	35,728,605	33,417,628	-4.92
	Number of Grants	1,221	1,067	1,001	916	946	
	Relevant Grant Dollars	366,837,607	339,430,238	318,281,486	333,968,556	373,997,908	
Prevention	Number of Contracts	23	33	29	29	29	
TTGVGHUOH	Relevant Contract Dollars	32,958,496	51,922,887	54,150,632	48,177,764	33,218,787	
	Total Count	1,244	1,100	1,030	945	975	
	Total Relevant Dollars	399,796,103	391,353,125	372,432,118	382,146,320	407,216,695	0.55
	Number of Grants	680	664	673	<i>652</i>	657	
	Relevant Grant Dollars	132,200,036	134218056	140,643,812	140,517,434	158,420,435	
Proteomics	Number of Contracts	3	3	1	4	2	
Proteomics	Relevant Contract Dollars	465,439	53481462	62,182,698	81,234,900	78,521,602	
	Total Count	683	667	674	<i>656</i>	659	
	Total Relevant Dollars	132,665,475	187699518	202,826,510	221,752,334	236,942,036	16.43
	Number of Grants	1	3	4	4	4	
	Relevant Grant Dollars	207,149	1,015,296	1,291,914	811,428	989,649	
Radiation,	Number of Contracts	#	#	#	#	#	
Electromagnetic Fields	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	1	3	4	4	4	
	Total Relevant Dollars	207,149	1,015,296	1,291,914	811,428	989,649	100.53
	Number of Grants	91	87	70	<i>67</i>	59	
	Relevant Grant Dollars	13,527,344	16,375,603	14,849,251	16,498,303	16,441,421	
Radiation, lonizing	Number of Contracts	1	1	1	2	2	
naulation, ionizing	Relevant Contract Dollars	209,449	291,030	157,967	455,571	2,157,951	
	Total Count	92	88	71	<i>69</i>	61	
	Total Relevant Dollars	13,736,793	16,666,633	15,007,218	16,953,874	18,599,372	8.51
	Number of Grants	301	292	286	<i>255</i>	237	
	Relevant Grant Dollars	67,671,200	71,896,359	72,895,969	71,819,401	70,963,666	
Radiation, lonizing	Number of Contracts	3	1	1	2	1	
Diagnosis	Relevant Contract Dollars	4,153,185	750,000	149,751	343,950	‡	
	Total Count	304	293	287	<i>257</i>	238	
	Total Relevant Dollars	71,824,385	72,646,359	73,045,720	72,163,351	70,963,666	-0.29
	Number of Grants	510	459	457	455	448	
	Relevant Grant Dollars	105,995,072	113,662,465	120,584,371	122,782,173	133,404,212	
Radiation, Ionizing	Number of Contracts	1	14	10	8	10	
Radiotherapy	Relevant Contract Dollars	1,499,978	5,521,043	8,940,664	6,518,356	3,495,309	
	Total Count	511	473	467	463	458	
	Total Relevant Dollars	107,495,050	119,183,508	129,525,035	129,300,529	136,899,521	6.31
<u> </u>							

^{*} Some categories are not mutually exclusive, resulting in overlap in reported funding. As a result, dollar totals may exceed 100 percent of the extramural budget.

[†]Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡]Coding not required or requested.

Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	7	5	3	2	2	
	Relevant Grant Dollars	760,210	489,579	523,999	25,740	298,779	
Radiation, Low-Level	Number of Contracts	#	#	#	#	#	
lonizing	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	7	5	3	2	2	
	Total Relevant Dollars	760,210	489,579	523,999	25,740	298,779	234.27
	Number of Grants	322	339	316	302	304	
	Relevant Grant Dollars	83,520,731	91,673,750	78,728,770	86,855,863	85,378,228	
Radiation, Magnetic	Number of Contracts	#	#	1	1	2	
Resonance Imaging	Relevant Contract Dollars	‡	‡	225,000	277,650	281,104	
	Total Count	322	339	317	303	306	
	Total Relevant Dollars	83,520,731	91,673,750	78,953,770	87,133,513	85,659,332	1.13
	Number of Grants	153	95	83	73	66	
	Relevant Grant Dollars	23,148,908	20,990,452	14,435,131	15,339,130	14,531,883	
Radiation,	Number of Contracts	1	1	#	#	1	
Mammography	Relevant Contract Dollars	1,100,000	750,000	‡	‡	12,500	
	Total Count	154	96	83	73	67	
	Total Relevant Dollars	24,248,908	21,740,452	14,435,131	15,339,130	14,544,383	-10.71
	Number of Grants	130	129	125	118	111	
	Relevant Grant Dollars	24,739,055	25,836,973	23,741,839	25,569,233	26,339,672	
Radiation, Non-Ionizing	Number of Contracts	#	1	#	2	#	
riadiation, Non Tonizing	Relevant Contract Dollars	‡	35,000	‡	1,791,728	‡	
	Total Count	130	130	125	120	111	
	Total Relevant Dollars	24,739,055	25,871,973	23,741,839	27,360,961	26,339,672	1.96
	Number of Grants	474	470	438	401	377	
	Relevant Grant Dollars	130,723,063	134,607,297	120,965,607	124,041,475	112,998,401	
Radiation, Non-Ionizing	Number of Contracts	3	#	2	4	2	
Diagnosis	Relevant Contract Dollars	679,250	‡	1,724,725	1,949,613	281,104	
	Total Count	477	470	440	405	379	
	Total Relevant Dollars	131,402,313	134,607,297	122,690,332	125,991,087	113,279,505	-3.45
	Number of Grants	193	190	183	169	174	
	Relevant Grant Dollars	51,128,011	53,934,953	52,954,709	53,900,397	59,155,854	
Radiation, Non-Ionizing	Number of Contracts	5	2	#	3	3	
Radiotherapy	Relevant Contract Dollars	1,044,592	1,798,842	‡	4,206,536	321,677	
	Total Count	198	192	183	172	177	
	Total Relevant Dollars	52,172,603	55,733,795	52,954,709	58,106,933	59,477,531	3.48
	Number of Grants	114	98	88	82	76	
	Relevant Grant Dollars	22,589,958	18,726,175	15,072,662	16,146,542	16,770,517	
Radiation, UV	Number of Contracts	#	1	#	1	#	
riadiadori, OV	Relevant Contract Dollars	‡	35,000	‡	1,494,124	‡	
	Total Count	114	99	88	83	76	
	Total Relevant Dollars	22,589,958	18,761,175	15,072,662	17,640,666	16,770,517	-6.12

^{*} Some categories are not mutually exclusive, resulting in overlap in reported funding. As a result, dollar totals may exceed 100 percent of the extramural budget.

[†]Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡]Coding not required or requested.

Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	62	61	<i>57</i>	52	44	
	Relevant Grant Dollars	10,866,928	14,081,488	13,348,150	10,726,359	10,401,147	
Rare Diseases	Number of Contracts	1	#	#	1	#	
Hare Diseases	Relevant Contract Dollars	312,912	‡	‡	49,950	‡	
	Total Count	63	61	57	53	44	
	Total Relevant Dollars	11,179,840	14,081,488	13,348,150	10,776,309	10,401,147	-0.50
	Number of Grants	210	168	173	156	166	
	Relevant Grant Dollars	47,474,572	51,747,174	54,957,761	56,664,104	55,517,413	
Rehabilitation	Number of Contracts	2	1	3	#	1	
Horiabilitation	Relevant Contract Dollars	1,007,690	149,925	1,694,020	‡	1,499,993	
	Total Count	212	169	176	156	167	
	Total Relevant Dollars	48,482,262	51,897,099	56,651,781	56,664,104	57,017,406	4.21
	Number of Grants	118	103	103	95	102	
	Relevant Grant Dollars	51,131,320	45,918,623	39,972,778	47,225,578	58,851,993	
Rural Populations	Number of Contracts	#	#	#	#	1	
riarar i opalations	Relevant Contract Dollars	‡	‡	‡	‡	56,000	
	Total Count	118	103	103	95	103	
	Total Relevant Dollars	51,131,320	45,918,623	39,972,778	47,225,578	58,907,993	4.93
	Number of Grants	130	69	52	42	41	
	Relevant Grant Dollars	17,283,985	12,192,170	11,054,662	11,261,006	10,790,237	
Sexually Transmitted	Number of Contracts	#	#	#	#	#	
Diseases	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	130	69	52	42	41	
	Total Relevant Dollars	17,283,985	12,192,170	11,054,662	11,261,006	10,790,237	-10.27
	Number of Grants	48	49	59	60	68	
	Relevant Grant Dollars	6,930,386	7,520,997	9,575,112	10,817,251	18,354,414	
Sleep Disorders	Number of Contracts	1	1	#	#	#	
Siccp Districts	Relevant Contract Dollars	78,195	35,000	‡	‡	‡	
	Total Count	49	50	59	60	68	
	Total Relevant Dollars	7,008,581	7,555,997	9,575,112	10,817,251	18,354,414	29.29
	Number of Grants	609	648	649	660	691	
	Relevant Grant Dollars	109,485,605	112,555,106	116,837,379	128,242,096	139,220,927	
Small Molecules	Number of Contracts	4	2	4	5	4	
oman wordenes	Relevant Contract Dollars	1,389,150	846,672	2,932,872	3,629,428	3,818,665	
	Total Count	613	650	653	665	695	
	Total Relevant Dollars	110,874,755	113,401,778	119,770,251	131,871,523	143,039,592	6.61
	Number of Grants	381	354	344	324	315	
	Relevant Grant Dollars	80,787,427	79,736,310	85,531,663	90,945,385	89,089,847	
Smoking	Number of Contracts	5	5	6	6	5	
omoning	Relevant Contract Dollars	1,335,500	1,960,000	5,099,990	2,086,550	14,152,035	
	Total Count	386	359	350	330	320	
		82,122,927	81,696,310	90,631,653	93,031,935	103,241,882	6.01

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[†]Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡]Coding not required or requested.

Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	274	269	267	248	244	_
	Relevant Grant Dollars	64,136,938	63,391,848	65,022,529	68,496,317	63,263,716	
Smoking Behavior	Number of Contracts	5	3	4	5	4	
Smoking Denavior	Relevant Contract Dollars	1,335,500	1,285,000	4,424,240	2,070,000	1,268,250	
	Total Count	279	272	271	<i>253</i>	248	
	Total Relevant Dollars	65,472,438	64,676,848	69,446,769	70,566,317	64,531,966	-0.19
	Number of Grants	38	78	112	121	140	
	Relevant Grant Dollars	11,218,530	21,477,518	34,877,760	38,247,479	38,423,410	
Smoking Cessation	Number of Contracts	2	#	2	1	1	
Silloking Gessauon	Relevant Contract Dollars	1,580,171	‡	3,139,341	6,250,268	12,883,785	
	Total Count	40	<i>78</i>	114	122	141	
	Total Relevant Dollars	12,798,701	21,477,518	38,017,101	44,497,747	51,307,195	44.29
	Number of Grants	20	20	20	22	20	
	Relevant Grant Dollars	3,771,941	4,153,475	3,389,404	5,075,259	5,088,594	
Conclaina Dessive	Number of Contracts	1	1	2	#	#	
Smoking, Passive	Relevant Contract Dollars	420,000	420,000	456,715	‡	‡	
	Total Count	21	21	22	22	20	
	Total Relevant Dollars	4,191,941	4,573,475	3,846,118	5,075,259	5,088,594	6.35
	Number of Grants	29	25	27	26	23	
	Relevant Grant Dollars	1,359,152	1,961,730	1,686,491	1,827,449	1,882,785	
Cmakalaga Tahagaa	Number of Contracts	1	1	1	#	#	
Smokeless Tobacco	Relevant Contract Dollars	420,000	420,000	440,965	‡	‡	
	Total Count	30	26	28	26	23	
	Total Relevant Dollars	1,779,152	2,381,730	2,127,455	1,827,449	1,882,785	3.02
	Number of Grants	1,048	944	856	761	702	
	Relevant Grant Dollars	196,164,921	180,943,953	165,245,966	160,205,655	160,511,867	
Ohmanhamal Dialama	Number of Contracts	#	2	2	1	1	
Structural Biology	Relevant Contract Dollars	‡	52,481,360	62,705,109	79,804,870	78,321,602	
	Total Count	1,048	946	858	762	703	
	Total Relevant Dollars	196,164,921	233,425,313	227,951,075	240,010,526	238,833,468	5.36
	Number of Grants	300	208	210	214	222	
	Relevant Grant Dollars	48,740,495	47,266,013	50,662,032	58,892,413	61,508,704	
Currant	Number of Contracts	#	2	#	2	2	
Surgery	Relevant Contract Dollars	‡	1,094,494	‡	1,172,218	14,539	
	Total Count	300	210	210	216	224	
	Total Relevant Dollars	48,740,495	48,360,507	50,662,032	60,064,630	61,523,242	6.24
	Number of Grants	222	149	127	130	144	
	Relevant Grant Dollars	17,879,201	14,735,085	15,870,045	21,162,390	23,999,046	
T	Number of Contracts	#	#	1	#	#	
Taxol	Relevant Contract Dollars	‡	‡	496,154	‡	‡	
	Total Count	222	149	128	130	144	
	Total Relevant Dollars	17,879,201	14,735,085	16,366,199	21,162,390	23,999,046	9.04
	-	· · ·	. , .	. , .	. , .	. ,	

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[†]Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡]Coding not required or requested.

Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	283	270	291	304	329	
	Relevant Grant Dollars	64,593,337	64,342,929	68,485,679	79,769,242	110,288,390	
Telehealth	Number of Contracts	6	6	10	8	9	
roiondaiti	Relevant Contract Dollars	10,473,269	6,161,456	3,584,009	4,389,571	6,077,680	
	Total Count	289	276	301	312	338	
	Total Relevant Dollars	75,066,606	70,504,385	72,069,688	84,158,813	116,366,070	12.79
	Number of Grants	4,057	4,079	4,107	4,293	40	
	Relevant Grant Dollars	1,366,836,549	1,430,619,450	1,527,523,958	1,754,215,108	9,212,704	
Therapy	Number of Contracts	67	81	78	64	1	
тногару	Relevant Contract Dollars	80,749,732	137,502,906	179,514,139	157,222,822	397,217	
	Total Count	4,124	4,160	4,185	4,357	41	
	Total Relevant Dollars	1,447,586,281	1,568,122,356	1,707,038,097	1,911,437,931	9,609,921	-17.58
	Number of Grants	15	15	11	10	10	
	Relevant Grant Dollars	2,968,168	3,731,760	3,628,078	3,155,736	1,846,880	
Tropical Diseases	Number of Contracts	#	#	#	#	#	
Tropical Diocacco	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	15	15	11	10	10	
	Total Relevant Dollars	2,968,168	3,731,760	3,628,078	3,155,736	1,846,880	-7.88
	Number of Grants	298	214	147	110	71	
	Relevant Grant Dollars	59,605,975	49,088,453	35,214,792	28,002,108	14,174,253	
Tumor Markers	Number of Contracts	#	#	#	#	#	
Turrior Warkers	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	298	214	147	110	71	
	Total Relevant Dollars	59,605,975	49,088,453	35,214,792	28,002,108	14,174,253	-28.94
	Number of Grants	610	<i>595</i>	605	<i>578</i>	628	
	Relevant Grant Dollars	245,809,745	230,676,876	228,862,603	247,578,399	324,687,212	
Underserved and	Number of Contracts	#	4	7	9	5	
Disparities	Relevant Contract Dollars	‡	5,952,032	1,906,103	5,404,861	3,581,740	
	Total Count	610	599	612	<i>587</i>	633	
	Total Relevant Dollars	245,809,745	236,628,908	230,768,706	252,983,260	328,268,952	8.29
	Number of Grants	112	109	100	87	95	
	Relevant Grant Dollars	15,119,199	17,882,191	18,841,587	18,665,405	20,212,226	
Vaccine Development	Number of Contracts	1	1	2	1	1	
vaccine Development	Relevant Contract Dollars	458,635	318,481	2,719,056	589,266	230,734	
	Total Count	113	110	102	88	96	
	Total Relevant Dollars	15,577,834	18,200,672	21,560,643	19,254,670	20,442,960	7.69
	Number of Grants	1	1	1	1	2	
	Relevant Grant Dollars	‡	41,056	40,677	40,677	119,047	
Vaccine Production	Number of Contracts	#	#	#	#	#	
vaccine r rouuciidh	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	1	1	1	1	2	
	Total Relevant Dollars	‡	41,056	40,677	40,677	119,047	63.91

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[†]Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡]Coding not required or requested.

Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Vaccine Research Amelican of Grants 149 129 113 121 123 Vaccine Research Relevant Corntact Dollars ± 22,481,052 360,4328 27073,893 28,024,644 Vaccine Research Aumber of Contracts ± 24,851,052 346,437,38 39,618,958 37,638,643 Total Relevant Dollars 25,518,109 47,199,800 58,304,167 66,692,851 65,663,287 30,33 Mumber of Grants 70 72 63 58 49 Place Wart Contract Dollars 14,265,015 14,360,299 14,750,899 11,061,812 2 Place Wart Contract Dollars 14,359,947 2,746,712 3,185,368 22,05,882 1,674,230 Mumber of Grants 443,5947 2,746,712 3,185,368 2,305,882 1,674,230 Virus Cancer Research 16 Grants 442 2419 370 30 64 60 51 Virus Cancer Research 16 Grants 12,497,046 121,319,532 130,243,717 131,418,007 131,4	Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
Vaccine Research Number of Contracts (Date) ‡ 2.4,951,052 34,643,738 39,618,958 37,636,643 Relevant Contract Dollars ‡ 2.4,951,052 34,643,738 39,618,958 37,638,643 Total Count 149 135 123 111 130 Vaccine Testing Mumber of Grants 70 72 63 58 49 Relevant Criant Dollars 14,265,015 1,360,299 14,750,600 13,896,826 11,061,812 Mumber of Contracts 3 3 1,1 1 2 2,205,882 1,674,230 Hollar Contract Dollars 4,435,947 2,746,712 3,186,536 2,305,882 1,674,230 -8.68 Mumber of Grants 442 419 370 366 347 -8.68 Virus Cancer Research Mumber of Contracts 1 24,977,04 21,309,209 30,559,118 33,4560,327 33,309,2240 -8.68 Virus Cancer Research Mumber of Grants 75 69 57 55		Number of Grants	149	129	113	121	123	
Vaccine Research Relevant Contract Dollars 14 24,951,052 34,643,738 39,618,958 37,638,643 310 13		Relevant Grant Dollars	25,518,109	22,248,751	23,660,428	27,073,893	28,024,644	
Relevant Contract Dollars	Vaccine Research	Number of Contracts	#	6	10	10	7	
Vaccine Testing Total Relevant Dollars 25,518,109 47,199,803 58,304,167 66,692,851 65,663,287 30.33 Vaccine Testing Relevant Grant Dollars Relevant Contract Dollars Relevant Dollars Relevant Dollars Relevant Dollars Relevant Dollars Relevant Dollars Relevant Contract Relevant Dollars Relevant Contract Relevant Rele	vaccine nescarcin	Relevant Contract Dollars	‡	24,951,052	34,643,738	39,618,958	37,638,643	
Vaccine Testing		Total Count	149	135	123	131	130	
Vaccine Testing Relevant Grant Dollars Mumber of Contracts Relevant Contract Dollars 14,360,299 14,750,690 13,896,826 11,061,812 2 Warcine Testing Part Dollars Mumber of Contracts Dollars Total Count 4,435,947 2,746,712 3,186,336 2,305,882 1,674,230 -8.68 Total Count Total Count 73 73 64 60 51 -8.68 -8.69 -8.69 -8.69 -8.69 -8.69 -8.69 -8.69 -8.69 -8.69 -8.69 -8.		Total Relevant Dollars	25,518,109	47,199,803	58,304,167	66,692,851	65,663,287	30.33
Vaccine Testing Relevant Contract Dollars Relevant Contract Dollars Relevant Contract Dollars (4,435,947) (2,746,712) (3,186,536) (2,305,862) (2,305,864) (60) (51) (174,120) 7 (174,120) (174,120) 1 (174,220) (1,274,604) 2 (174,674,120) 3 (174,674,120) 3 (184,674) (184,674) 4 (184,674)		Number of Grants	70	72	63	<i>58</i>	49	
Vaccine Testing Total Count Relevant Contract Dollars Total Count 4,435,947 2,746,712 3,186,536 2,305,882 1,674,230 7.64 60 51 Virus Cancer Research Number of Grants 442 419 370 356 347 Virus Cancer Research Relevant Grant Dollars 124,977,046 121,319,532 130,243,171 133,714,813 131,441,807 Number of Contracts 740,476 21,920,290 30,559,118 34,560,327 33,092,240 Virus—Application September of Grants 750,476 21,920,290 30,559,118 34,560,327 33,092,240 Virus—Epstein-Barr Number of Grants 75 69 57 55 57 Relevant Grant Dollars 17,304,516 16,834,173 18,001,207 18,317,870 18,236,645 1.38 Virus—Hepatitis B Relevant Contract Dollars 1 1,4834,173 18,001,207 18,317,870 18,236,645 1.38 Virus—Hepatitis C Number of Grants 39 33 22 19 23 <td></td> <td>Relevant Grant Dollars</td> <td>14,265,015</td> <td>14,360,299</td> <td>14,750,690</td> <td>13,896,826</td> <td>11,061,812</td> <td></td>		Relevant Grant Dollars	14,265,015	14,360,299	14,750,690	13,896,826	11,061,812	
Relevant Contract Dollars	Vaccine Tecting	Number of Contracts	3	1	1	2	2	
Total Relevant Dollars 18,700,962 17,107,011 17,937,226 16,202,707 12,736,042 -8.68	vaccine resumy	Relevant Contract Dollars	4,435,947	2,746,712	3,186,536	2,305,882	1,674,230	
Number of Grants Ale		Total Count	73	73	64	60	51	
Virus Cancer Research Relevant Grant Dollars 124,977,046 121,319,532 130,243,171 133,714,813 131,441,807 Wirus Cancer Research Number of Contracts Relevant Contract Dollars 740,476 21,920,290 30,559,118 34,560,327 33,092,240 Total Count Total Relevant Dollars 125,717,522 143,239,822 160,802,289 168,275,141 164,534,046 7.15 Number of Grants 75 69 57 55 57 Relevant Contract Dollars 17,304,516 16,834,173 18,001,207 18,317,870 18,236,645 Number of Contracts 4		Total Relevant Dollars	18,700,962	17,107,011	17,937,226	16,202,707	12,736,042	-8.68
Virus Cancer Research Relevant Contract Dollars Relevant Contract Dollars Relevant Contract Dollars (17,40,476) 1 2 (2) (2) (2) (2) (2) (2) (2) (2) (2) (Number of Grants	442	419	370	356	347	
Virus—Hepatitis Belevant Contract Dollars 740,476 Total Count 21,920,290 Total Count 30,559,118 Total Count 34,560,327 Total Count 33,092,240 Total Relevant Dollars 75,155 Total Relevant Dollars 443 Total Count 443 Total Count 443 Total Count 42,132,39,822 Total Count 168,821,713 Total Count 164,534,046 Total Count 7.15 Virus—Epstein-Barr Relevant Contract Dollars Relevant Contract Dollars Total Count 75 69 57 55 57 Relevant Contract Dollars Relevant Dollars Total Count 75 69 57 55 57 Total Count Total Count 75 69 57 55 57 Total Relevant Dollars Relevant Dollars Total Count 17,304,516 16,834,173 18,001,207 18,317,870 18,236,645 1.38 Virus—Hepatitis B Relevant Grant Dollars Relevant Dollars Total Relevant Dollars Relevant Grant Dollars Relevant Grant Dollars Total Relevant Dollars Total Relevant Dollars Total Relevant Contract Dollars Total Relevant Grant Dollars Total Relevant Grant Dollars Total Relevant Grant Dollars Total Relevant Grant Sollars Total Relevant Contracts Total Relevant Contracts Total Relevant Contract Dollars Total Relevant Dollars Total Relevant Dollars Total Relevant Contracts Total Rel		Relevant Grant Dollars	124,977,046	121,319,532	130,243,171	133,714,813	131,441,807	
Relevant Contract Dollars 740,476 21,920,290 30,559,118 34,560,327 33,092,240 30,559,118 34,560,327 33,092,240 30,559,118 34,560,327 33,092,240 30,559,118 34,560,327 33,092,240 30,559,118 34,560,327 35,000 35	Virus Canaar Bassarah	Number of Contracts	1	2	4	2	3	
Virus—Hepatitis Total Relevant Dollars 125,717,522 143,239,822 160,802,289 168,275,141 164,534,046 7.15 Virus—Epstein-Bar Number of Grants 75 69 57 55 57 Relevant Crant Dollars 17,304,516 16,834,173 18,001,207 18,317,870 18,236,645 Number of Contract Dollars ‡ </td <td>virus Gancer Research</td> <td>Relevant Contract Dollars</td> <td>740,476</td> <td>21,920,290</td> <td>30,559,118</td> <td>34,560,327</td> <td>33,092,240</td> <td></td>	virus Gancer Research	Relevant Contract Dollars	740,476	21,920,290	30,559,118	34,560,327	33,092,240	
Virus—Epstein-Barr Number of Grants Relevant Grant Dollars 75 69 57 55 57 Relevant Grant Dollars Relevant Contracts ‡ <td></td> <td>Total Count</td> <td>443</td> <td>421</td> <td>374</td> <td>358</td> <td>350</td> <td></td>		Total Count	443	421	374	358	350	
Virus—Epstein-Barr Relevant Grant Dollars Number of Contracts Relevant Contract Dollars Total Count 17,304,516 16,834,173 18,001,207 18,317,870 18,236,645 1,38 Number of Grants 39 33 22 19 23 18,236,645 1,38 Number of Contracts # <t< td=""><td></td><td>Total Relevant Dollars</td><td>125,717,522</td><td>143,239,822</td><td>160,802,289</td><td>168,275,141</td><td>164,534,046</td><td>7.15</td></t<>		Total Relevant Dollars	125,717,522	143,239,822	160,802,289	168,275,141	164,534,046	7.15
Virus—Epstein-Barr Number of Contracts Relevant Contract Dollars ‡ * <td></td> <td>Number of Grants</td> <td>75</td> <td>69</td> <td>57</td> <td>55</td> <td>57</td> <td></td>		Number of Grants	75	69	57	55	57	
Virus—Epstein-Barr Relevant Contract Dollars ‡ * *		Relevant Grant Dollars	17,304,516	16,834,173	18,001,207	18,317,870	18,236,645	
Relevant Contract Dollars	Virus Englain Borr	Number of Contracts	#	#	#	#	#	
Virus—Hepatitis B Total Relevant Dollars 17,304,516 16,834,173 18,001,207 18,317,870 18,236,645 1.38 Virus—Hepatitis B Number of Grants 39 33 22 19 23 Relevant Grant Dollars 4,816,519 3,855,582 2,835,408 1,682,116 2,974,267 Number of Contracts ‡ ‡ ‡ ‡ ‡ ‡ Relevant Contract Dollars ‡ \$	virus—Epstein-dan	Relevant Contract Dollars	‡	‡	‡	‡	‡	
Virus—Hepatitis B Number of Grants Relevant Grant Dollars 39 33 22 19 23 Number of Contracts Relevant Grant Dollars 4,816,519 3,855,582 2,835,408 1,682,116 2,974,267 Number of Contracts Relevant Contract Dollars Total Count Total Relevant Dollars ‡ 2,974,267 -2.56 * 2,835,408 1,682,116 2,974,267 -2.56 * * * * * * * * * * * * * * * * <		Total Count	<i>75</i>	69	57	<i>55</i>	57	
Relevant Grant Dollars 4,816,519 3,855,582 2,835,408 1,682,116 2,974,267 Number of Contracts #		Total Relevant Dollars	17,304,516	16,834,173	18,001,207	18,317,870	18,236,645	1.38
Virus—Hepatitis B Number of Contracts Relevant Contract Dollars ‡ *		Number of Grants	39	33	22	19	23	
Virus—Hepatitis B Relevant Contract Dollars ‡		Relevant Grant Dollars	4,816,519	3,855,582	2,835,408	1,682,116	2,974,267	
Felevant Contract Dollars	Virue Hapatitic D	Number of Contracts	#	#	#	#	#	
Total Relevant Dollars 4,816,519 3,855,582 2,835,408 1,682,116 2,974,267 -2.56	virus—nepatitis b	Relevant Contract Dollars	‡	‡	‡	‡	‡	
Number of Grants 34 34 25 24 26 Relevant Grant Dollars 3,507,767 6,172,959 4,925,341 3,352,826 4,349,788 Virus—Herpes Number of Contracts \$\frac{1}{2} \frac{1}{2} \frac		Total Count	39	33	22	19	23	
Virus—Hepatitis C Relevant Grant Dollars 3,507,767 6,172,959 4,925,341 3,352,826 4,349,788 Virus—Herpes Number of Contracts ‡		Total Relevant Dollars	4,816,519	3,855,582	2,835,408	1,682,116	2,974,267	-2.56
Virus—Hepatitis C Number of Contracts Relevant Contract Dollars ‡		Number of Grants	34	34	25	24	26	
Virus—Hepatitis C Relevant Contract Dollars ‡		Relevant Grant Dollars	3,507,767	6,172,959	4,925,341	3,352,826	4,349,788	
Total Count	Virus Hapatitis C	Number of Contracts	#	#	#	#	#	
Total Relevant Dollars 3,507,767 6,172,959 4,925,341 3,352,826 4,349,788 13.39 Virus—Herpes Number of Grants 157 148 127 123 122 Relevant Grant Dollars 42,315,552 41,959,685 44,516,965 47,186,600 41,145,977 Number of Contracts ‡ ‡ ‡ ‡ ‡ Relevant Contract Dollars ‡ ‡ ‡ ‡ ‡ Total Count 157 148 127 123 122	virus—nepatitis C	Relevant Contract Dollars	‡	‡	‡	‡	‡	
Number of Grants 157 148 127 123 122 Relevant Grant Dollars 42,315,552 41,959,685 44,516,965 47,186,600 41,145,977 Number of Contracts Relevant Contract Dollars ‡ ‡ ‡ ‡ ‡ Total Count 157 148 127 123 122		Total Count	34	34	25	24	26	
Virus—Herpes Relevant Grant Dollars 42,315,552 41,959,685 44,516,965 47,186,600 41,145,977 Number of Contracts Relevant Contract Dollars ‡ ‡ ‡ ‡ ‡ ‡ ‡ ‡ ‡ ‡ ‡ ‡ ‡ ‡ ‡ ‡ †		Total Relevant Dollars	3,507,767	6,172,959	4,925,341	3,352,826	4,349,788	13.39
Virus—Herpes Number of Contracts ‡ <th< td=""><td></td><td>Number of Grants</td><td>157</td><td>148</td><td>127</td><td>123</td><td>122</td><td></td></th<>		Number of Grants	157	148	127	123	122	
Virus—Herpes Relevant Contract Dollars		Relevant Grant Dollars	42,315,552	41,959,685	44,516,965	47,186,600	41,145,977	
Relevant Contract Dollars ‡ ‡ ‡ ‡ ‡ † † † † † † † † † † † † † †	Viruo Hornoo	Number of Contracts	#	#	#	#	#	
Total Count 157 148 127 123 122	viius—nerpes	Relevant Contract Dollars						
Total Relevant Dollars 42,315,552 41,959,685 44,516,965 47,186,600 41,145.977 -0.38		Total Count	157	148	127	123	122	
, , , , , , , , , , , , , , , , , , , ,		Total Relevant Dollars	42,315,552	41,959,685	44,516,965	47,186,600	41,145,977	-0.38

^{*} Some categories are not mutually exclusive, resulting in overlap in reported funding. As a result, dollar totals may exceed 100 percent of the extramural budget.

[†]Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡]Coding not required or requested.

Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	65	63	<i>57</i>	60	57	
	Relevant Grant Dollars	19,671,059	19,794,001	25,216,563	27,737,808	23,175,112	
Virus—HHV8	Number of Contracts	#	#	#	#	#	
VII do TIII VO	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	<i>65</i>	63	57	60	57	
	Total Relevant Dollars	19,671,059	19,794,001	25,216,563	27,737,808	23,175,112	5.39
	Number of Grants	22	18	14	14	13	
	Relevant Grant Dollars	4,627,662	3,629,925	4,142,547	3,899,447	3,980,369	
Virus—HTLV-I	Number of Contracts	#	#	#	#	#	
	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	22	18	14	14	13	
	Total Relevant Dollars	4,627,662	3,629,925	4,142,547	3,899,447	3,980,369	-2.80
	Number of Grants	176	167	171	165	167	
	Relevant Grant Dollars	43,808,063	43,027,935	48,797,503	52,490,929	54,043,721	
Virus—Papilloma	Number of Contracts	1	1	3	1	1	
viruo rupinoma	Relevant Contract Dollars	740,476	1,327,705	5,686,039	2,638,379	1,697,599	
	Total Count	177	168	174	166	168	
	Total Relevant Dollars	44,548,539	44,355,640	54,483,542	55,129,308	55,741,320	6.17
	Number of Grants	196	188	187	178	178	
	Relevant Grant Dollars	50,340,929	49,604,921	52,682,779	56,177,300	56,892,866	
Virus—Papova	Number of Contracts	1	1	3	1	1	
νιιασ Γαρονα	Relevant Contract Dollars	740,476	1,327,705	5,686,039	2,638,379	1,697,599	
	Total Count	197	189	190	179	179	
	Total Relevant Dollars	51,081,405	50,932,626	58,368,818	58,815,679	58,590,465	3.67
	Number of Grants	7	2	2	2	2	
	Relevant Grant Dollars	356,763	361,950	155,700	720,567	720,567	
Virus—SV40	Number of Contracts	#	#	#	#	#	
VII US OV-TO	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	7	2	2	2	2	
	Total Relevant Dollars	356,763	361,950	155,700	720,567	720,567	76.81
	Number of Grants	31	24	18	14	14	
	Relevant Grant Dollars	4,342,551	2,458,147	2,452,760	2,771,355	2,199,510	
Vitamin A	Number of Contracts	#	#	#	#	#	
VILGITIIITA	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	31	24	18	14	14	
	Total Relevant Dollars	4,342,551	2,458,147	2,452,760	2,771,355	2,199,510	-12.81
	Number of Grants	7	6	6	5	5	
	Relevant Grant Dollars	993,313	1,569,644	1,443,333	1,262,997	3,288,782	
Vitamin C	Number of Contracts	#	#	#	#	#	
vitarilli U	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	7	6	6	5	5	
	Total Relevant Dollars	993,313	1,569,644	1,443,333	1,262,997	3,288,782	49.46

^{*} Some categories are not mutually exclusive, resulting in overlap in reported funding. As a result, dollar totals may exceed 100 percent of the extramural budget.

[†]Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡]Coding not required or requested.

Source: Research Analysis and Evaluation Branch.

(This table reports funding for grants and contracts only; intramural projects are excluded.)

Special Interest Categories	Counts and Relevant Dollars†	2014	2015	2016	2017	2018	Average Percent Change/Year
	Number of Grants	81	68	46	44	44	
	Relevant Grant Dollars	17,167,368	16,217,405	10,749,178	12,254,831	13,343,235	
Vitamin D	Number of Contracts	#	#	#	#	#	
Vitamin D	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	81	68	46	44	44	
	Total Relevant Dollars	17,167,368	16,217,405	10,749,178	12,254,831	13,343,235	-4.09
	Number of Grants	8	7	4	4	2	
	Relevant Grant Dollars	3,199,595	3,184,755	403,368	20,764	‡	
Vitamina Othar	Number of Contracts	#	#	#	#	#	
Vitamins, Other	Relevant Contract Dollars	‡	‡	‡	‡	‡	
	Total Count	8	7	4	4	2	
	Total Relevant Dollars	3,199,595	3,184,755	403,368	20,764	‡	-60.88

^{*} Some categories are not mutually exclusive, resulting in overlap in reported funding. As a result, dollar totals may exceed 100 percent of the extramural budget.

Source: Research Analysis and Evaluation Branch.

[†]Relevant Dollars = portion of the funded amount relevant to a specific site.

[‡]Coding not required or requested.

Table 17. NCI Funding of Foreign Research Grants and Contracts in FY2018

(This table reports extramural grants and contracts only; intramural grants and contracts are excluded.)

Country/ Cancer Site											
Argentina Site	P20	R01	R21	R33	U01	U10	U24	UH3	UM1	N01	Totals
Grants #	1	1									2
Funding \$	248,000	393,216									641,216
Bladder	124,000										124,000
Cervix		393,216									393,216
Stomach	124,000										124,000
Australia	P20	R01	R21	R33	U01	U10	U24	UH3	UM1	N01	Totals
Grants #			1		2						3
Funding \$			124,967		2,672,415						2,797,382
Childhood Leukemia					394,802						394,802
Colon, Rectum					2,277,613						2,277,613
Neuroblastoma			124,967								124,967
Canada	P20	R01	R21	R33	U01	U10	U24	UH3	UM1	N01	Totals
Grants #		6	1	1		1	1		1	1	12
Funding \$		1,456,473	107,091	258,952		2,407,343	397,387		932,981	810,970	6,371,197
Bladder		4,769				120,367					125,136
Brain						120,367					120,367
Breast				129,476		962,938					1,092,414
Cervix		411,369				60,184					471,553
Colon, Rectum						96,294					96,294
Esophagus						48,147					48,147
Head and Neck						120,367					120,367
Kidney						120,367					120,367
Leukemia		437,856				90,275					528,131
Liver						24,073					24,073
Lung		90,617				120,367					210,984
Melanoma		123,525									123,525
Myeloma						60,184					60,184
Non-Hodgkin Lymphoma		123,525				90,275					213,800
Not Site Specific*			107,091				397,387		932,981	810,970	2,248,429
Ovary						120,367					120,367
Pancreas						48,147					48,147
Prostate		264,812		129,476		120,367					514,655
Stomach						24,073					24,073
Uterus						60,184					60,184
Costa Rica	P20	R01	R21	R33	U01	U10	U24	UH3	UM1	N01	Totals
Grants #										1	1
Funding \$										843,352	843,352
Cervix										843,352	843,352

^{*}Not Site Specific = research that lacks a focus on a particular type of cancer/cancer site (e.g., basic research on the role of a protein in cellular DNA damage in fruit flies and has no cancer site focus; however, it is relevant to cancer research). Source: Research Analysis and Evaluation Branch.

Table 17 (cont'd). NCI Funding of Foreign Research Grants and Contracts in FY2018

(This table reports extramural grants and contracts only; intramural grants and contracts are excluded.)

Country/ Cancer Site											
France	P20	R01	R21	R33	U01	U10	U24	UH3	UM1	N01	Totals
Grants #					2			1			3
Funding \$					1,265,047			513,260			1,778,307
Anus					221,620						221,620
Cervix								513,260			513,260
Not Site Specific*					821,807						821,807
Pharynx					221,620						221,620
Germany	P20	R01	R21	R33	U01	U10	U24	UH3	UM1	N01	Totals
Grants #							1				1
Funding \$							413,604				413,604
Not Site Specific*							413,604				413,604
Italy	P20	R01	R21	R33	U01	U10	U24	UH3	UM1	N01	Totals
Grants #										1	1
Funding \$										25,000	25,000
Not Site Specific*										25,000	25,000
Japan	P20	R01	R21	R33	U01	U10	U24	UH3	UM1	N01	Totals
Grants #										1	1
Funding \$										157,967	157,967
Not Site Specific*										157,967	157,967
Netherlands	P20	R01	R21	R33	U01	U10	U24	UH3	UM1	N01	Totals
Grants #		1									1
Funding \$		224,924									224,924
Breast		224,924									224,924
South Africa	P20	R01	R21	R33	U01	U10	U24	UH3	UM1	N01	Totals
Grants #		1									1
Funding \$		81,956									81,956
Breast		81,956									81,956
Sweden	P20	R01	R21	R33	U01	U10	U24	UH3	UM1	N01	Totals
Grants #		2									2
Funding \$		634,524									634,524
Breast		139,544									139,544
Colon, Rectum		224,100									224,100
Non-Hodgkin Lymphoma		135,440									135,440
Sarcoma, Bone		135,440									135,440
Switzerland	P20	R01	R21	R33	U01	U10	U24	UH3	UM1	N01	Totals
Grants #		1									1
Funding \$		218,655									218,655
Brain		218,655									218,655
United Kingdom	P20	R01	R21	R33	U01	U10	U24	UH3	UM1	N01	Totals
Grants #							1				1
Funding \$							324,000				324,000
Thyroid							324,000				324,000
Total Grants & Contracts	1	12	2	1	4	1	3	1	1	4	30

^{*}Not Site Specific = research that lacks a focus on a particular type of cancer/cancer site (e.g., basic research on the role of a protein in cellular DNA damage in fruit flies and has no cancer site focus; however, it is relevant to cancer research). Source: Research Analysis and Evaluation Branch.

Table 18. Foreign Components of U.S. Domestic Research Grants and Contracts in FY2018

(This table reports extramural grants and contracts only; intramural projects are excluded.)

Country									Fund	ing N	lechanism											Sub-
Country	F30	F31	K01	K07	K08	K99 R00		R03	R13	R21	R25 R35	R37		R42	R44		UG1	UG3	UH3	UM1	N01	total
Australia						1	6						2	1		2						12
Austria							1								2							3
Bahamas											1					1						2
Belgium						1	1					1										3
Botswana																			1			1
Brazil																			2			2
Canada	1			1			33			1		2	3		1	3	1	1				47
China						1	9			1						3		1			1	16
Colombia																			1			1
Denmark							4			1			1									6
Egypt							1				1											2
El Salvador							1															1
Finland							1															1
France							4			4		2				1						11
Georgia				1																		1
Germany							11	1		2		1		1		5						21
Ghana							1									1						2
Greece							1															1
Hungary										1												1
India							3			2								2	2			9
Ireland							3															3
Israel		1					7								1	1						10
Italy							2			2			1			1						6
Japan							5									1					1	7
Kenya		1			1		2												1	1		6
Lebanon							1															1
Malawi										1								1				2
Mexico			1	1			3												1			6
Mongolia																		1				1
Netherlands							7		1	2					1	5						16
Nigeria							1				1					1		1				4
Norway							2															2
Peru							2												1			3
Philippines																			2			2
Poland							1															1
Portugal							1															1
Qatar								1														1

continued

Source: Research Analysis and Evaluation Branch.

Table 18. (cont'd). Foreign Components of U.S. Domestic Research Grants and Contracts in FY2018

(This table reports extramural grants and contracts only; intramural projects are excluded.)

Country										Fun	ding N	lechai	nism											Sub-
Country	F30	F31	K01	K07	K08	K99	R00	R01	R03	R13	R21	R25	R35	R37	R41	R42	R44	U01	UG1	UG3	UH3	UM1	N01	total
Russia											7													7
Rwanda				1																				1
Senegal																		1						1
Singapore								1					1		1									3
South Africa																		1			2	1		4
South Korea								1										2						3
Spain			1					7							1									9
Sweden								3																3
Switzerland								2							1			2						5
Taiwan								2			1									1				4
Tanzania U Rep								1			1													2
Uganda								1												2	1			4
United Kingdom								12				1		2				2						17
Vietnam											1													1
Zambia								1																1
Zimbabwe																						1		1
Totals	1	2	2	4	1	2	1	145	2	1	27	4	1	8	10	2	5	33	1	10	14	3	2	281*

^{*}Because many grants have multiple foreign contributors, the total count (281) is greater than the total number (230) of grants and contracts.

Source: Research Analysis and Evaluation Branch.

Appendix A: Activities of the National Cancer Advisory Board (NCAB)

Originally established as the National Advisory Cancer Council in 1937, the NCAB consists of 18 members who are appointed by the U.S. President and 12 nonvoting ex officio members. The NCAB advises, assists, consults with, and makes recommendations to the Secretary, HHS, and to the NCI Director with respect to the activities carried out by and through the Institute and on policies pertaining to these activities. The NCAB is authorized to recommend support for grants and cooperative agreements following technical and scientific peer review. The DEA Director serves as the Executive Secretary of the NCAB. In fulfilling its role as the locus for second-level review of all peer reviewed applications, the Board reviewed a total of 15,120 applications in FY2018 requesting \$5,142,273,938 in direct costs with appropriated funds. Additionally, the Board reviewed seven FDA applications in FY2018.

The Board heard presentations, discussed, and provided advice on a variety of topics and NCI activities in FY2018, such as:

- NCI Director's Report
- President's Cancer Panel Report
- Legislative Report
- High-Quality Risk-Based Cervical Cancer Screening for the U.S. and the World
- Patient-Reported Outcomes Version of the Common Terminology Criteria for Adverse Events (PRO-CTCAE)
- Early Career Investigators and NCI Planning
- Annual Delegations of Authority
- Next Steps in Studying the Human Microbiome in Epidemiologic Studies

- Next Generation Sequencing (NGS) Coverage Determination FDA Approval of NGS-Based OncoPanels
- T-Cells as a Drug for the Personalized Immunotherapy of Cancer
- Inter- and Intra-Tumoral Heterogeneity in Pediatric Sarcomas
- Ad Hoc Data Science Working Group Interim Report
- Ad Hoc Global Health Working Group Final Report
- Ad Hoc Subcommittee on Global Cancer Research Report
- Ad Hoc Subcommittee on Population Science, Epidemiology and Disparities Report

As part of its mandate for oversight of NCI activities, the NCAB receives regular updates from the NCI Director, the NCI Office of Legislation and Congressional Activities, and the President's Cancer Panel.

Another major role of the Board is to monitor the overall advisory and oversight activities of the NCI as a whole. In that regard, it annually reviews the site visit outcomes of intramural review and the extramural RFA and RFP concepts acted on by the BSA. The NCAB also participates in the framing of the annual NCI Bypass Budget and considers the impact of actualized priorities as expressed by the allocation of the annual operating budget.

The full text of recent NCAB meeting summaries is available on the NCI website at: http://deainfo.nci.nih.gov/advisory/ncab/ncabmeetings.htm

Appendix B: Activities of the Board of Scientific Advisors (BSA)

The BSA provides scientific advice on a wide variety of matters concerning scientific program policy, progress, and future direction of NCI's extramural research programs, and concept review of extramural program initiatives.

In addition to approving a number of extramural program initiatives (see below), the BSA also heard presentations on the following in FY2018:

- NCI Director's Report
- Legislative Report
- President's Cancer Panel Report
- High-Quality Risk-Based Cervical Cancer Screening for the U.S. and the World
- Patient-Reported Outcomes Version of the Common Terminology Criteria for Adverse Events (PRO-CTCAE)
- Early Career Investigators and NCI Planning
- Next Generation Sequencing (NGS) Coverage Determination-FDA Approval of NGS-Based OncoPanels
- T-Cells as a Drug for the Personalized Immunotherapy of Cancer
- Ad Hoc Subcommittee on Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS) Malignancy Report

RFA Concepts Approved

Office of the Director

- Investigation of the Transmission of Kaposi Sarcoma-Associated Herpesvirus (KSHV)
- Pathway to Independence Awards for Outstanding Early-Stage Postdoctoral Fellows (K88/R00)

Division of Cancer Control and Population Sciences

- Improving the Reach and Quality of Cancer Care in Rural Populations
- Implementation Science Centers for Cancer Control (IS-C3)
- Communications and Decision Making in the Context of Risk and Uncertainty for Individuals with Inherited Cancer Syndromes

RFA/Cooperative Agreements Approved

Office of the Director

NCI Awardee Skills Development Consortium (NASDC)

Division of Cancer Biology

 Immuno-Oncology Translation Network (IOTN)

Division of Cancer Prevention

Cancer Preventive Agent Development Program: Early Phase Clinical Research

Division of Cancer Control and Population Sciences

- Tobacco Cessation Interventions Among People Living with HIV/AIDS
- Research to Develop Evidence-Based Approaches to Patient Engagement
- Patient Engagement for Priority Cancer Sequencing (PE4PC-Seq)

RFA Re-Issuance Approved

Office of the Director

- Small Business Innovation Research (SBIR)
 Phase II Bridge Awards to Accelerate the
 Development of Cancer-Focused Technologies Toward Commercialization
- U.S.-China Program for Biomedical Collaborative Research

Division of Cancer Prevention

NCI Community Oncology Research Program

RFA/Cooperative Agreements Re-Issuances Approved

Office of the Director

 AIDS and Cancer Specimen Resource (ACSR)

Division of Cancer Treatment and Diagnosis

- Cooperative Human Tissue Network (CHTN)
- Early Clinical Trials for New Anticancer Agents with Phase 1 and 2 Emphasis

Appendix C: Activities of the Frederick National Laboratory Advisory Committee to the NCI (FNLAC)

Originally established as the NCI-Frederick Advisory Committee in 2011, the FNLAC consists of up to 16 members, including the Chair, appointed by the Director of NCI; nonvoting representatives from the National Cancer Advisory Board, the NCI Board of Scientific Advisors, and the NCI Board of Scientific Counselors (Basic Sciences and Clinical Sciences and Epidemiology); and nonvoting *ex officio* members, including NCI Deputy Directors, selected NCI Division Directors, and the Associate Director of the Frederick National Laboratory for Cancer Research (FNLCR).

The NCI-Frederick Cancer Research Center (FCRC) in Frederick, Maryland, was established in 1972 as a Government-owned Contractor-operated (GOCO) facility. In 1975, the FCRC was designated as a Federally Funded Research and Development Center (FFRDC) to provide a unique national resource within the biomedical research community for the development of new technologies and the translation of basic science discoveries into novel agents for the prevention, diagnosis, and treatment of cancer and AIDS. In 2012, the FCRC was renamed the FNLCR.

The FNLAC reviews the state of research (extramural and intramural) at the FNLCR and makes recommendations for the best use of its capabilities and infrastructure. Specifically, the committee reviews major new projects proposed to be performed at the FNLCR and advises the Director, NCI, and Associate Director, FNLCR, about the intrinsic merit of the projects and about whether they should be performed at the FNLCR. In addition, the Committee periodically reviews the existing portfolio of projects at the FNLCR, evaluates their productivity, helps determine which of these projects should be transitioned to more

conventional mechanisms of support (i.e., grants, contracts, and/or cooperative agreements), and which should be considered for termination.

The Committee heard presentations, discussed, and provided advice on a variety of topics and NCI activities in FY2018, such as:

- NCI Director's Report
- RAS Initiative
- National Cryo-EM Facility (NCEF)
- Chemical Biology Consortium
- LDHA
- P97
- Discovery of Subnanomolar Inhibitors of Mcl-1
- FNLCR Operational Overview
- Current Operations and Future Plans at the Frederick National Laboratory
- NCI Experimental Therapeutics Program
- Role of Molecular Pharmacodynamics in both Drug Discovery and Development
- NCI Early Therapeutic Trials Network
- Accelerating Therapeutics for Opportunities in Medicine (ATOM)
- NCI-Department of Energy (DOE) Collaborations Working Group Report

Another major role of the FNLAC is to monitor and evaluate contractor-initiated research within the span of a contract period. The Committee considers proposed research and provides advice as to whether the FNLCR is an appropriate locus for carrying out the proposed projects, and that they are consistent with the mission of the National Cancer Institute.

The full text of recent FNLAC meeting summaries is available on the NCI website at: https://deainfo.nci.nih.gov/advisory/fac/fac.htm.

Appendix D: List of Chartered Boards, Councils, and Committees

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Safety and Health

The Honorable Rick Perry	
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Mary Lou Smith, J.D., M.B.A	Research Advocacy Network
Ian M. Thompson, Jr., M.D.	CHRISTUS Santa Rosa Medical Center Hospital
, , ,	
Cheryl L. Walker, Ph.D., A.T.S., F.A.A.A.S	Baylor College of Medicine
,	
,	The University of Chicago
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Jeremy N. Rich, M.D., M.H.Sc	
A. Oliver Sartor, M.D	
	Inova Schar Cancer Institute
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	University of California, Los Angeles
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Sue Jinks-Robertson, Ph.D.	Duke University Medical Center
Jonathan Karn, Ph.D	
Paul F. Lambert, Ph.D.* University	of Wisconsin School of Medicine and Public Health
· · · · · · · · · · · · · · · · · · ·	University of Massachusetts Medical School
	Mount Sinai School of Medicine
,	
Anna K. Mapp, Ph.D.*	University of Michigan
,	University of California, San Diego
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,	University of Pennsylvania
*	Cincinnati Children's Hospital Medical Center
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,	
	Johns Hopkins University
Dong-Er Zhang, Ph.D.	University of California, San Diego

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^{*}pending appointment

Frederick National Laboratory Advisory Committee to the NCI

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U	HG.	ш

Lawrence J. Marnett, Ph.D	Vanderbilt University Medical Center
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Clinical Trials and Translational Rese	arch Advisory Committee

Chair

Debra L. Barton, Ph.D., R.N., F.A.A Susan M. Blaney, M.D	National Brain Tumor Society N
	Indiana University School of Medicine
	Pancreatic Cancer Action Network
	Flatiron Health Thomas Jefferson University
· · · · · · · · · · · · · · · · · · ·	Louisiana State University Health Sciences Center
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•	
	Beckman Research Institute of City of Hope
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^{*}pending appointment

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	St. Jude Children's Research Hospital
	The George Washington University
	Memorial Sloan Kettering Cancer Center
,	
Patti Wiley, M.B.A	On the Wings of Angels Pediatric Cancer Foundation
Scientific Review Officer	
Shamala K. Srinivas, Ph.D	
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David J. Grdina, Ph.D., M.B.A	
-	Vanderbilt University
	Harvard Medical School
,	University of Michigan, Ann Arbor
•	
	N
Elizabeth A. Platz, Sc.D., M.P.H	

Mary Elaine Reyland, Ph.D	University of Colorado, Denver
Erle S. Robertson, Ph.D.	University of Pennsylvania
Melanie E. Royce, M.D., Ph.D.	The University of New Mexico
Kathryn H. Schmitz, Ph.D., M.P.H	University of Pennsylvania
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Luzhe Sun, Ph.D.	The University of Texas Health Science Center
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Chair

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Steven J. Kridel, Ph.D.	
Douglas F. Lake, Ph.D.	
,	
Upender Manne, Ph.D	University of Alabama at Birmingham
· · · · · · · · · · · · · · · · · · ·	
Edward A. Sausville, M.D., Ph.D., F.A.C.P.	University of Maryland, Baltimore
	. Sanford Burnham Prebys Medical Discovery Institute
Bakhos A. Tannous, Ph.D	Massachusetts General Hospital
,	
•	Indiana University School of Medicine
Helmut Zarbl, Ph.D	

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Subcommittee J - Career Development

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Marinela Capanu, Ph.D	
Dan A. Dixon, Ph.D.	
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	The University of Texas Medical Branch at Galveston
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Gang Zhou, Ph.D.	Augusta University

Scientific Review Officer

Appendix E: NCI Initial Review Group Consultants

1. Consultants Serving as Temporary Members on IRG Subcommittees in FY2018

A		
	Agazie, Yehenew M., Ph.D., D.V.M	University of Connecticut School of Dental Medicine
B		
	Bahary, Nathan, M.D., Ph.D. Bakkenist, Christopher J., Ph.D. Bar, Eli E., Ph.D. Basu, Sujit, M.D., Ph.D. Bepler, Gerold, M.D., Ph.D. Bjornsti, Mary-Ann, Ph.D. Black, Jennifer D., Ph.D. Bondy, Melissa L., Ph.D. Boussiotis, Vassiliki A., M.D., Ph.D. Buchsbaum, Donald J., Ph.D.	Baylor College of Medicine University of Pittsburgh University of Pittsburgh Case Western Reserve University The Ohio State University Barbara Ann Karmanos Cancer Institute The University of Alabama at Birmingham University of Nebraska Medical Center Baylor College of Medicine Beth Israel Deaconess Medical Center The University of Alabama at Birmingham Johns Hopkins University
C		
	Campagnola, Paul J., Ph.D. Cance, William G., M.D. Carpizo, Darren R., M.D., Ph.D. Carroll, Martin, M.D. Carroll, Raymond J., Ph.D. Chen, Jiandong, Ph.D. Chen, Wei, Ph.D. Cho, Sang Hyun, Ph.D. Clapper, Margie L., Ph.D. Costanzo, Erin, Ph.D.	Kaiser Foundation Research Institute University of Wisconsin-Madison The University of Arizona Rutgers, The State University of New Jersey University of Pennsylvania Texas A&M University Moffitt Cancer Center Wayne State University The University of Texas MD Anderson Cancer Center Fox Chase Cancer Center University of Wisconsin-Madison Wayne State University
D	Deng, Yibin, M.D., Ph.D Ding, George Xiao, Ph.D	

Aj	Appendix E-1: Consultants Serving as Temporary Members on IRG Subcommittees in FY2018			
	Druley, Todd E., M.D., Ph.D. Washington University in St. Louis Dudley, Andrew C., Ph.D. University of Virginia Duerksen-Hughes, Penelope J., Ph.D. Loma Linda University			
Ε				
F	Edelman, Martin J., M.D. Ehlers, Shawna L., Ph.D. Mayo Clinic, Rochester El-Ashry, Dorraya, Ph.D. University of Maryland, Baltimore Mayo Clinic, Rochester El-Ashry, Dorraya, Ph.D. Children's Hospital of Los Angeles			
	Fan, Meiyun, Ph.D. University of Tennessee Health Science Center Fennessy, Fiona, M.D., Ph.D. Harvard Medical School Fiering, Steven, Ph.D. Dartmouth College Forero, Andres, M.D. The University of Alabama at Birmingham Frey, Alan B., Ph.D. New York University School of Medicine Friese, Christopher R., Ph.D., R.N., F.A.A.N. University of Michigan at Ann Arbor			
G	Goel, Ajay, Ph.D			
Н				
	Haimovitz-Friedman, Adriana, Ph.D			
	Ignatenko, Natalia A., Ph.D			
J	Jackson, Mark W., Ph.D			
K	Kalin, Tanya, M.D., Ph.D. Cincinnati Children's Hospital Medical Center Kapadia, Farzana, Ph.D., M.P.H. New York University Kelly, Kimberly A., Ph.D. University of Virginia Khaled, Annette R., Ph.D. University of Central Florida Killackey, Maureen A., M.D. Memorial Sloan Kettering Cancer Center			

	Knudsen, Karen E., Ph.D. Thomas Jefferson University Krogsgaard, Michelle, Ph.D. New York University School of Medicine Krohn, Kenneth A., Ph.D. Oregon Health & Science University Kumar, Addanki P., Ph.D. The University of Texas Health Science Center at San Antonio
	Lee, Sean B., Ph.D. Levy, David E., Ph.D. Libutti, Steven K., M.D. Liu, Jianguo, Ph.D. Saint Louis University of New Jersey Liu, Jianguo, Ph.D. Liu, Xiaoqi, Ph.D. Lizee, Gregory A., Ph.D. The University of Texas MD Anderson Cancer Center Loescher, Lois J., Ph.D. The University of Arizona Lopez, Ana Maria, M.D., M.P.H. Tulane University of Louisiana New York University School of Medicine Rutgers, The State University of New Jersey Liu, Jianguo, Ph.D. Saint Louis University of Kentucky Lizee, Gregory A., Ph.D. The University of Arizona Lopez, Ana Maria, M.D., M.P.H. The University of Utah
M	Markiewski, Maciej M., M.D., Ph.D. Matsuyama, Robin K., Ph.D. McCarthy, James B., Ph.D. Menon, Usha, Ph.D., R.N., F.A.A.N. Mermelstein, Robin J., Ph.D. Meroueh, Samy, Ph.D. Indiana University-Purdue University at Indianapolis Miao, Yubin, Ph.D. Mishra, Manoj K., Ph.D. Mooney, Kathleen H., Ph.D. Mortimer, Joanne E., M.D. Markiewski, Maciej M., M.D. Virginia Commonwealth University of Minnesota University of South Florida University of South Florida University of Illinois at Chicago Meroueh, Samy, Ph.D. University of Colorado, Denver Mishra, Manoj K., Ph.D. Alabama State University Mooney, Kathleen H., Ph.D. Beckman Research Institute of City of Hope Murphy, Maureen E., Ph.D. Wistar Institute Murtaugh, Lewis C., Ph.D.
0	Nakshatri, Harikrishna, Ph.D
P	Parsons, Donald W., M.D., Ph.D. Pestell, Richard G., M.D., Ph.D. Baylor College of Medicine Baylor College of Medicine Bestell, Richard G., M.D., Ph.D. Baruch S. Blumberg Institute Pine, Sharon R., Ph.D. Rutgers, State University of New Jersey Platz, Elizabeth A., M.P.H., Sc.D. Johns Hopkins University

Total Number of Reviewers: 136*

Zhou, Gang, Ph.D. — Augusta University Zu, Youli, M.D., Ph.D. — Methodist Hospital Research Institute

^{*}Approximately 23 reviewers served more than once.

2. Consultants Serving as *Ad Hoc* Committee Members on IRG Site Visit Teams in FY2018

A		
	Adjei, Alex A., M.D., Ph.D.	
		. The University of Texas Southwestern Medical Center
	Anant, Shrikant, Ph.D.	
В		
		Fred Hutchinson Cancer Research Center
	* *	
	•	The University of Texas MD Anderson Cancer Center
		University of Nebraska Medical Center
		The University of Alabama at Birmingham
		Icahn School of Medicine at Mount Sinai
		University of Virginia
		The University of Texas Southwestern Medical Center
	Buchsbaum, Donald J., Th.D.	The Oniversity of Alabama at Birmingham
C		
	Carbone, Michele, M.D., Ph.D.	University of Hawaii at Manoa
	Carson, William E., M.D.	The Ohio State University
	Champion, Victoria L., Ph.D	Indiana University-Purdue University at Indianapolis
		Duke University
		Beth Israel Deaconess Medical Center
		University of California, Davis
	Chiocca, E. Antonio, M.D., Ph.D.	Brigham and Women's Hospital
	* '	The University of Texas MD Anderson Cancer Center
	Clapper, Margie L., Ph.D.	Fox Chase Cancer Center
	Clurman, Bruce E., M.D., Ph.D	Fred Hutchinson Cancer Research Center

	Davisson, Vincent J., Ph.D. De Marzo, Angelo M., M.D., Ph.D. Dignan, Mark B., Ph.D., M.P.H. Djeu, Julie Y., Ph.D.	
E	Ellerbeck, Edward F., M.D., M.P.H	Brown UniversityUniversity of Kansas Medical CenterUniversity of Miami School of Medicine
F	Ferris, Robert L., M.D., Ph.D. Figlin, Robert A., M.D. Fisher, Richard I., M.D. Fitzgerald-Bocarsly, Patricia, Ph.D. Flocke, Susan A., Ph.D. Fulton, Amy M., Ph.D.	
G	Gillies, Robert J., Ph.D. Gimotty, Phyllis A., Ph.D. Giordano, Sharon H., M.D., M.P.H. Golemis, Erica A., Ph.D. Gore, Steven D., M.D. Gorlick, Richard G., M.D. Govindan, Ramaswamy, M.D.	Roswell Park Cancer Institute Moffitt Cancer Center University of Pennsylvania The University of Texas MD Anderson Cancer Center Fox Chase Cancer Center Yale University The University of Texas MD Anderson Cancer Center Washington University in St. Louis University of Southern California
H	Halabi, Susan, Ph.D. Hanash, Samir M., M.D., Ph.D. Harrison, Anita L., M.P.A. Haura, Eric B., M.D. Hawk, Ernest, M.D., M.P.H. Hinds, Philip W., Ph.D. Hochster, Howard S., M.D.	

	Howe, Philip H., Ph.D. Hsu, Edward W., Ph.D. Huang, Tim HM., Ph.D. The Univ	
J	J	
	Johnston, Colette	Roswell Park Cancer Institute Consultant Cutaneous Lymphoma Foundation
K	Kane, Madeleine A., M.D., Ph.D. Kastan, Michael B., M.D., Ph.D. Kraft, Andrew S., M.D.	
L	L	
	Law, Wendy, Ph.D. Libutti, Steven K., M.D. Licht, Jonathan D., M.D. List, Marcy A., Ph.D. Loughran, Thomas P., M.D.	
M	M	
	Marshall, James, Ph.D. Matei, Daniela E., M.D. Mermelstein, Robin J., Ph.D. Milam, Joel E., Ph.D. Miller, Jeffrey S., M.D. Mills, Alea A., Ph.D. Mitchell, Beverly S., M.D. Moore, Anna, Ph.D. Mori, Motomi, Ph.D. Mrksich, Milan, Ph.D. Murphy, Maureen E., Ph.D. Murphy, William J., Ph.D.	Fred Hutchinson Cancer Research Center Roswell Park Cancer Institute Northwestern University at Chicago University of Illinois at Chicago University of Southern California University of Minnesota Cold Spring Harbor Laboratory Stanford University Michigan State University Oregon Health & Science University Northwestern University Wistar Institute University of California, Davis
N	N	
		Indiana University-Purdue University at Indianapolis The University of Utah

Appendix E-2: Consultants Serving as Ad Hoc Committee Members in FY2018		
	Neuhouser, Marian L., Ph.D. Fred Hutchinson Cancer Research Center Newton, Michael A., Ph.D. University of Wisconsin-Madison	
0		
	Olshan, Andrew, Ph.D The University of North Carolina at Chapel Hill	
P		
	Parsons, Donald W., M.D., Ph.D. Pasche, Boris, M.D., Ph.D. Wake Forest University Health Sciences Patierno, Steven R., Ph.D. Duke University Pestell, Richard G., M.D., Ph.D., M.B.B.S. Baruch S. Blumberg Institute Pili, Roberto, M.D. Indiana University-Purdue University at Indianapolis Pollak, Kathryn I., Ph.D. Duke University Prystowsky, Michael B., M.D., Ph.D. Albert Einstein College of Medicine	
R		
	Rathmell, Jeffrey C., Ph.D. Ratliff, Timothy L., Ph.D. Purdue University, West Lafayette Remick, Scot C., M.D. Maine Medical Center Roberts, Charles, M.D., Ph.D. St. Jude Children's Research Hospital	
S		
	Schwartz, Ann G., Ph.D., M.P.H. Sentman, Charles L., Ph.D. Serody, Jonathan Stuart, M.D. The University of North Carolina at Chapel Hill Shields, Anthony F., M.D., Ph.D. Showe, Louise C., Ph.D. Wistar Institute Shyr, Yu, Ph.D. Vanderbilt University Medical Center Simon, Melissa A., M.D., M.P.H. Northwestern University at Chicago Sundberg, Eric, Ph.D. University of Maryland, Baltimore	
T		
	Teitell, Michael A., M.D., Ph.D. University of California, Los Angeles Tew, Kenneth D., Ph.D., D.S.C. Medical University of South Carolina Thompson, Patricia A., Ph.D. Stony Brook University	
U		
	Unger, Evan C., M.D	
W		
	Wei, Alexander, Ph.D	

_ Appendix E-2: Consultants Serving as Ad Hoc Committee Members in FY2018

	Weissman, Bernard E., Ph.D.	The University of North Carolina at Chapel Hill
	Wheeler, David A., Ph.D.	Baylor College of Medicine
	Willett, Christopher G., M.D.	Duke University
	Wingard, John R., M.D.	University of Florida
Y		
	Yee, Douglas, M.D.	University of Minnesota
		University of Hawaii at Manoa
	Yuan, Jian-Min, M.D., Ph.D., M.P.H.	University of Pittsburgh
Z		
		Optumhealth Care Solutions, IncVanderbilt University

Total Number of Reviewers: 139*

^{*}Approximately 46 reviewers served more than once.

3. Consultants Serving on Special Emphasis Panels (SEPs) in FY 2018

A

Abbate, Antonio, M.D., Ph.D.	Virginia Commonwealth University
	University of Arkansas for Medical Science
	Washington University, St. Louis
, ,	
	M.B.B.S The Ohio State University
	The University of Texas MD Anderson Cancer Center
	University of Virginia
Achenie, Luke, Ph.D.	
Adams, Sarah F., M.D.	The University of New Mexico Health Science Center
Adie, Steven G., Ph.D.	
Adler, Adam J., Ph.DUnive	rsity of Connecticut School of Medical and Dental Medicine
Adusumilli, Prasad S., M.D	
Aft, Rebecca L., M.D., Ph.D	
Agarwal, Rajesh, Ph.D	University of Colorado, Denver
Agazie, Yehenew M., Ph.D., D.V.M	
Aghi, Manish, M.D., Ph.D	University of California, San Francisco
	Florida International University
Agrawal, Lokesh, Ph.D	
Ahmad, Kamran, Ph.D	Fred Hutchinson Cancer Research Center
Ahn, Chul W., Ph.D.	The University of Texas Southwestern Medical Center
Ahn, Jaeil, Ph.D	Georgetown University
Ahrens, Eric T., Ph.D.	University of California, San Diego
,	University of Virginia
* *	
, ,	Vanderbilt University
	St. Jude Children's Research Hospital
	Providence Portland Medical Center
	The Pennsylvania State University, University Park
	New York University
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Zhang, Yuesheng, M.D., Ph.D	
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	Northwestern University at Chicago
	University of Colorado, Denver
	The University of Georgia
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	The University of Texas Health Science Center at Houston
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, 6,	Beth Israel Deaconess Medical Center
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, 6, ,	Yibert Ellistein College of Wedicine
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Total Number of Reviewers: 2,089*

^{*}Approximately 931 reviewers served more than once.

Appendix F: NCI Grant Mechanisms and Descriptions

Below is a brief description of different NIH funding mechanisms. Additional information on grants, contracts, and extramural policy notices may be

found by viewing the NCI DEA Web page on Grants Guidelines and Descriptions at https://deainfo.nci.nih.gov/flash/awards.htm.

C Sori	es: Research Construction Programs
C06	Research Facilities Construction Grants To provide matching Federal funds, up to 75 percent, for construction or major remodeling to create new research facilities, which in addition to basic research laboratories may include, under certain circumstances, animal facilities and/or limited clinical facilities where they are an integral part of an overall research effort.
D Serie	es: Institutional Training and Director Program Projects
D43	International Training Grants in Epidemiology To improve and expand epidemiologic research and the utilization of epidemiology in clinical trials and prevention research in foreign countries through support of training programs for foreign health professionals, technicians, and other health care workers.
DP1	NIH Director's Pioneer Award (NDPA) To support individuals who have the potential to make extraordinary contributions to medical research. The NIH Director's Pioneer Award is not renewable.
DP2	NIH Director's New Innovator Awards To support highly innovative research projects by new investigators in all areas of biomedical and behavioral research.
F Serie	s: Fellowship Programs
F30	Ruth L. Kirschstein National Research Service Award (NRSA) for Individual Predoctoral M.D./ Ph.D. Degree Fellows To provide predoctoral individuals with supervised research training in specified health and health-related areas leading toward a research degree (e.g., Ph.D.).
F31	Ruth L. Kirschstein National Research Service Award for Predoctoral Individuals To provide predoctoral research training to individuals to broaden their scientific background and extend their potential for research in specified health-related areas.
F32	Ruth L. Kirschstein National Research Service Award for Individual Postdoctoral Fellows To provide postdoctoral research training to individuals to broaden their scientific background and extend their potential for research in specified health-related areas.
F33	Ruth L. Kirschstein National Research Service Award for Senior Fellows To provide opportunities for experienced scientists to make major changes in the direction of research careers, broaden scientific backgrounds, acquire new research capabilities, enlarge command of an allied research field, or take time from regular professional responsibilities to increase capabilities to engage in health-related research.

F99/ K00

The NCI Predoctoral to Postdoctoral Fellow Transition Award

To encourage and retain outstanding graduate students who have demonstrated potential and interest in pursuing careers as independent cancer researchers.

K Series: Career Development Programs

K01 The Howard Temin Award (no longer supported through use of the K01 by the NCI; see the K99/R00)

A previously used NCI-specific variant of the NIH Mentored Research Scientist Development Award that was designed to provide research scientists with an additional period of sponsored research experience as a way to gain expertise in a research area new to the applicant or in an area that would demonstrably enhance the applicant's scientific career.

K01 Mentored Career Development Award for Underrepresented Minorities

To support scientists committed to research who are in need of both advanced research training and additional experience.

K05 Established Investigator Award in Cancer Prevention, Control, Behavioral, and Population Research

To support scientists qualified to pursue independent research that would extend the research program of the sponsoring institution, or to direct an essential part of this program.

K07 Cancer Prevention, Control, Behavioral, and Population Sciences Career Development Award

To support the postdoctoral career development of investigators who are committed to academic research careers in cancer prevention, control, behavioral, epidemiological, and/or the population sciences. It supports up to 5 years of combined didactic and supervised (i.e., mentored) research experiences to acquire the methodological and theoretical research skills needed to become an independent scientist. The very broad nature of the prevention, control, and population sciences makes it applicable to those individuals doctorally trained in the basic sciences, medicine, behavioral sciences, and/or public health. The K07 award has been expanded from a scope limited to "preventive oncology" to include the entire spectrum of fields that are of vital importance to cancer prevention and control such as nutrition, epidemiology, and behavioral sciences.

K08 Mentored Clinical Scientists Development Award

To provide the opportunity for promising medical scientists with demonstrated aptitude to develop into independent investigators, or for faculty members to pursue research in categorical areas applicable to the awarding unit, and to aid in filling the academic faculty gap in specific shortage areas within U.S. health professions institutions.

KO8 Mentored Clinical Scientists Development Award—Minorities in Clinical Oncology

A specialized type of Mentored Clinical Scientist Developmental Award (K08) that supports the development of outstanding clinical research scientists, with this type being reserved for qualified individuals from underrepresented minority groups. Both types of K08 awards support periods of specialized study for clinically trained professionals who are committed to careers in research and who have the potential to develop into independent investigators. The K08 awards for Minorities in Clinical Oncology are distinct and important because they provide opportunities for promising medical scientists with demonstrated aptitudes who belong to underrepresented minority groups to develop into independent investigators, or for faculty members who belong to underrepresented minority groups to pursue research aspects of categorical areas applicable to the awarding unit(s), and aid in filling the academic faculty gaps in these shortage areas within U.S. health professions institutions.

K12 Institutional Clinical Oncology Research Career Development Award

To support a newly trained clinician appointed by an institution for development of independent research skills and experience in a fundamental science within the framework of an interdisciplinary research and development program.

K18 The Career Enhancement Award

Provides either full-time or part-time support for experienced scientists who would like to broaden their scientific capabilities or to make changes in their research careers by acquiring new research skills or knowledge. Career enhancement experiences supported by this award should usually last no more than 1 year.

K22 The NCI Transition Career Development Award for Underrepresented Minorities

To provide support to outstanding newly trained basic or clinical investigators to develop their independent research skills through a two-phase program: an initial period involving an intramural appointment at the NIH and a final period of support at an extramural institution. The award is intended to facilitate the establishment of a record of independent research by the investigator to sustain or promote a successful research career.

K22 The NCI Scholars Program

To provide an opportunity for outstanding new investigators to begin their independent research careers, first within the special environment of the NCI and then at an institution of their choice. Specifically, this program provides necessary resources to initiate an independent research program of 3 to 4 years at the NCI, followed by an extramural funding mechanism (K22) to support their research program for 2 years at the extramural institution to which they are recruited.

K23 Mentored Patient-Oriented Research Career Development Award

To provide support for the career development of investigators who have made a commitment to focus their research endeavors on patient-oriented research. This mechanism provides support for a 3-year minimum up to a 5-year period of supervised study and research for clinically trained professionals who have the potential to develop into productive clinical investigators.

K23 Mentored Patient-Oriented Research Career Development Award for Underrepresented Minorities

To support the career development of investigators who have made a commitment to focus their research on patient-oriented research. This mechanism provides support for a period of supervised study and research for clinically trained professionals who have the potential to develop into productive clinical investigators in patient-oriented research.

K24 Mid-Career Investigator Award in Patient-Oriented Research

To provide support for clinicians to allow them protected time to devote to patient-oriented research and to act as mentors for beginning clinical investigators. The target candidates are outstanding clinical scientists engaged in patient-oriented research who are within 15 years of their specialty training, who can demonstrate the need for a period of intensive research focus as a means of enhancing their clinical research careers, and who are committed to mentoring the next generation of clinical investigators in patient-oriented research.

K25 Mentored Quantitative Research Career Development Award

This award allows an independent scientist in a highly technical field of research to identify an appropriate mentor with extensive experience in cancer research and to receive the necessary training and career development required to become involved in multidisciplinary cancer research.

R00 NIH Pathway to Independence (PI) Award The Pathway to Independence Award, w

The Pathway to Independence Award, which is part of the NIH Roadmap Initiative but is known as the Howard Temin Award within the NCI, will provide up to 5 years of support consisting of two phases. The initial phase will provide 1 to 2 years of mentored support for highly promising postdoctoral research scientists. This phase will be followed by up to 3 years of independent support contingent on securing an independent research position. Award recipients will be expected to compete successfully for independent R01 support from the NIH during the career transition award period. The PI Award is limited to postdoctoral trainees within 5 years of completion of their training who propose research relevant to the mission of one or more of the participating NIH Institutes and Centers.

L Series: Loan Repayment Program

L30 Loan Repayment Program for Clinical Researchers

To provide for the repayment of the educational loan debt of qualified health professionals involved in clinical research. Qualified health professionals who contractually agree to conduct qualified clinical research are eligible to apply for this program.

L32 Loan Repayment Program for Clinical Researchers From Disadvantaged Backgrounds

To provide for the repayment of the educational loan debt of qualified health professionals from disadvantaged backgrounds involved in clinical research. Qualified health professionals from disadvantaged backgrounds who contractually agree to conduct qualified clinical research are eligible to apply for this program.

L40 Loan Repayment Program for Pediatric Research

To provide for the repayment of the educational loan debt of qualified health professionals involved in research directly related to diseases, disorders, and other conditions in children. Qualified health professionals who contractually agree to conduct qualified pediatric research are eligible to apply for this program. (See the NIH Guidelines about Loan Repayment at http://www.lrp.nih.gov/index.aspx.)

L50 Loan Repayment Program for Contraception and Infertility Research

To provide for the repayment of the educational loan debt of qualified health professionals (including graduate students) who contractually agree to commit to conduct qualified contraception and/or infertility research.

L60 Loan Repayment Program for Health Disparities Research

To provide for the repayment of the educational loan debt of qualified health professionals involved in minority health and health disparities research, for the purposes of improving minority health and reducing health disparities. Qualified health professionals who contractually agree to conduct qualified minority health disparities research or other health disparities research are eligible to apply for this program.

P Series: Research Program Projects and Centers

P01 Research Program Projects

To support multidisciplinary or multifaceted research programs that have a focused theme. Each component project should be directly related to and contribute to the common theme.

P20 Exploratory Grants

To support planning for new programs, expansion or modification of existing resources, and feasibility studies to explore various approaches to the development of interdisciplinary programs that offer potential solutions to problems of special significance to the mission of the NIH. These exploratory studies may lead to specialized or comprehensive centers.

P30 Center Core Grants

To support shared use of resources and facilities for categorical research by investigators from different disciplines who provide a multidisciplinary approach to a joint research effort, or by investigators from the same discipline who focus on a common research problem. The core grant is integrated with the Center's component projects or Program Projects, though funded independently from them. By providing more accessible resources, this support is expected to ensure greater productivity than that provided through the separate projects and Program Projects.

P41 Biotechnology Resource Grants

To support biotechnology resources available to all qualified investigators without regard to the scientific disciplines or disease orientations of their research activities or specifically directed to a categorical program area.

P50 Specialized Center Grants

To support any part of the full range of research and development from very basic to clinical; may involve ancillary supportive activities such as protracted patient care necessary to the primary research or R&D effort. This spectrum of activities comprises a multidisciplinary attack on a specific disease or biomedical problem area. These grants differ from Program Project grants in that they are usually developed in response to an announcement of the programmatic needs of an Institute or Division, and subsequently receive continuous attention from its staff. Centers also may serve as regional or national resources for special research purposes.

R Series: Research Projects

R01 Research Project

Grants are awarded to institutions to allow a Principal Investigator to pursue a scientific focus or objective in his or her area of interest and competence. Institutional sponsorship assures the NIH that the institution will provide facilities necessary to conduct the research and will be accountable for the grant funds. Applications are accepted for health-related research and development in all areas within the scope of the NIH's mission.

R03 | Small Research Grants

Small grants provide research support, specifically limited in time and amount, for activities such as pilot projects, testing of new techniques, or feasibility studies of innovative, high-risk research, which would provide a basis for more extended research.

R13 Conferences

The NIH provides funding for conferences to coordinate, exchange, and disseminate information related to its program interests. Generally, such awards are limited to participation with other organizations in supporting conferences rather than provision of sole support. Costs eligible for support include salaries, consultant services, equipment rental, travel, supplies, conference services, and publications. Prospective applicants are encouraged to inquire in advance concerning possible interest on the part of an awarding Institute/Center (IC), and to obtain more information on application procedures and costs.

R15 The NIH Academic Research Enhancement Awards (AREA)

To enhance the research environment of educational institutions that have not been traditional recipients of NIH research funds, this award provides limited funds to those institutions' faculty members to develop new research projects or expand ongoing research activities in health sciences and to encourage students to participate in the research activity. As funds are anticipated to continue to be available each year, the NIH is now inviting applications for AREA grants through a standing, ongoing Program Announcement.

R21 Exploratory/Developmental Grants

To encourage the development of new research activities in categorical program areas. (Support generally is restricted in the level of support and duration.)

R24 Resource-Related Research Projects

To support research projects that will enhance the capability of resources to serve biomedical research.

R25E | Cancer Education Grant Program (CEGP)

A flexible, curriculum-driven program aimed at developing and sustaining innovative educational approaches that ultimately will have an impact on reducing cancer incidence, mortality, and morbidity, as well as on improving the quality of life of cancer patients. The CEGP accepts investigator-initiated grant applications that pursue a wide spectrum of objectives ranging from short courses to the development of new curricula in academic institutions; to national forums and seminar series; to hands-on workshop experiences for the continuing education of health care professionals, biomedical researchers, and the lay community; to structured short-term research experiences designed to motivate high school, college, medical, dental, and other health professional students to pursue careers in cancer research. Education grants can focus on education activities before, during, and after the completion of a doctoral-level degree, as long as they address a need that is not fulfilled adequately by any other grant mechanism available at the NIH and are dedicated to areas of particular concern to the National Cancer Program.

R25T Cancer Education and Career Development Program

To support the development and implementation of curriculum-dependent, team-oriented programs to train predoctoral and postdoctoral candidates in cancer research team settings that are highly interdisciplinary and collaborative. This specialized program is particularly applicable to the behavioral, prevention, control, nutrition, and population sciences but should also be considered by other areas of research (e.g., imaging, pathology) that will require sustained leadership, dedicated faculty time, specialized curriculum development and implementation, interdisciplinary research environments, and more than one mentor per program participant to achieve their education and research career development objectives.

R33 Exploratory/Developmental Grants, Phase II

To provide a second phase for support of innovative exploratory and developmental research activities initiated under the R21 mechanism. Although only R21 awardees are generally eligible to apply for R33 support, specific program initiatives may establish eligibility criteria under which applications could be accepted from applicants who demonstrate program competency equivalent to that expected under R33.

R35 Outstanding Investigator Award (OIA)

To provide long-term support to experienced investigators with outstanding records of cancer research productivity who propose to conduct exceptional research. The OIA is intended to allow investigators the opportunity to take greater risks, be more adventurous in their lines of inquiry, or take the time to develop new techniques. The OIA would allow an Institution to submit an application nominating an established Program Director/Principal Investigator (PD/PI) for a 7-year grant.

R37 Method to Extend Research in Time (MERIT) Award

To provide longer term grant support to Early Stage Investigators (ESIs). By providing such an opportunity for longer term support to ESIs, the NCI intends to give them flexibility and opportunity for creativity and innovation, and additional time to successfully launch their careers and to become more established before having to submit renewal applications. The objective of the NCI's ESI MERIT Award is to allow eligible investigators the opportunity to obtain up to 7 years of support in two segments, with the first being an initial 5-year award and the second being based on an opportunity for an extension of up to 2 additional years, based on an expedited NCI review of the accomplishments during the initial funding segment. Investigators may not apply for an ESI MERIT award. ESIs who have submitted a single-Principal Investigator (PI) R01 application that received a score within the NCI payline are eligible for consideration for the award. NCI program staff members will identify eligible candidate applications for the ESI MERIT Award and submit them to the members of the National Cancer Advisory Board (NCAB) for consideration. If recommended by the NCAB and approved by NCI leadership, the ESI R01 will be converted to an ESI MERIT (R37) for the initial 5-year funding segment.

R50 Research Specialist Award

To encourage the development of stable research career opportunities for exceptional scientists who want to pursue research within the context of an existing cancer research program, but not serve as independent investigators. These scientists, such as researchers within a research program, core facility managers, and data scientists, are vital to sustaining the biomedical research enterprise. The award is intended to provide desirable salaries and sufficient autonomy so that individuals are not solely dependent on grants held by Principal Investigators for career continuity.

R55 James A. Shannon Director's Award

To provide a limited award to investigators to further develop, test, and refine research techniques; perform secondary analysis of available data sets; test the feasibility of innovative and creative approaches; and conduct other discrete projects that can demonstrate their research capabilities and lend additional weight to their already meritorious applications. Essentially replaced in FY2005 by the R56 award.

R56 High-Priority, Short-Term Project Award

Begun in FY2005, this grant provides funds for 1- or 2-year high-priority new or competing renewal R01 applications that fall just outside the limits of funding of the participating NIH Institutes and Centers (ICs); recipients of R56 awards will be selected by IC staff from R01 applications that fall at or near the payline margins.

RL1 Linked Research Project Grant

To support a discrete, specified, circumscribed project that is administratively linked to another project or projects, and to be performed by the named investigator(s) in an area representing his or her specific interest and competencies. An RL1 award may only be disaggregated from U54 applications, and organizations may not apply for an RL1, Linked Research Project Grant. The RL1 activity code is used in lieu of the R01 for those programs that offer linked awards

Small Business Innovation Research (SBIR) (R43/44) and Small Business Technology Transfer (STTR) (R41/42) Programs

The NIH welcomes grant applications from small pose longer periods of time and greater amounts businesses in any biomedical or behavioral research of funds necessary for completion of the project.

area as described in the solicitations below. Support under the SBIR program is normally provided for 6 months/\$100,000 for Phase I and 2 years/\$500,000 for Phase II. Applicants may propose longer periods of time and greater amounts of funds necessary for completion of the project.

R41	STTR Grants, Phase I To support cooperative research and development (R&D) projects between small business concerns and research institutions, limited in time and amount, to establish the technical merit and feasibility of ideas that have potential for commercialization.
R42	STTR Grants, Phase II To support in-depth development of cooperative R&D projects between small business concerns and research institutions, limited in time and amount, whose feasibility has been established in Phase I and that have potential for commercial products or services.
R43	SBIR Grants, Phase I To support projects, limited in time and amount, to establish the technical merit and feasibility of R&D ideas that may ultimately lead to commercial products or services.
R44	SBIR Grants, Phase II To support in-depth development of R&D ideas whose feasibility has been established in Phase I and that are likely to result in commercial products or services.
S Seri	es: Research-Related Programs
SC1	Research Enhancement Award
	Individual investigator-initiated research projects aimed at developing researchers at minority-serving institutions (MSIs) to a stage where they can transition successfully to other extramural support (R01 or equivalent).
SC2	ity-serving institutions (MSIs) to a stage where they can transition successfully to other
SC2 Si2/ R00	ity-serving institutions (MSIs) to a stage where they can transition successfully to other extramural support (R01 or equivalent). Pilot Research Project Individual investigator-initiated pilot research projects for faculty at MSIs to generate prelim-

S07 Biomedical Research Support Grants (NCRR BRSG)

As an example of this funding mechanism, the NIH issued a Request for Applications (RFA) in FY2004 to provide short-term interim support for institutional activities that will strengthen oversight of human subjects research at institutions that receive significant NIH support for clinical research. Although there is considerable flexibility in the types of activities that could be supported under the BRSG program, that RFA emphasized the importance of efforts to enhance the protection of research subjects by means that would be sustained by the recipient institution after the award period ends. Awardees also are required to collaborate with other institutions conducting human subjects research and are not currently funded under this program, and to share educational resources, computer technologies, best practices, etc. Although all NIH components supporting clinical research (including the NCI) are providing support for this program, it is administered by the National Center for Research Resources (NCRR).

S10 Biomedical Research Support Shared Instrumentation Grants (NCRR SIG)

The National Center for Research Resources (NCRR) initiated its competitive Shared Instrumentation Grant (SIG) Program in FY1982. Shared Instrumentation Grants provide support for expensive state-of-the-art instruments utilized in both basic and clinical research. This program is designed to meet the special problems of acquisition and updating of expensive shared-use instruments that are not generally available through other NIH funding mechanisms, such as the regular research project, program project, or center grant programs. Applications for funds to design or to advance the design of new instruments are not accepted. The objective of the program is to make available to institutions with a high concentration of NIH-supported biomedical investigators expensive research instruments that can only be justified on a shared-use basis and for which meritorious research projects are described.

Research and Institutional Resources Health Disparities Endowment Grants—Capacity BuildingTo strengthen the research and training infrastructure of the institution, while addressing current and emerging needs in minority health and other health disparities research.

T Series: Training Programs

T15 Continuing Education Training Grants

To assist professional schools and other public and nonprofit institutions in the establishment, expansion, or improvement of programs of continuing professional education, especially for programs of extensive continuation, extension, or refresher education dealing with new developments in the science and technology of the profession.

T32 NIH National Research Service Award—Institutional Research Training Grants

To enable institutions to make National Research Service Awards to individuals selected by them for predoctoral and postdoctoral research training in specified shortage areas.

T34 Undergraduate NRSA Institutional Research Training Grants

To enhance the undergraduate research training of individuals from groups underrepresented in biomedical, behavioral, clinical, and social sciences through Institutional National Research Service Award Training Grants in preparation for research doctorate degree programs.

U Seri	es: Cooperative Agreements
U01	Research Projects—Cooperative Agreements To support a discrete, specified, circumscribed project to be performed by the named investigators in an area representing their specific interests and competencies.
U10	Cooperative Clinical Research—Cooperative Agreements To support clinical evaluation of various methods of therapy and/or prevention in specific disease areas. These represent cooperative programs between participating institutions and Principal Investigators and are usually conducted under established protocols.
U13	Conference—Cooperative Agreements To coordinate, exchange, and disseminate information related to its program interests, an NIH Institute or Center can use this type of award to provide funding and direction for appropriate scientific conferences. These cooperative agreements allow the NCI to partner with one or more outside organizations to support international, national, or regional meetings, conferences, and workshops that are of value in promoting the goals of the National Cancer Program.
U19	Research Program—Cooperative Agreements To support a research program of multiple projects directed toward a specific major objective, basic theme, or program goal, requiring a broadly based, multidisciplinary, and often long-term approach.
U2C	Resource-Related Research Multi-Component Projects and Centers Cooperative Agreements To support multi-component research resource projects and centers that will enhance the capability of resources to serve biomedical research. Substantial Federal programmatic staff involvement is intended to assist investigators during performance of the research activities, as defined in the terms and conditions of the award.
U24	Resource-Related Research Projects—Cooperative Agreements To support research projects contributing to improvement of the capability of resources to serve biomedical research.
U42	Animal (Mammalian and Nonmammalian) Model, and Animal and Biological Materials Resource Cooperative Agreements To develop and support animal (mammalian and nonmammalian) models or animal or biological materials resources available to all qualified investigators without regard to the scientific disciplines or disease orientations of their research activities or specifically directed to a categorical program. Nonmammalian resources include nonmammalian vertebrates, invertebrates, cell systems, and nonbiological systems.
U43	Small Business Innovation Research (SBIR) Cooperative Agreements—Phase I To support projects, limited in time and amount, to establish the technical merit and feasibility of R&D ideas that may ultimately lead to commercial products or services.
U44	Small Business Innovation Research (SBIR) Cooperative Agreements—Phase II To support in-depth development of R&D ideas whose feasibility has been established in Phase I and that are likely to result in commercial products or services.

U54 Specialized Center—Cooperative Agreements

To support any part of the full range of research and development from very basic to clinical; may involve ancillary supportive activities such as protracted patient care necessary to the primary research or R&D effort. The spectrum of activities comprises a multidisciplinary attack on a specific disease entity or biomedical problem area. These differ from program projects in that they are usually developed in response to an announcement of the programmatic needs of an Institute or Division and subsequently receive continual attention from its staff. Centers also may serve as regional or national resources for special research purposes, with assistance from staff of the funding component in identifying appropriate priority needs.

U56 Exploratory Grants—Cooperative Agreements

To support planning for new programs, expansion, or modification of existing resources, and feasibility studies to explore various approaches to the development of interdisciplinary programs that offer potential solutions to problems of special significance to the mission of the NIH. These exploratory studies may lead to specialized or comprehensive centers. Substantial Federal programmatic staff involvement is intended to assist investigators during performance of the research activities, as defined in the terms and conditions of award.

UG1 Clinical Research Cooperative Agreements — Single Project

To support single project applications conducting clinical evaluation of various methods of therapy and/or prevention (in specific disease areas). Substantial Federal programmatic staff involvement is intended to assist investigators during performance of the research activities, as defined in the terms and conditions of the award. NOTE: The UG1 is the single-component companion to the U10, which is used for multi-project applications only.

UG3 Phase 1 Exploratory/Developmental Cooperative Agreement

As part of a bi-phasic approach to funding exploratory and/or developmental research, the UG3 provides support for the first phase of the award. This activity code is used in lieu of the UH2 activity code when larger budgets and/or project periods are required to establish feasibility for the project.

UH2/ Exploratory/Developmental Cooperative Agreement Phase I/II

UH3

To support the development of new research activities in categorical program areas. (Support generally is restricted in level of support and in time.)

The UH3 provides a second phase for the support for innovative exploratory and development research activities initiated under the UH2 mechanism. Although only UH2 awardees are generally eligible to apply for UH3 support, specific program initiatives may establish eligibility criteria under which applications could be accepted from applicants demonstrating progress equivalent to that expected under the UH2.

UM1

Research Project With Complex Structure Cooperative Agreement

To support cooperative agreements involving large-scale research activities with complicated structures that cannot be appropriately categorized into an available single component activity code (e.g., clinical networks, research programs, or consortia). The components represent a variety of supporting functions and are not independent of each component. Substantial Federal programmatic staff involvement is intended to assist investigators during performance of the research activities, as defined in the terms and conditions of the award. The performance period may extend up to 7 years but only through the established deviation request process. ICs desiring to use this activity code for programs greater than 5 years must receive OPERA prior approval through the deviation request process.

Appendix G: Glossary of Acronyms

ADTO	A 1 1, D · T	DOODO	D: :: (C
ABTC	Adult Brain Tumor Consortium	DCCPS	Division of Cancer Control and Popu-
AHRQ	Agency for Healthcare Research and	DOEC	lation Sciences
AIDC	Quality	DCEG	Division of Cancer Epidemiology and
AIDS	Acquired Immune Deficiency	DCLG	Genetics
AICD	Syndrome	DULG	Director's Consumer Liaison Group
AISB	Applied Information Systems Branch	DCP	(now NCRA)
AMC	AIDS Malignancy Clinical Trials Consortium	DCP	Division of Cancer Prevention
ΛDΛ		DCTD	Division of Cancer Treatment and
ara Area	Awaiting Receipt of Application	DEA	Diagnosis
ANEA	Academic Research Enhancement Award	DEAS	Division of Extramural Activities Division of Extramural Activities
BRSG		DEAS	
BSA	Biomedical Research Support Grant Board of Scientific Advisors	DEAIS	Support DE A Information System
BSC	Board of Scientific Counselors	DFO	DEA Information System Designated Federal Officer
CAM		DHHS	U.S. Department of Health and
CAIVI	Complementary and Alternative Medicine	טחחט	Human Services (now HHS)
CATS	Concept to Award Tracking System	DPIC	
CBIIT	NCI Center for Biomedical Informat-	DFIG	Detection of Pathogen-Induced Cancer
CDILI		DRR	Division of Receipt and Referral
CCCT	ics and Information Technology	EDRN	
CCG	Coordinating Center for Clinical Trials Center for Cancer Genomics	EEC	Early Detection Research Network
CCR	Center for Cancer Research	EPMC	Electronic Early Concurrence
CCSG		LITIVIO	Extramural Program Management Committee
CCT	Cancer Center Support Grant Center for Cancer Training	eRA	Electronic Research Administration
CD	Career Development	ESA	Extramural Support Assistant
CDC	Centers for Disease Control and	ESATTS	Extramural Officer Science Adminis-
ODO	Prevention	LOATTO	trator Training – Tracking System
CEGP	Cancer Education Grant Program	ETCTN	Experimental Therapeutics Clinical
CGCHR	Center for Global Cancer Health	LIGIN	Trials Network
odomi	Research	eTUG	NIH eRA Technical Users Group
CGH	Center for Global Health	FACA	Federal Advisory Committee Act
CHTN	Collaborative Human Tissue Network	FDA	Food and Drug Administration
CISNET	Cancer Intervention and Surveillance	FFRDC	Federally Funded Research and Devel-
OIOIVET	Modeling Network	TTTIDO	opment Center
CIT	Center for Information Technology	FIC	Fogarty International Center
CMO	Committee Management Office	FLARE	Fiscal Linked Analysis of Research
COI	Conflict of Interest	I D IIIL	Emphasis
CPACHE	Comprehensive Partnerships to	FNLAC	Frederick National Laboratory Advi-
OFFICE	Advance Cancer Health Equity	111210	sory Committee
CRCHD	Center to Reduce Cancer Health	FNLCR	Frederick National Laboratory for
CHOILE	Disparities	THEOR	Cancer Research
CRP	Collaborative Research Partnership	FOA	Funding Opportunity Announcements
CS0	Common Scientific Outline	FOIA	Freedom of Information Act
CSCPDPC	Consortium of the Study of Chronic	FY	Fiscal Year
333. 2. 3	Pancreatitis, Diabetes, and Pancreatic	HHS	Department of Health and Human
	Cancer		Services (replaces DHHS)
CSR	Center for Scientific Review	IC	Institute/Center
CSSI	Center for Strategic Scientific	ICRP	International Cancer Research
- -	Initiatives	- 	Partnership
CTAC	Clinical Trials and Translational	IDeA	Institutional Development Award
	Research Advisory Committee	IMAT	Innovative Molecular Analysis
DCB	Division of Cancer Biology		Technologies
			<u> </u>

IMPAC	Information for Management, Plan-	OSP	Office of Scientific Programs
	ning, Analysis, and Coordination	PA	Program Announcement
IRG	Initial Review Group	PAR	Reviewed Program Announcement
IRM	Information Resources Management	PCP	President's Cancer Panel
IT	Information Technology	PCRB	Program Coordination and Referral
LOI	Letter of Intent	FUND	Branch
		DD	
LRP	Loan Repayment Program	PD	Pharmacodynamics
MBRS	Minority Biomedical Research Support	PHS	Public Health Service (HHS)
MERIT	Method to Extend Research in Time	Pl	Principal Investigator
MSI	Minority-Serving Institution	P0	Program Official
NCAB	National Cancer Advisory Board	POA&M	Plan of Actions and Milestones
NCCCP	NCI Community Cancer Centers	PQ	Provocative Questions
	Program	PRESTO	Program Review and Extramural Staff
NCI	National Cancer Institute		Training Office
NCORP	NCI Community Oncology Research	RAEB	Research Analysis and Evaluation
1400111	Program	TULED	Branch
NCRA	NCI Council of Research Advocates	R&D	Research and Development
NONA	(replaces DCLG)	RFA	
NCRR			Request for Applications
NUNN	National Center for Research	RFP	Request for Proposals
NOTN	Resources	RIO	Research Integrity Officer
NCTN	National Clinical Trials Network	RM	Road Map
NDPA	NIH Director Pioneer Award	RO	Referral Officer
NED	NIH Electronic Directory	RPG	Research Project Grant
NExT	NCI Experimental Therapeutics	RPRB	Research Programs Review Branch
NFRP	NCI Funded Research Portfolio	RTCRB	Research Technology and Contract
NGRAD	NCI Grant-Related Directory		Review Branch
NHLBI	National Heart, Lung, and Blood	RTRB	Resources and Training Review Branch
	Institute	SA	Staff Assistant
NIAAA	National Institute on Alcohol Abuse	SA&A	Security Assessment and Authorization
	and Alcoholism	SBIR	Small Business Innovation Research
NIAID	National Institute of Allergy and Infec-	SBIRDC	SBIR Development Center
1411 113	tious Diseases	SEER	Surveillance, Epidemiology, and End
NIEHS	National Institute of Environmental	OLLIT	Results
MEHO	Health Sciences	SEP	Special Emphasis Panel
NIH	National Institutes of Health	SGE	Special Government Employee
		SIC	
NLM	National Library of Medicine		Special Interest Category
NRSA	National Research Service Award	SIG	Shared Instrumentation Grant
OBBR	Office of Biorepositories and Biospeci-	SMW	Science Management Workspace
	men Research	SPL	Scientific Program Leader
OBF	Office of Budget and Finance	SPORE	Specialized Program of Research
OCG	Office of Cancer Genomics		Excellence
OD	Office of the Director	SPRS	Secure Payee Reimbursement System
OEA	Office of Extramural Applications	SRB	Special Review Branch
0ER	Office of Extramural Research	SREA	Scientific Review and Evaluation
OFACP	Office of Federal Advisory Committee		Activities
	Policy	SRLB	Special Review and Logistics Branch
OHAM	Office of HIV and AIDS Malignancies	SRO	Scientific Review Officer (formerly
OIA	Outstanding Investigator Award	00	Scientific Review Administrator)
OPERA	Office of Policy for Extramural	STTR	Small Business Technology Transfer
OI LIIA	Research Administration	OTTIL	Research
ODDDC		T&E	
ORRPC	Office of Referral, Review, and Pro-		Training and Education
	gram Coordination	TMEN	Tumor Microenvironment Network

Appendix H: Cancer Information Sources on the Internet

NCI Website

The National Cancer Institute maintains a number of websites containing information about the Institute and its programs. All NCI websites, including those designed to provide cancer-related information to the general public and physicians, can be reached from the NCI home page at https://www.cancer.gov/.

DEA Websites

The following websites are maintained by the DEA to provide detailed information to researchers and the public about NCI funding opportunities and Advisory Boards and groups. Links to the individual DEA Web pages via the DEA home page are listed below.

Funding Opportunities/Policies

https://deainfo.nci.nih.gov/funding.htm

Comprehensive information about external funding opportunities for cancer research; lists of active PAs and RFAs; recently cleared concepts; grant policies and guidelines; downloadable application forms.

https://deais.nci.nih.gov/foastatus/?nt=P

Active PAs, with links to detailed descriptions.

https://deais.nci.nih.gov/foastatus/?

Active RFAs, with links to detailed descriptions.

https://deainfo.nci.nih.gov/grantspolicies/index.htm Links to full-text NCI and NIH policies related to grants and grant review (e.g. Guidelines on the

grants and grant review (e.g., Guidelines on the Inclusion of Women and Minorities as Subjects in Clinical Research and Instructions to Reviewers for Evaluating Research Involving Human Subjects in Grant and Cooperative Agreement Applications).

https://grants.nih.gov/policy/early-investigators/index.htm

New and Early Stage Investigator Policies.

https://www.cancer.gov/grants-training/training The Center for Cancer Training (CCT).

https://www.cancer.gov/about-nci/organization/oga

Office of Grants Administration (OGA) manages all NCI business-related activities associated with negotiation, award, and administration of NCI grants and cooperative agreements.

Advisory Boards and Groups

https://deainfo.nci.nih.gov/advisory/index.htm

Links to the home page of each NCI Advisory Board, Committee, Group, etc.

https://deainfo.nci.nih.gov/advisory/pcp/index.htm

President's Cancer Panel Charter; meeting agendas, meeting minutes, annual reports.

https://deainfo.nci.nih.gov/advisory/ncab/ncab.htm

National Cancer Advisory Board Charter; members of subcommittees, meeting agendas.

https://deainfo.nci.nih.gov/advisory/ncab/ncab-meetings.htm

NCAB meeting information (agenda, minutes, and presentations).

https://deainfo.nci.nih.gov/advisory/bsa/bsa.htm

Board of Scientific Advisors Charter; members of subcommittees, meeting agendas.

https://deainfo.nci.nih.gov/advisory/bsa/bsameetings.htm

BSA meeting information (agenda, minutes, and presentations).

https://deainfo.nci.nih.gov/advisory/fac/fac.htm

NCI Frederick National Laboratory Advisory Committee Charter, functional statement, members, meeting information, and subcommittees.

https://deainfo.nci.nih.gov/advisory/bsc/bs/bs.htm

Board of Scientific Counselors (Basic Sciences) Charter; functional statement, and members.

https://deainfo.nci.nih.gov/advisory/bsc/cse/cse.htm

Board of Scientific Counselors (Clinical Sciences and Epidemiology) Charter, functional statement, and members.

https://deainfo.nci.nih.gov/advisory/ctac/ctac.htm Clinical Trials and Translational Research Advisory Committee Charter, members, minutes, and agendas.

https://deainfo.nci.nih.gov/advisory/ncra/ncra.htm NCI Council of Research Advocates (NCRA) Charter, functional statement, members, and meeting information.

https://deainfo.nci.nih.gov/advisory/irg/irg.htm NCI Initial Review Group (IRG) Charter, functional statement, and members.

https://deainfo.nci.nih.gov/advisory/sep/sep.htm Special Emphasis Panel Charter, functional statement, and rosters of most recent review meetings.

https://gsspubssl.nci.nih.gov/presentations NCI Advisory Board Presentations since 2011.

Other NIH Websites

https://www.nih.gov NIH Homepage

https://grants.nih.gov/grants/how-to-apply-application-guide.html

Grants & Funding – Applying electronically

https://grants.nih.gov/policy/index.htm

Grants & Funding - Grants policies and guidance

https://grants.nih.gov/funding/index.htm

Grants & Funding – Funding opportunities and notices

https://researchtraining.nih.gov/

Extramural training mechanisms

https://projectreporter.nih.gov/reporter.cfm

Research Portfolio Online Reporting Tools









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